

Navigating PFT Certifications

How does the industry “certify the certifiers” for a consistent standard of education and experience? BY SHIRLEY ARCHER, JD, MA

Mainstream consumers are starting to embrace personal training, currently one of the leading growth trends in the fitness industry. Once considered within the reach only of celebrities and wealthy socialites, personal fitness trainer (PFT) services are now valued by more people, and more of them are willing to pay. Leading fitness centers throughout the U.S. have thriving personal training programs. According to the “2003 Profiles of Success” survey of International Health, Racquet & Sportsclub Association (IHRSA) club members, 50% of clubs that responded reported that personal training services were among their five most profitable programs.

Growth, however, brings hot issues to the forefront. Industry leaders cannot ignore increased consumer demand for competency assurance, increased risk of liability and increased scrutiny of the industry by state legislators. To respond, industry leadership must proactively pursue steps that will help:

- Determine how to ensure positive consumer perceptions.
- Determine how to develop methods of self-regulation that other professionals and government agencies would respect and that would avert governmental intervention and control.
- (For those who want to expand into the healthcare market,) determine how to create a level of standardization among PFTs that would meet the requirements of working formally with healthcare providers and insurers.

Recently, these pressures culminated in IHRSA’s taking an active position that has stimulated an industry debate regarding how best to set standards for organizations that certify personal trainers. This spring, IHRSA recommended that, as of December 31, 2005, all of its member clubs hire PFTs who hold at least one current certification from a certifying organization or agency that has obtained third-party accreditation of its certification procedures and protocols from an independent, experienced and nationally recognized accrediting body.

In particular, IHRSA identified the National Commission for Certifying Agencies (NCCA), the accreditation body of the National Organization for Competency Assurance (NOCA)—an organization with a 26-year history—as an acceptable accrediting organization. IHRSA underscored that other equivalent accrediting organizations may be recognized as well, as they come to IHRSA’s attention. For further details on the timeline of this announcement, see “History of the Debate,” below.

IHRSA’s recommendation is directed primarily to its 4,500 member clubs in the United States. According to IHRSA statistics, IHRSA member clubs serve about 28% of all Americans who belong to health clubs, fitness centers or gyms of any kind. This translates into over 11 million consumers. The certification standards debate, however, impacts everyone in the fitness field.

This discussion represents a landmark formal movement within the industry toward increasing professionalism and standardization. What began as an initial movement among fitness trainers and instructors 25 years ago to organize and create certifications to enhance consumer perception of legitimacy has now evolved into a second movement by club owners and operators to organize and standardize certifications to further increase the perception of legitimacy.

Fitness as a profession is at a pivotal point—many of its features require attention. What do you see in the future of fitness? How do you think the industry should best address the competing growth pressures? Where and how should you position yourself as a fitness professional in this rapidly changing environment?

The Heart of the Matter: Certification Vs. Continuing Education

“[To understand this issue,] you clearly need to understand the difference between certification and continuing education,” says Ken Germano, president of the American Council on Exercise (ACE), a nonprofit organization based in San Diego. “To call a continuing education program a certification is a disservice. How can there be [so many] certifying organizations? How can one person be a certifying organization?” What Germano is referring to is the purported more than 200 organizations in the United States that presently offer a variety of fitness certifications.

Tom Baechle, EdD, CSCS*D, NSCA-CPT*D, executive director of the National Strength & Conditioning Association (NSCA) Certification Commission, in Lincoln, Nebraska, agrees that the differences among certification, education and continuing education need to be better understood within the industry. “The reality is that if you are really looking to a national certification that is going to provide protection to the public, going to organizations that approach the certification exam on a professional basis makes sense. At the very least, a job analysis of the profession needs to be performed to determine which knowledge, skills and abilities, or KSAs, are associated with the profession, which, in this instance, is personal training. With no exam development standards in place, consumers have no as-

surances that their ‘certified’ personal trainer has demonstrated the KSAs necessary to provide safe and effective training.”

According to Bahram Akradi, president, chairman and chief executive officer (CEO) of Life Time Fitness Inc., a chain of 33 fitness centers located in eight markets and headquartered in Eden Prairie, Minnesota, “The tremendous amount of inconsistency as it relates to the knowledge level and lack of core competencies of personal trainers and fitness people in the industry in general was one of the principal reasons for us to push for standards for employees in the industry. We believe that as an industry, we will always have more power and more opportunity for change and improvement by working together as a collective. The driving force [behind the IHRSA initiative], however, is that it is the right thing to do for our customer,” he says. “We strongly believe as an organization that education and knowledge translate into how we provide tangible member benefits. We want to see improvements in quality and consistency. We are totally concerned with the perception of the consumer.”

James Whitehead, executive vice president of the American College of Sports Medicine (ACSM), supports the process of third-party accreditation for certifying organizations. “Overall, when you have a quality improvement process that is relying on

History of the Debate

2002

- IHRSA Industry Leadership Council—under chairperson Bahram Akradi, chief executive officer and president of Lifetime Fitness Inc.—recommends that IHRSA establish a committee to examine standards for certification of personal trainers.
- IHRSA forms a committee of six prominent certifying organizations:
 - Aerobics and Fitness Association of America
 - American College of Sports Medicine
 - American Council on Exercise
 - Cooper Institute
 - National Academy of Sports Medicine
 - National Strength and Conditioning Association

an independent recognized body, going through those external accreditation processes benefits the field, the public and the organizations that are providing services in that arena. Current certifying organizations should not think it is going to be unrealistically easy to achieve. Instead, they should examine the requirements and determine if NCCA accreditation is realistic, desirable or achievable for them.”

Ken Baldwin, MEd, assistant director of the department of health and kinesiology at Purdue University in West Lafayette, Indiana, and program coordinator for San Diego State University’s Professional Certificate in Personal Fitness Training program says, “Personally, I feel that many personal training certifications are ill designed and lacking in content to adequately prepare someone to safely design exercise programs with competency. We still need continuing education providers, conferences and organizations to provide continuing education. These organizations, however, should not be in the certifying business. They are in the education business. And the certifying organizations will have to determine the quality of those continuing education providers.”

Michael Clark, MS, PT, NASM-PES, CEO and president of the National Academy of Sports Medicine (NASM), agrees

and even suggests taking it one step further. Clark thinks that third-party accreditation not only is good for certification organizations but should be extended to include continuing education providers. “Third-party validation (such as NCCA accreditation) is a cornerstone for any group of professionals seeking credibility, standardization and acceptance from other professionals. We must create the standards and core competencies that are necessary for a fitness professional to be safe and effective with all clients. We must also pursue accreditation and standardization for all continuing education to make sure that once a fitness professional is certified, he or she is following evidence-based, valid, reliable and credible continuing education.”

Industry leaders seem to agree that creating uniform standards within the industry for organizations that certify PFTs—and eventually other fitness professionals such as group exercise instructors and floor staff—is a positive move. However, how these standards should be established is under debate. Further, while most seem to agree that third-party accreditation for certification organizations is a good first step, how to determine what organizations should provide this accreditation for the certifying bodies is also subject to discussion.

2003

- In December, IHRSA announces a recommendation that, as of December 31, 2004, IHRSA member health clubs hire personal trainers who hold at least one current certification from a certifying organization/agency that has obtained third-party accreditation of its certification procedures and protocols from an independent, experienced and nationally recognized accrediting body. In particular, IHRSA identifies the National Commission for Certifying Agencies (NCCA), the accreditation body of the National Organization for Competency Assurance (NOCA), as an acceptable accrediting organization. IHRSA indicates that other equivalent accrediting organizations may be recognized as they are brought to IHRSA’s attention.

2004

In March, IHRSA extends the date for its hiring recommendation to December 31, 2005. IHRSA reiterates its identification of NCCA—the accreditation body of NOCA, an organization with a 26-year history—as an acceptable accrediting organization, noting that other equivalent accrediting organizations may be recognized as well, as they come to IHRSA’s attention.

What Does Third-Party Accreditation Mean?

Third-party accreditation simply means that the organization providing a certification exam is reviewed by an objective, unrelated third party that evaluates the validity of the exam and its examination procedures. If an exam resulting in the issuance of a certification to perform professional services is to be considered valid and reliable, certain standards must be met. Otherwise, the certification is not meaningful in the eyes of other professionals, in a court of law or among consumers.

Baechle explains, “There appears to be a good deal of confusion among terms such as registry, licensure, certification and accreditation—especially the latter two. Accreditation applies to certification organizations, not to personal trainers. Achieving third-party accreditation by a nationally respected accrediting agency means that the organization providing the certification exam has had its exam development process and its policies and procedures thoroughly evaluated by an objective, unrelated third-party; and its exams have been found to be valid and reliable. Validity refers to the question of whether the exam measures the KSAs, and reliability refers to the ability of the exam to produce consistent results.

“The exam development process that leads to the issuance of a certification associated with personal training should meet high accreditation standards, since the ultimate purpose for having certifications is to protect the public,” he points out. “Unfortunately, not all certifying bodies that currently offer personal trainer certifications are administering valid and reliable exams. The industry’s support of well-designed exams that are challenging to pass will create a higher level of public trust and respect by allied health professionals. IHRSA’s position in recommending the use of personal trainers that are certified by organizations from a nationally recognized accrediting agency is an important step in the right direction for the fitness industry.”

Bill Howland, director of public relations and research for IHRSA, stresses that IHRSA’s recommendation to its member clubs to hire personal trainers that have been certified by an organization that has received third-party accreditation is precisely that—a recommendation. “This is clearly a recommendation, not a requirement.”

“Given the fact that personal training is the most frequently offered program in health clubs today and given the soaring popularity of training among health club members, the association felt it necessary and critically important to develop a recommendation for club operators that would best reflect the industry’s efforts to improve safety and effectiveness in these programs,” says John McCarthy, executive director of IHRSA. “I’m confident that the third-party accreditation recommendation we make to our members will only enhance their personal training practices and the experience of health club patrons.”

Howland says, “The genesis for IHRSA’s recommendation really came from three things.” First, he says, club owners are well aware that personal training is popular with consumers and important to a facility’s revenue. “As club owners were talking among their peers, it was clear that the levels of knowledge and

skills, the backgrounds and the competencies of certified personal trainers were all over the map,” Howland says.

“Second, from the business side, the lack of standards presents hiring and quality control issues, as well as training issues, and implications from both the operational side and the consumer safety side [for our member organizations]. We did not believe that litigation was a huge problem, but I think that people anticipate there could be a problem in the future. We believe it is better to be proactive.

“Third, the final piece in terms of being proactive is that members of our government relations staff have had conversations with [representatives of] several state governments that are considering regulation of personal trainers. If the industry can demonstrate that it is being proactive and is interested in consumer safety, then it can avoid regulation.”

Why Choose NCCA?

The question arises as to why IHRSA recommended NCCA, in particular, as a valid accrediting organization. Howland explains, “Several of the certifying groups that we were talking to [when we were considering the issue of standards for organizations that certify personal trainers] brought the recommendation of NOCA and NCCA to IHRSA’s attention. When we looked at it, we decided that if the goal is consumer safety and also the ability to demonstrate to audiences outside our industry—such as the public at large, state governments and employers—that we are making a real effort to address consumer safety on a proactive level, NCCA accreditation made sense. NCCA is recognized both by some industries and states as the standard for accreditation. Since NCCA is recognized outside the fitness industry as a leader in the field of accrediting certifying organizations, then that translates into recognition that is meaningful outside the industry.

“NCCA accreditation is proven, there is a blueprint and it is widely recognized,” he says. “IHRSA’s board intentionally left open the possibility of adding other accrediting organizations if other groups can demonstrate that they are comparable alternatives that would help us to achieve our goals.”

Baechle adds, “In contrast to an attempt to mandate that all fitness credentialing organizations unite to develop one exam with all the same KSAs being assessed, NCCA standards allow for the development of exams that can assess specific emphasis areas, such as one-on-one or group training or older-adult versus youth training, by the various credentialing organizations. NCCA accreditation, therefore, supports and strengthens the existing independent network of fitness certifying organizations.

“Furthermore, recognition by the fitness industry of trainers who have acquired fitness-related certification credentials from NCCA-accredited organizations helps to convey to the public that the fitness industry is making a concerted effort to provide safe and effective training. Because NCCA is highly respected by many allied health agencies and organizations, using its accreditation standards also serves to further enhance the image of the fitness industry.”

NCCA Accreditation Standards

Most leaders of the major certifying organizations support the choice of NCCA as an independent third-party accreditation organization. ACE and NSCA are both currently accredited by NCCA. ACSM, the Cooper Institute, and NASM are all in the process of receiving NCCA accreditation.

Germano explains why ACE chose to seek NCCA accreditation. “When you look at the history, the National Organization for Competency Assurance was created in 1977, under the Carter administration, with federal funding from the Department of Health and Human Services. [The NOCA] mission was to develop standards for quality certification in the allied health fields to enhance and ensure public safety and to accredit organizations that met those standards.

“There isn’t any other accrediting organization that is the equivalent,” he says. “NCCA standards meet or exceed the requirements set forth by the American Psychological Association, the U.S. Equal Employment Opportunity Commission, the National Council on Measurement in Education and the American Educational Research Association, and are recognized by many others. [NCCA standards are] defensible in a court of law. You only need to look at the mission and vision of NCCA.”

Howland says, “We’re very excited about the NOCA and NCCA accreditation process because another benefit to the industry from certifying organizations receiving accreditation is the value added from educating the public, [a goal] that is part of NCCA’s mission. Part of NOCA’s reason for existence is to promote consumer safety. NCCA helps certifying organizations. They earn the right to advertise and promote themselves as accredited, and NOCA and NCCA will promote them. That is an additional benefit that will help educate the public.”

Dissension

Not all groups, however, support the choice of NCCA as an accrediting body. Other certifying organizations, such as the Aerobics and Fitness Association of America (AFAA), are seeking to have other accreditation organizations recognized in addition to NCCA. Linda D. Pfeffer, president of AFAA in Sherman Oaks, California, says, “Although AFAA is a full participant in IHRSA’s industry initiative, AFAA has expressed some misgivings about various proposals under consideration.

“First, AFAA believes that the industry initiative should be an open process and that all fitness organizations should be invited to participate. AFAA is pleased that IHRSA has broadened the reach by inviting additional organizations to participate, but more work is necessary to make it a truly ‘industry-wide’ initiative.

“Second, AFAA believes that more than one accrediting agency should be brought into the process,” Pfeffer says. “So far, IHRSA has announced that it will only recognize accreditations issued by a single agency, the National Commission for Certifying Agencies (NCCA). AFAA urges that additional agencies be recognized along with NCCA.”

Howland clarifies, “IHRSA intentionally left open the op-

tion or possibility that in addition to NCCA there may be comparable alternatives. In fact, some of the certifying groups are currently working to investigate that question—hopefully to assess objectively whether there are other accrediting groups that would help us achieve our goals.”

Susan Sterling, EdD, vice president and director of education and certification at the Cooper Institute in Dallas, says, “There are many directions that quality assurance can take, with national accreditation being one of them. National accreditation addresses the policies and procedures of the certifying body, not the com-

For Further Information About Accreditation Organizations

National Organization for Competency Assurance (NOCA)

2025 M St. N.W., Ste. 800

Washington, DC 20036

www.noca.org

Phone: (202) 367-1165

National Commission for Certifying Agencies (NCCA)

NCCA is the accreditation body of NOCA.

Commission on Accreditation of Allied Health Education Programs (CAAHEP)

35 E. Wacker Dr., Ste. 1970

Chicago, IL 60601

www.caahep.org

Phone: (312) 553-9355

Accrediting Council for Continued Education and Training (ACCET)

1722 N St. N.W.

Washington, DC 20036

www.accet.org

Phone: (202) 955-1113

petency of the personal trainer. Future quality assurance should also address the important issue of educational content and proficiency skills of the personal trainer.”

What Comes Next?

Many agree that third-party accreditation is a good first step. But how will this unfold? In the 1980s the first round of certification was driven by the group fitness instructor market, which wanted to ensure the safety of its clients. The current movement is being driven by clubs and is due to market growth and needs. The next wave may well come from insurers and medical companies that want to know if they can look to fitness professionals for help with diabetes, obesity and other harmful side effects of sedentary living. If the medical community turns to fitness, will we have the standards and protocols in place so there can be reimbursements and referrals from healthcare providers? The sense is that there could be two different levels of PFT certifications: one that provides trainers who can work with healthy clients and another that provides PFTs qualified to deal with specific exercise prescriptions.

Whitehead agrees, saying, “ACSM has certifications for those individuals who are better prepared to identify or deal with those who have a health risk or known condition. There are other certification products that are geared toward dealing exclusively with apparently healthy populations.

“ACSM, of course, also does much that produces the body of knowledge that is widely used and relied on by the field,” Whitehead adds. “For those who are pursuing academic preparation in the exercise sciences, we are also leading the effort to standardize university curricula and to accredit educational programs through another accreditation organization known as the Commission on Accreditation of Allied Health Education Programs, or CAA-HEP.”

Mike Niederpruem, MS, national director of certification and registry programs for ACSM, says, “This is an important time for the industry and the field. We don’t consider either to be ‘broken’ and therefore needing dramatic and fundamental change. Rather, we have a fabulous opportunity to take our existing situation and make incremental but substantial progress that preserves the best of everything, including the organizations that educate and certify, and just as important, the fine professionals who currently make up the field.”

Another Approach: Standardized National Board Examinations

Some industry leaders are advocating an alternate strategy to accreditation. They support a two-pronged approach that includes third-party accreditation of certifying organizations along with the creation of a national standardized test for fitness professionals that could serve as a basis for future licensing. Sal Arria, DC, founder of the National Board of Fitness Examiners formed in 2003 in Santa Barbara, California, says, “Accreditation is a wonderful thing. It ensures that we teach our programs in a good manner. But it does nothing to ensure that our curriculum is on a national standard based on a scope of practice from studying the industry. How does that [third-party accreditation of certifying organizations] ensure that our industry has a national standard? We have formed the National Board to create and define national scopes

of practice. Right now, everyone is clumped into one category of ‘personal trainer,’ regardless of how you have been trained or certified.

“What we are proposing is to create different levels. Initially, we are working with only three groups based on skill sets, surveys and examinations. The names of the groups haven’t been decided, but for now let’s refer to them as floor instructor, personal trainer and medical exercise specialist. Our goal is to deploy our first national exam—which will be geared to the personal trainer level—the first quarter of 2005. It’s a two-tier testing system. We go to school and get certified, and we still sit for boards.”

In contrast, Baldwin believes that the focus should not yet be on national exams, but rather on training and education. “Before we set national standards or board examinations, we need to create educational standards. To have a true industry we need to have uniform training standards. That comes first, before we think about boards or licensure.”

Others believe that licensure may serve as a barrier to entry to the profession. Greg Mack, CEO of Physicians Fitness in Columbus, Ohio, and the 2003 IDEA Personal Trainer of the Year, says, “[Licensure is a] tough issue. The profession has evolved to a high level now and has generally accepted the current pedagogy as sufficient. Licensure would put a lot of trainers out of business.”

Whitehead has a similar viewpoint. “Licensing is a particular word, usually associated with occupational regulation and state regulation. When it gets to a time when obesity and lack of physical activity are chronic health problems for this country, do we want to do anything to restrict the number of [fitness professionals] who are capable? Everyone would say no. When you see other fields go through a board certification or licensure process, you see a number of different things. The number of professionals who practice declines, and the cost to the public goes up. Those are two possible trends that are not in the best interest of public health.”

Peter Davis, CEO of IDEA Health & Fitness Association in San Diego, adds, “Another concern is that if you make the standard too difficult before the industry is ready for it, then you will make it too hard for people to qualify. There needs to

be a well-thought-out transition so that there is enough labor to meet demand and we can continue to take the industry where it needs to go.”

A Future of Opportunity

The industry is reaching a new stage in its evolution, becoming even more sophisticated and gaining greater legitimacy. What the future will look like remains to be seen. However, the demand for fitness professionals in the healthcare continuum is sure to push future growth in creating standards for both training and certification so that certain personal trainers can meet the expectations of healthcare providers and insurers. It also seems clear that not all trainers will necessarily need to work at a level commensurate with a medical exercise specialist. More choices and the growth of well-defined niches for specialization simply spell out chances for even more opportunities.

Fitness professionals are privileged to have the potential to seek out education and to become qualified to work with people of all ages, sizes, shapes and levels of ability, in multiple contexts. Now, more than ever, if you have a passion for this profession, you can create the job of your dreams. As Pamela Vaull Starr wrote, “Reach high, for stars lie hidden in your soul. Dream deep, for every dream precedes the goal.”

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