Criteria for Exercise Education Curriculum Competency Framework for Exercise Professionals

The Parkinson's Foundation uses the **Criteria for Exercise Education Curriculum** and **Competency Framework for Exercise Professionals** together to establish expectations for Parkinson's-specific exercise education and the exercise professionals who complete that education.

The **Criteria for Exercise Education Curriculum** define the Parkinson's Foundation's expectations for the content and structure of programs and courses that educate exercise professionals to work with people with Parkinson's disease (PD). The criteria focus on **what the educational curriculum should include** to reflect current evidence and best practices in Parkinson's-specific exercise.

The Competency Framework for Exercise Professionals defines the knowledge and skills exercise professionals should gain through that education and be prepared to apply when working with people with PD. The competencies focus on **what the exercise professional should know and be able to do** as a result of the education.

The Criteria and Competencies are organized together across **five standards**. Within each standard, the **Criteria** identify what should be addressed through the educational curriculum, and the **Competencies** identify what exercise professionals should know and be able to apply as a result of that education.

Exercise professionals are expected to maintain their relevant certification (NCCA, ISO/IEC 17024) and a valid CPR certification while training and leading exercise for people with PD.

1. Parkinson's Disease: Foundational Information on the Diagnosis, Treatment, and Role of Exercise

Criteria for Exercise Education Curriculum

The curriculum is designed to provide education on the:

- Fundamental principles of PD, including demographics of the Parkinson's population (e.g., age, gender, race), personal and social impacts, basics of pathophysiology, disease progression and stages, symptoms (including motor and non-motor), cognitive changes, and related neurological diseases.
- Clinical intervention options for people with PD, including medical & surgical management, rehabilitation therapies, psychosocial support, wellness, and exercise.
- Importance of the interprofessional care team, including the role of the exercise professional.
- Evidence-based benefits of exercise for people with PD (health, neurological, physical, social, emotional) and potential barriers (risk of injury, other complications and comorbidities).

Competencies for Exercise Professionals

Participants will be able to apply their knowledge of PD to:

- Discuss the range of symptoms and clinical interventions with a person with Parkinson's and their care partners.
- Identify the potential impacts on an individual's quality of life resulting from PD-related impairments, functional limitations, and disrupted social roles.
- Discuss the overall benefits of exercise for people with PD.
- Identify, plan, and adjust for potential complications and comorbidities.
- Recognize, manage, and communicate how PD, as well as other comorbidities, can increase an individual's risk of injury and other complications from exercise.

2. Screening and Testing for People with Parkinson's Disease to Participate in Exercise

Criteria for Exercise Education Curriculum

The curriculum is designed to provide:

- Education on PD-specific health-risk screening and documentation (e.g., health history, fitness goals, medical release, current/past activity, exercise restrictions/contraindications, liability waiver/release) for different exercise options prior to exercise participation.
- Instruction and demonstration of exercise testing (e.g., Aerobic, Strength, Flexibility, Neuromotor/Functional Training/Balance, Agility, & Multitasking (BAM)) required for the exercise plan prior to participation.
- Guidance on identifying exercise options for people with PD, considering their current fitness level, abilities (e.g., motor, non-motor), safety and health risks, practical feasibility (e.g., location, economics, stage of the disease), and personal goals.

Competencies for Exercise Professionals

Participants will be able to:

- Select health-risk screening and exercise tests as appropriate for the exercise plan.
- Evaluate screening results to determine if a person with Parkinson's is presumed reasonably safe to participate in the physical fitness program, prior to conducting any exercise tests.
- Perform relevant exercise tests and interpret the results.
- Utilize the screening and testing results to develop an exercise plan.

3. Group/Individual Exercise Design for People with Parkinson's Disease

Criteria for Exercise Education Curriculum

The curriculum is designed to teach participants how to:

- Design exercise plans for people with PD that include modifications, progressions, and regressions.
- Discuss all physical fitness components specified by the *Parkinson's Exercise Guidelines*, including those not directly addressed by the education provider's curriculum.
- Create and maintain a safe environment for exercise (e.g., facility/home/outdoor fall or trip hazards) by considering PD-specific safety risks, spotting techniques, and (if teaching a class) instructor-volunteer/client ratios.
- Cue, teach, model, and break down movement sequences that facilitate safe and effective movement for people with PD.

Competencies for Exercise Professionals

Participants will be able to:

- Design exercise plans by:
  - Selecting exercises with disease-specific considerations (e.g., extended warm-up, range of motion, attention to heart rate, recovery time).
  - Incorporating the components of physical fitness specified by the *Parkinson's Exercise Guidelines*.
  - Considering other PD-related factors (e.g., cognitive/emotional, functional skills, activities of daily living) and challenges (e.g., stooped posture, balance/weight-shifting, axial rotation, transitions/multi-directional stepping, gait, rigidity, non-motor symptoms).
- Select appropriate equipment based on the exercise plan and implement safety protocols as needed, given PD-specific safety risks.
- **(If teaching a class)**: Consider instructor-volunteer/client ratios and accommodations for disease progression (e.g., participation of care partners), including the accommodation of several ability levels within the same class.

4. Exercise Leadership for Exercise Professionals Working with People with Parkinson's Disease: Human Behavior and Counseling

Criteria for Exercise Education Curriculum

The curriculum is designed to teach participants how to:

- Encourage people with PD to exercise within their abilities to optimize performance, while recognizing challenges (e.g., fitness level, impairments, injuries, cognitive ability, disease progression, comorbidities).
- Monitor for safety issues based on PD-specific risk factors (e.g., functional mobility deficits, freezing of gait, orthostatic hypotension, "off" time, dyskinesias, deep brain stimulation [DBS], cognitive impairment, mental health) that can lead to falls or other adverse events.
- Apply behavior change strategies (e.g., goal setting, motivation, building self-efficacy/self-confidence, developing resilience, self-advocacy) to facilitate engagement and program adherence.
- Manage factors impacting legal risk as an exercise professional and ways to minimize their risk (e.g., liability insurance, waivers, staying within scope of competency, record keeping, confidentiality).
- Develop engaging interpersonal relationships to foster camaraderie through a sense of community and social support.

Competencies for Exercise Professionals

Participants will be able to:

- Teach people with PD to optimize their exercise performance by adapting exercise instruction based on individual capabilities, capacities, constraints, safety considerations, and changes in health status (e.g., fitness level, motor and non-motor symptoms, impairments, injuries, cognitive ability, disease progression, comorbidities, surgeries).
- Apply strategies that promote behavior change (e.g., goal setting, motivation, self-efficacy, resilience, self-advocacy) to facilitate engagement and program adherence.
- Mitigate legal risk and apply their understanding of responsibilities as an exercise professional (e.g., liability insurance, waivers, staying within scope of competency, incident reporting, and when medical clearance is required or needs to be revisited).
- Facilitate opportunities for peer emotional support among group participants.

5. Interprofessional Communication and Program Development

Criteria for Exercise Education Curriculum

The curriculum will:

- Encourage participants to build relationships and collaborate with other health and wellness providers in the community.
- Instruct participants in how and when to refer people with PD to members of the interprofessional care team, including medical, rehabilitation, and psychosocial professionals.
- Support participants in understanding how to leverage existing community resources to help establish or support PD-specific exercise opportunities.
- Incorporate timely updates based on evidence-informed research and advances in treatment options.

Competencies for Exercise Professionals

Participants will be able to:

- Demonstrate the ability to build and maintain an interprofessional care network, collaborate, and deliver culturally responsive, person-centered care for people with PD.
- Encourage people with PD to visit their physical therapist on a regular basis for initial and re-evaluation.
- Support people with PD in seeking appropriate care from physicians and other members of the interprofessional care team as appropriate.
- Integrate care partners and other support persons into individualized exercise plans to promote safety, adherence, and successful exercise participation.

To learn more, visit Parkinson.org/Accreditation