Risk management is the “process of making and carrying out decisions that will minimize the adverse effects of accidental losses upon an organization” (14). Accidental loss can be in the form of income or property, and often results from negligence. In a gym or health club, poorly maintained property, malfunctioning equipment, or a breach of duty by personnel can result in a negligence lawsuit. One such breach of duty in a gym or health club that is commonly found is when a personal trainer works outside their scope of practice, which can be defined by their level of experience and education (17). Therefore, having a clear understanding of the strengths, weaknesses, opportunities, and threats (SWOT) from offering personal training services needs to be considered in order to optimize the quality of care and to mitigate potential litigation.

BACKGROUND
As an example, Acme Fitness has a 50,000 square foot fitness facility boasting close to 5,000 members. The facility has free weights, selectorized machines, and plate-loaded machines, as well as a large selection of cardiovascular equipment that includes treadmills, elliptical machines, stair climbers, and stepmills. The gym is staffed by a number of full-time sales representatives whose primary responsibility is to sell memberships and services. There is also a fitness director who oversees a number of staff trainers. The fitness director’s salary is based, in part, on revenue generated by the personal training department.

To continue the example, Mr. Smith is 46 years old, works at a sedentary job, and has not exercised regularly since college football. He is overweight, has residual knee pain from football, and eats most of his meals on the fly. Mr. Smith knows he needs to start exercising and eating better. He joins a gym and is immediately sold on the benefits of hiring a personal trainer. The membership sales representative recommends one of the best trainers at the gym. However, that recommendation is usually based on sales instead of professional credentials or experience. Depending on this trainer’s experience and credentials, if nutritional advice is given, if treatment for injury or disease is recommended, or if behavioral counseling or therapy is offered, then the trainer may be working outside their scope of practice. This would make the trainer and facility a target for a negligence lawsuit (1).

By offering personal training services, it is implied that a Certified Personal Trainer (CPT) has the knowledge, skills, and ability to provide a safe workout. It is assumed that a CPT accepts the responsibility associated with exposing a client to the stress of exercise without causing injury (1). Therefore, the client expects that the CPT will have an understanding of exercise science and exercise progression. To qualify for a basic personal training certification, a candidate is usually required to be 18 years of age or older, have a high school diploma or equivalent, and be CPR certified. With a basic personal training certification, a CPT may implement an exercise program for an apparently healthy individual or one who has a physician’s approval to exercise (3).
Close to 70% of the population in the United States are overweight, and it is estimated that the prevalence of chronic joint symptoms (CJS) in adults is close to 33% (7,9). There are many individuals inflicted by being obese or overweight, suffering from CJS, and having co-morbidities such as diabetes, heart disease, and musculoskeletal dysfunction. Because of the sheer amount of people who have these medical conditions, CPTs who fail to diagnose or treat pain, a personal trainer recommended a supplement containing ephedra to one of his clients who was also taking medication for hypertension; the client had a stroke and died (23). The trainer, facility, manufacturer of the supplement, and store that sold the supplement were all named in the lawsuit that ensued. In another case, a lawsuit in 2003 claimed that a 42-year-old woman was pushed beyond her physical limitations resulting in rhabdomyolysis (30). The trainer was accused of failing to apply current professional practices. Instead of personalizing the program to fit the needs of each individual, he used a similar exercise program for all of his clients. More recently, in 2009 a New Orleans women accused her trainer of failing to provide adequate instruction and supervision that resulted in a surgery to repair an injured rotator cuff and biceps musculature (19). Regardless of the outcome of a lawsuit, injury to a client and the associated negative publicity may cause irreparable damage to the reputation of the trainer and facility/organization.

THREATS
Any accident or injury comes with the possibility of legal action against the trainer and the facility (1). For example, in 1997, a personal trainer recommended a supplement containing ephedra to one of his clients who was also taking medication for hypertension; the client had a stroke and died (23). The trainer, facility, manufacturer of the supplement, and store that sold the supplement were all named in the lawsuit that ensued. In another case, a lawsuit in 2003 claimed that a 42-year-old woman was pushed beyond her physical limitations resulting in rhabdomyolysis (30). The trainer was accused of failing to apply current professional practices. Instead of personalizing the program to fit the needs of each individual, he used a similar exercise program for all of his clients. More recently, in 2009 a New Orleans women accused her trainer of failing to provide adequate instruction and supervision that resulted in a surgery to repair an injured rotator cuff and biceps musculature (19). Regardless of the outcome of a lawsuit, injury to a client and the associated negative publicity may cause irreparable damage to the reputation of the trainer and facility/organization.

OPPORTUNITIES
According to an article in Forbes, a company is only as good as its employees (12). When care and outcomes are inconsistent, the results can be compromised safety. Therefore, uniform practices may increase care and value to the customer and reduce costs (24). Consistent employee training and opportunities for continuing education should be priorities for strength and conditioning professionals (29). Standardized training assists employees in understanding roles and boundaries that allow an organization to realize a high standard of excellence (15).

The ACSM recommends a self-reported medical and health risk appraisal for anyone contemplating engaging in physical activity (4). Self-guided methods include a pre-activity readiness questionnaire (PAR-Q) and a health history. The PAR-Q asks general questions such as “has your doctor ever said that you have a heart condition?” or “do you have bone or joint problems?” A positive answer indicates the individual should consult with a physician prior to increasing physical activity. A health history is more in-depth than a PAR-Q and inquires about a number of health issues including diabetes, cardiovascular risks, and prior medical events. As with the PAR-Q, a positive answer indicates the individual should seek physician approval prior to beginning or increasing physical activity, or the individual should exercise in the presence of a qualified medical professional.

Although CPTs are not qualified to diagnose or treat pain, a CPT may be qualified to assess muscular imbalances (8). An overhead squat assessment (OHS) can reliably detect movement dysfunctions for upper and lower extremities, as well as assess dynamic flexibility, core strength, and balance (10,16). Another method that is more involved than the OHS is the Functional Movement Screen (FMS), which can detect dysfunctions in certain fundamental movements (11). CPTs should receive appropriate training prior to administering the OHS or the FMS. They should also always refer a client to a qualified health professional when an assessed dysfunction, such as joint or muscular damage, is beyond their scope of practice.

STRENGTHS
As more fitness facilities open, many of which are budget gyms with dues of only about $10 per month, owners and operators realize that non-membership revenue must increase. Although the majority of revenue in a fitness facility is generated from membership dues, a recent study shows that about 9.5% is generated by personal training (26). Furthermore, having trainers on staff provides an additional selling tool that integrates the membership sales process with personal training by providing new members with a complimentary initial consultation (6). In addition to the increased revenue, trainers can help with membership retention by providing many benefits to their clients, such as accountability, motivation, expertise, and personalized fitness plans to help identify and achieve goals (31).

WEAKNESSES
As the demand for personal training has increased, so have the number of available certifications. However, not all certifications are equally rigorous or credible. According to Archer, there are over 200 certifications available, many with differing areas of emphasis and required qualifications (5). Consequently, consumers and some hiring managers do not know the differences between the certifications and may hire or recommend a trainer who is not qualified to meet the needs of a particular client. Additionally, personal trainers are often treated as transient employees and, on average, a trainer stays with any given organization for only about 18 months, which makes fostering loyalty a challenge (22). The lack of specific qualifications, coupled with the temporary nature of the position, may leave some trainers not only unprepared to deal with certain situations, but there may also be a level of apathy that could potentially lead to harm for the clients.

SWOT ANALYSIS
The goal of a SWOT analysis is to explore the strengths and weaknesses of an organization or a situation, and to find corresponding opportunities and threats. Once factors are identified, a strategy can be developed to build on the strengths, exploit the opportunities, and mitigate the weaknesses and threats (13). Table 2 exemplifies the criteria based on the opening scenario.

The scope of practice refers to the specific boundaries, based on knowledge and skills, in which a professional can work (17). In a 2009 American College of Sports Medicine (ACSM) survey, it was concluded that, although many CPTs work with apparently healthy individuals, a large percentage of CPTs work with individuals who have heart disease, diabetes, are obese, or are in need of behavioral counseling—all of which are outside the scope of practice for a CPT (21). Table 1 identifies the differences of the scope of practice between a CPT and other health professionals in which the boundaries may be blurred.

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A SWOT ANALYSIS OF THE SCOPE OF PRACTICE FOR PERSONAL TRAINERS

Table 1 compares the scope of practice, educational requirements, and job descriptions of various fitness, health, and wellness professionals. Professional networking provides opportunities to interact with like-minded professionals, increase an organization’s brand awareness, and share knowledge (18,27). Abbott suggests that trainers will best serve the needs of their clients by forming multi-disciplinary networks (1). The World Health Organization believes that collaboration with healthcare practitioners from multiple professions will result in improved client/patient outcomes (32). It is also suggested that referral networking indicates a level of professionalism, and suggests to clients that their success is the ultimate goal (1).

CONCLUSION
A SWOT analysis reveals that personal trainers who stay within their scope of practice and refer clients out when warranted may reduce the potential for client injury, provide a stream of revenue for a fitness facility, and offer a valuable service that will increase client loyalty and membership retention. Continuing education opportunities increase the trainer’s base of knowledge and allow for a better understanding of a trainer’s role within the healthcare continuum. Standardizing assessment practices will ensure that clients receive the same high level of care by detailing information required to design an individualized program or, if necessary, refer the client to an appropriate health professional. Furthermore, knowing the advantages and limits of each occupation in the network of health professionals will ensure that each client receives suitable care when a referral is appropriate. An understanding of the strengths, weaknesses, opportunities, and threats of the scope of practice of a CPT can provide direction to improve the quality of care, as well as protect against litigation.

REFERENCES


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**ABOUT THE AUTHOR**

Dan Mikeska is the owner of Fairfax Fitness and Self-Defense in Chantilly, VA. In addition to a Master of Science degree in Human Movement from A.T. Still University, he has over 30 years of martial arts and personal training experience. He is currently pursuing a doctorate in Health Science also through A.T. Still University. Mikeska can be reached at Dan@FairfaxFitness.com.
**A SWOT ANALYSIS OF THE SCOPE OF PRACTICE FOR PERSONAL TRAINERS**

**TABLE 1. SCOPE OF PRACTICE FOR HEALTHCARE PROFESSIONALS (2,3,17,20,25,28)**

<table>
<thead>
<tr>
<th></th>
<th>CERTIFIED PERSONAL TRAINER (CPT)</th>
<th>PHYSICAL THERAPIST</th>
<th>REGISTERED DIETITIAN (RD)</th>
<th>BEHAVIORAL COUNSELOR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>High school diploma or equivalent (depending on organization)</td>
<td>Master’s or doctorate degree (doctorate required by 2016)</td>
<td>Bachelor’s degree</td>
<td>Master’s or doctorate degree</td>
</tr>
<tr>
<td></td>
<td>6 months clinical residency</td>
<td>12 months supervised practice</td>
<td>Board exams</td>
<td>Supervised clinical</td>
</tr>
<tr>
<td></td>
<td>Board exams</td>
<td></td>
<td></td>
<td>Board exams (in most states)</td>
</tr>
<tr>
<td><strong>Basic Job Description</strong></td>
<td>Developing and implementing appropriate exercise programs</td>
<td>Diagnose and manage movement dysfunction</td>
<td>Administer medical nutrition therapy as part of the healthcare team</td>
<td>Recognize and treat mental disorders and psychosocial problems</td>
</tr>
<tr>
<td></td>
<td>Assisting clients in setting and achieving realistic fitness goals</td>
<td>Restore, maintain, and promote optimal physical function and wellness</td>
<td>Manage food service operations</td>
<td>Treat and manage clients with chronic emotional and/or health problems</td>
</tr>
<tr>
<td></td>
<td>Teaching correct exercise methods and progressions</td>
<td>Prevent the onset and progression of impairments</td>
<td>Teach and advise on healthy eating habits and about the connection between food, fitness, and health</td>
<td>Manage clients who use medical visits to obtain needed social support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Conduct research</td>
<td>Transfer clients into appropriate mental health specialty care when indicated</td>
</tr>
<tr>
<td><strong>Diagnose</strong></td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Treat Illness or Injury</strong></td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Prescribe Medication</strong></td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Rehabilitate/Counsel</strong></td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
### TABLE 2. SWOT ANALYSIS OF EMPLOYING PERSONAL TRAINERS

<table>
<thead>
<tr>
<th><strong>STRENGTHS</strong></th>
<th><strong>WEAKNESSES</strong></th>
<th><strong>OPPORTUNITIES</strong></th>
<th><strong>THREATS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Training can produce revenue</td>
<td>Trainers may be unprepared</td>
<td>Standardized training and continuing education</td>
<td>Potential harm to members</td>
</tr>
<tr>
<td>Available training services are an added sales tool</td>
<td>Based on minimum qualifications, there is a limited target market</td>
<td>opportunities to increase all trainer’s knowledge, skills, and ability</td>
<td>Potential litigation</td>
</tr>
<tr>
<td>Appropriate training can help members achieve goals</td>
<td>Members may be harmed</td>
<td>Standardized assessment procedures</td>
<td>Potential publicity that could be damaging</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Increased brand awareness by networking with health professionals</td>
<td></td>
</tr>
</tbody>
</table>

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