British Columbia Association of Kinesiologists

Essential Competencies of Practice

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Introduction

The BC Association of Kinesiologists (BCAK) is a British Columbia-registered, not-for-profit society that supports its members and advances the profession of kinesiology in British Columbia, Canada.

Description of Kinesiology Practice

The profession of kinesiology has its origins in the science of human movement. Kinesiologists apply the latest evidence-informed scientific research to improve the health, function, and wellness of individual clients and population groups that they work with.

Areas of Practice

Kinesiology practice is broad, and kinesiologists work in both clinical and non-clinical roles. The five primary areas of kinesiology practice are:

- Injury Assessment and Rehabilitation
- Exercise Therapy
- Disability Management
- Health and Fitness
- Biomedical Technology and Research

Assumptions

1. Kinesiology practice is evidence-informed.
2. Kinesiology uses validated practice standards to ensure competent, safe, and ethical practice.
3. Kinesiologists do not diagnose injury, disease, or mental health dysfunction.

Purpose

The BCAK Essential Competencies of Practice define the knowledge, skills, and judgment requirements for professional membership in BCAK. These competencies represent the expected competencies of an Entry-to-Practice Kinesiologist.

BCAK acknowledges that competencies strengthen and may become more specific to an area of practice as a kinesiologist gains work experience and engages in continuing professional development.

~ Knowledge ~
To know what is possible

Knowledge provides the foundational information required to be a competent professional.

~ Skills ~
To do it

Skills are the tools built from applying foundational knowledge.

~ Judgement ~
To do it right

Judgement is the crucial ability to decide *when*, *why*, and *how* to use specific knowledge and skills to maintain professionalism, make ethical choices and prevent harm.

~ Experience and Maintenance of Competencies~
To refine competencies

Experience refines knowledge and skills, which influences better judgement.

Key Terms

Essential Competency

The knowledge, skills, and judgement requirements that a BCAK Professional Member must possess.

The BCAK defines four (4) Essential Competency Domains.

1. Knowledge
2. Skills
3. Judgement
4. Maintenance of Competency

Competency Indicator

An ability related to a specific Competency that is expected of a BCAK Professional Member who is entering their professional career as a Kinesiologist.

Practice Example

Examples of competency indicators that are commonly demonstrated in daily kinesiology practice.
The examples provided are **not** comprehensive and are intended solely to support understanding of a Competency Indicator.

Client

An *individual* client is a person receiving treatment or services from a kinesiologist. In public health care settings, a patient may be considered the client.

An *organizational* client is a private or public organization, community, or population group to which a kinesiologist provides services.

DOMAIN 1 – ESSENTIAL KNOWLEDGE

Demonstrate competency in foundational knowledge relevant to kinesiology practice.

Competency 1.1 - Knowledge of human anatomy as it applies to function and health

Competency Indicators		*Practice Examples*
1.1.1	Identify organs and structures of anatomy systems, including skeletal, muscular, nervous, endocrine, cardiovascular, lymphatic, respiratory, digestive, urinary, reproductive, and integumentary systems.	• *Explain the anatomy of L4/L5 vertebrae to a client with a disc protrusion to support education on performing exercises safely.* • *Explain the anatomy of the respiratory system to a client with exercise- induced bronchoconstriction to help them understand why symptoms may worsen when breathing through the mouth, rather than the nose.*
1.1.2	Understand anatomical structures and their relationship to function in normal, injured, diseased, and recovering states.	• *Consider the primary movers for hip extension when prescribing effective gait-corrective exercises.* • *Describe the characteristics and function of articular cartilage of the knee, and the implications of cartilage damage, for a client presenting with knee pain.*
1.1.3	Understand the impact of age, anthropometry, and biological sex on functional anatomy.	• *Analyze a client's anthropometric data to identify barriers to functional movement.* • *Explain age-related changes in bone density to help a client understand the importance of reducing their risk of falls.*

Competency 1.2 - Knowledge of systems physiology as it applies to function and health

Competency Indicators		*Practice Examples*
1.2.1	Understand the fundamental physiological systems, including skeletal, muscular, cardiovascular, nervous, endocrine, exocrine, lymphatic, respiratory, digestive, urinary, reproductive, and integumentary systems.	• *Explain how energy is generated differently through aerobic and anaerobic systems to a client training for a 10-km run.* • *Explain sympathetic nervous system control of the "fight, flight, freeze, and fawn" responses to perceived stress.*
1.2.2	Understand physiological systems and their relationship to function in normal, injured, diseased, and recovering states.	• *Analyze a client's ECG report to explain irregularities in heart rate and rhythm.* • *Explain the impact that a dysfunctional thyroid gland may have on a client's metabolism.*
1.2.3	Understand the physiology of acute and chronic pain, including nociceptive pathways, pain fibres, and types of pain (somatic, visceral, referred).	• *Explain to a client with elbow pain, in the absence of local injury, that their pain may be related to nerve compression in the cervical spine.* • *Educate a client on the distinction between "hurt" and "harm" to establish appropriate expectations when beginning treatment in the tissue repair phase of a soft-tissue injury.*

1.2.4	Understand the impact of external factors, such as environment and substances (e.g. pharmaceuticals and caffeine), on physiological systems.	• *Explain how beta-blockers may affect heart rate for a client with angina.* • *Explain to a community walking group the risks associated with prolonged outdoor activity in an area experiencing high levels of wildfire smoke.*

Competency 1.3 - Knowledge of biomechanics as it applies to function and health

Competency Indicators		*Practice Examples*
1.3.1	Understand human kinematics as it relates to activity, movement, and the environment.	• *Document hip joint range of motion (e.g., flexion, extension, internal rotation) in a client's chart.* • *Explain to a client how scapular positioning supports optimal posture.*
1.3.2	Understand qualitative and quantitative biomechanical principles of human movement (e.g., work, power, energy, and force).	• *Apply biomechanical principles when instructing a client in free-form squat technique to reduce the risk of knee pain.* • *Educate a competitive swimmer on how improper hand positioning can increase the risk of shoulder injury.*
1.3.3	Understand factors that impact biomechanical function in injured or diseased states.	• *Explain to a client with osteoarthritis why they may experience reduced hip range of motion, altered gait, and functional deficits.* • *Explain to a soccer player who is recovering from an inversion ankle sprain and walking with a limp why they may be experiencing new knee pain.*
1.3.4	Understand basic office ergonomic principles and common risk assessment tools used in occupational settings.	• *Review and consider the findings of a client's Job Demands Analysis that is provided by an occupational therapist when planning treatment.* • *Educate a client who has experienced a motor vehicle accident-related neck strain on ways to modify their computer workstation to reduce neck discomfort.*

Competency 1.4 - Knowledge of motor learning and control across the lifespan

Competency Indicators		*Practice Examples*
1.4.1	Understand the fundamental principles and theories of motor control and learning.	• *Apply Hick's Law of reaction time to explain to a baseball pitcher the performance advantage of varying their pitches to a single batter.* • *Explain to a client how fatigue may negatively affect progression of movement-pattern exercises.*
1.4.2	Understand the processes of motor skill and movement acquisition, reacquisition, and maintenance as they apply to health, injury, and performance.	• *Apply the stages of skill acquisition when developing a rehabilitation program for a client who requires full knee extension after ACL reconstruction surgery.* • *Apply the stages of motor skill reacquisition when delivering a physical rehabilitation program for a client who has experienced an ischemic stroke.*
1.4.3	Understand the effects of neuromuscular disease on motor behaviour.	• *Explain the impact of Multiple Sclerosis on mobility and function when prescribing safe and effective functional exercises.* • *Explain the physical benefits of exercise for a person with amyotrophic lateral sclerosis (ALS).*

Competency 1.5 - Knowledge of growth and development across the lifespan

Competency Indicators		*Practice Examples*
1.5.1	Understand the fundamental principles of human growth and development across the lifespan, from infancy through advanced age.	• *Explain to a family the benefits of physical activity for children's motor development.* • *Consider the likely level of hand-eye coordination of a 65-year-old client when prescribing exercises to support participation in pickleball.*
1.5.2	Understand skill acquisition and key gross motor milestones in infancy and youth development.	• *Apply Dynamic Systems Theory to explain to a parent why it is not a concern that a 5-year-old is not yet the strongest performer on the T-Ball team.* • *Use the term "task analysis" in a client's progress report to provide rationale for prescribing specific exercises to support skill acquisition.*
1.5.3	Understand the impact that lifestyle, disease, and environmental factors have on physical, motor, social, and cognitive growth and development.	• *Plan activities for a youth sport camp that are inclusive and supportive of participants with attention-deficit/hyperactivity disorder (ADHD).* • *Provide education to pre-natal fitness class participants about the impact of nutrition on in-utero brain development.*

Competency 1.6 - Knowledge of nutrition and metabolism as they apply to function and health

Competency Indicators		*Practice Examples*
1.6.1	Understand nutrition and food metabolism requirements for basic human health and function.	• *Explain to a client why vitamin B12 supplementation or the use of fortified foods may be necessary when following a plant-based diet.* • *Explain to a client why consuming a high-sugar 'pick-me-up" snack mid-day may be counterproductive to sustaining energy levels.*
1.6.2	Understand the impact that nutrition, supplements and hydration have on human function, performance, and body composition.	• *Coach a client on the importance of adequate fluid and electrolyte intake when preparing for, and participating in, a 42.2 km marathon.* • *Review a client's 7-day caloric intake and activity logs and provide recommendations to support attainment of a goal of reducing body weight by 10 kg.*
1.6.3	Understand the role that nutrition and dietary intake play in disease prevention and remediation.	• *Explain to a client with type II diabetes the impact that carbohydrate intake has on blood glucose levels during exercise.* • *Identify the signs and symptoms of iron deficiency and populations at increased risk.*
1.6.4	Understand Canada's nutrition health policies, food guides, dietary guidelines, food labeling requirements, and dietary reference intakes (DRIs).	• *Help a client understand how to read and interpret the nutrition information label on an energy bar.* • *Advise a client on recommended proportions of whole grain foods within a meal.*

Competency 1.7 - Knowledge of exercise physiology as it applies to function and health

Competency Indicators		*Practice Examples*
1.7.1	Understand the physiological responses and adaptations of body systems to different types of acute and chronic exercise.	• *Explain to a client how cardiorespiratory exercise affects heart rate and blood pressure both during exercise and with long-term consistent participation.* • *Explain delayed onset muscle soreness (DOMS) to a client to reassure them that post-exercise discomfort after a strength training session is not harmful.*
1.7.2	Understand the role that exercise physiology plays in health, disease, injury, and recovery across the lifespan.	• *Explain to a client with chronic obstructive pulmonary disease (COPD) how their condition influences their physiological response to cardiorespiratory exercise.* • *Apply knowledge of the stages of musculoskeletal healing when developing an exercise rehabilitation program for a client recovering from an Achilles tendon tear.*
1.7.3	Understand foundational exercise principles as they relate to physiology (e.g., the FITT	• *Apply the principles of progressive overload when developing a strength-training program for a client who has been performing the same*

	principle, the SAID principle, progressive overload, and periodization).	*workout three days per week for six months without measurable progress.* • *Explain to a client why adiposity cannot be reduced in a localized area, such as the mid-section, through abdominal strengthening exercises alone.*
1.7.4	Understand how physiological systems respond to exercise in different environments (e.g., heat, cold, and altitude) and with the introduction of stimuli (e.g. caffeine, medications, and other substances).	• *Provide education to parents at a community family fun run about the increased risks of heat stress in children under 10 years of age.* • *Explain to a client the risks and benefits of caffeine consumption prior to a 60-km cycling event.*
1.7.5	Understand absolute and relative contraindications to exercise as they relate to human physiology.	• *Postpone cardiorespiratory exercise for a client with a resting systolic blood pressure greater than 200 mmHg.* • *Educate a client to avoid "locking out" the knees during the final extension phase of a squat.*

Competency 1.8 - Knowledge of research design and methodologies that support evidence-informed kinesiology practice

Competency Indicators		*Practice Examples*
1.8.1	Understand common methodologies and the various types of research design.	• *Evaluate whether quantitative or qualitative methodology is most appropriate for research on wearable technology.* • *Accurately interpret and analyze data obtained from a client satisfaction survey.*
1.8.2	Understand the purpose of key components of a research paper, research article, or literature review, and critically evaluate the relevance of the presented research.	• *Evaluate the validity of data collection methods used in research examining the risks of blood clots in women taking hormone replacement therapy.* • *Evaluate whether a research article examining behavioural neuroscience published in 2019 remains current and relevant.*
1.8.3	Understand the criteria and strategies used to integrate research into best practices as they apply to clinical reasoning, measurement protocols, and equipment.	• *Calibrate a hand-grip dynamometer prior to testing grip strength with a client.* • *Apply research principles to clinical reasoning when conducting a client assessment and analyzing the assessment data.*

Competency 1.9 - Knowledge of the pathophysiology of common diseases and conditions as they apply to function and health

Competency Indicators		*Practice Examples*
1.9.1	Understand the pathophysiology of common musculoskeletal, neurological, cardiopulmonary, neoplastic, immune, inflammatory, digestive, urinary, and metabolic disorders, conditions, and chronic diseases across the lifespan.	• *Develop an exercise program for a client with bilateral knee osteoarthritis that is effective, supports symptom management, and does not contribute to further tissue damage.* • *Explain to a client with gastroesophageal reflux disease (GERD) why certain stretching positions may exacerbate symptoms.*

1.9.2	Understand the etiopathology, signs, and symptoms of common physiological disorders and diseases and the impact these have on function, performance, and wellness.	• *Monitor a cardiac rehabilitation client's heart rate and blood pressure during treatment and modify exercise intensity as needed in response to findings.* • *Recognize signs and symptoms of concussion in a youth soccer player who sustained a head injury and refer them for medical evaluation.*
1.9.3	Understand health epidemiology and the impact of exercise, lifestyle, and environmental factors on common physiological disorders and diseases.	• *Explain the impact of strength training on inflammation reduction and prescribe safe and effective exercises for a client undergoing treatment for colon cancer.* • *Coach a 60-year-old, overweight client who smokes cigarettes about their increased risk of developing cardiovascular disease.*

Competency 1.10 - Knowledge of psychology and sociology *of health and human behaviour*

Competency Indicators		*Practice Examples*
1.10.1	Understand the fundamental psychological and social determinants of health.	• *Consider how a client's education and literacy levels may impact health outcomes.* • *Recognize barriers to health care service access experienced by a client with low income who works multiple jobs.*
1.10.2	Understand the relationship between the determinants of health and individual health behaviours, and how these influence health status across the lifespan.	• *Explain to a client with chronic back pain the physical and psychological benefits associated with participation in an aquatic fitness program at a local recreation centre.* • *Use motivational interviewing techniques to support a cardiac rehabilitation client in making positive lifestyle changes.*
1.10.3	Understand cultural values and social norms as they relate to health promotion, wellness, and disease prevention in individuals, communities, and specific populations.	• *Collaborate in the development of an after-school youth basketball program in a low socio-economic community.* • *Apply knowledge of the Indigenous Medicine Wheel to provide culturally relevant and respectful treatment to an indigenous client.*
1.10.4	Understand Canadian and British Columbian health care services and how they are delivered.	• *Explain to a client that kinesiology services are not reimbursed or covered under British Columbia's Medical Services Plan (MSP).* • *Direct a client to the Health Canada website when they request information on treatment programs to reduce alcohol dependence.*

Competency 1.11 - Knowledge of equipment, therapies, and diagnostics in kinesiology

Competency Indicators	*Practice Examples*

1.11.1	Understand the standard operating procedures (SOPs), intended purpose, efficacy, benefits, and limitations of equipment used in kinesiology practice.	• *Instruct a client in the safe and effective use of equipment available in their condominium gym to support independent completion of their prescribed rehabilitation exercise program.* • *Fit a client with crutches and demonstrate their correct use.*
1.11.2	Understand the purpose, efficacy, and protocols associated with common physical assessment and screening tests used in professional kinesiology practice.	• *Explain and apply the grading scale for manual muscle testing (MMT) when evaluating the functional strength of a client's gluteus medius muscle.* • *Conduct the Empty Can test to assess the function of a client's supraspinatus muscle.*
1.11.3	Understand the purpose, efficacy, and contraindications associated with the use of common electrophysical modalities (EPAs) in injury prevention and physical rehabilitation.	• *Inform a client with an implanted pacemaker why transcutaneous electrical nerve stimulation (TENS) is contraindicated as a treatment option for their acute back pain.* • *Explain to a client how shockwave therapy may be used to support management of their golfer's elbow pain.*
1.11.4	Understand the purpose, efficacy, and key differences among common medical imaging procedures.	• *Explain to a client why their general practitioner has referred them for an MRI, rather than an x-ray, to further assess a suspected peroneal tendon tear.* • *Review a CT scan report in a new client's medical chart to understand the severity of a diagnosed tibial plateau fracture.*

DOMAIN 2 – ESSENTIAL SKILLS

Apply foundational knowledge to demonstrate competency in essential skills for professional kinesiology practice.

Competency 2.1 - Skills to conduct client assessment and analysis

Competency Indicators		*Practice Examples*
2.1.1	Obtain, review, and evaluate relevant client information to support and optimize the delivery of treatment or services (e.g., health care provider reports, diagnostic reports, job description).	• *Review a psychologist's report for a client experiencing post-traumatic stress disorder (PTSD) to identify factors that may present barriers to recovery.* • *Obtain and review information from a client's employer regarding current physical job demands to inform the development of a return-to-work physical conditioning program.*
2.1.2	Use effective interview skills and relevant self-reporting questionnaires to collect pertinent subjective client information.	• *Administer the Oswestry Disability Index (ODI) to gather client-reported information regarding functional limitations related to low back-pain.* • *Use open-ended follow-up questioning, such as asking "Can you give me an example?", when a client reports difficulty breathing during household activities.*

2.1.3	Evaluate and select appropriate tools and tests for a client's orthopaedic assessment, considering the reason for the assessment, the client's health history, functional abilities, and preferences, and the test environment.	• *Select the McMurray test instead of the Apley grind test to assess meniscal integrity in a client who is six months pregnant and unable to lie prone.* • *Adapt assessment procedures to the testing environment by taking goniometric measurements of shoulder range of motion in a seated position when conducting an assessment in a community gym without a plinth table.*
2.1.4	Evaluate and select appropriate tools and tests to assess the function of a client with cardiorespiratory, metabolic, neurological and/or common chronic disorders (e.g., cancer, inflammatory diseases, digestive disorders), considering the reason for the assessment, the client's health history, current functional abilities and preferences, and the testing environment.	• *Conduct manual heart rate monitoring for a cardiac rehabilitation client during outdoor walking to assess functional response to activity.* • *Select tandem stance and single-leg stance tests to obtain baseline measurements for a client with a diagnosed concussion.*
2.1.5	Evaluate and select appropriate tools and tests to assess the sport performance, body composition, and/or fitness, considering the reason for the assessment, the client's health history, current functional abilities and preferences, and the testing environment.	• *Select a stair climb test using a step-mill machine to assess fitness in a client training to become a professional firefighter.* • *Avoid selecting static strength testing to assess back strength in a client with a diagnosed disc herniation due to potential risk of symptom exacerbation.*
2.1.6	Conduct selected assessments to collect objective data that depict a client's health status and physical function, as applicable (e.g., measure performance, identify dysfunction, obtain baseline anthropometric measurements).	• *Conduct a Timed Up and Go (TUG) test to collect objective data related to fall risk in a 75-year-old client.* • *Conduct a postural assessment to identify and document the degree of scapular winging in a client presenting with limited overhead reach.*
2.1.7	Analyze the objective and subjective assessment data, considering accuracy, validity, and relevance, to identify a client's health status and physical function and, if deemed necessary, perform re-assessment.	• *Analyze bilateral hip abduction manual muscle testing (MMT) scores to identify functional strength imbalances relevant to a client's physical function.* • *Analyze a client's subjective report of tingling in the arm, hand, and fingers as part of identifying patterns that may indicate altered neurological function and inform the need for further assessment or referral.*

Competency 2.2 - Skills to create an evidence-informed plan for the delivery of client treatment or services

Competency Indicators		*Practice Examples*
2.2.1	Determine treatment and/or services that are congruent with subjective and objective assessment findings, and develop realistic, relevant, measurable, sustainable, and evidence-informed recommendations and goals.	• *Develop an evidence-informed exercise plan to support a client's goal of increasing daily caloric expenditure by 200 kcal/day to facilitate body fat reduction.* • *Develop a treatment plan to improve strength and mobility for a client who has undergone partial knee arthroplasty and demonstrates 60 degrees of active flexion on assessment.*
2.2.2	Identify immediate tasks and activities that can be modified or accommodated in relation to a client's work, activities of daily living, and	• *Recommend workstation modifications, such as installing a keyboard tray, to promote*

	recreation, and incorporate these recommendations into the treatment and/or service plan.	*approximately 90-degree elbow flexion during typing and mouse use.* • *Recommend activity modification, such as using a small step stool while gardening, to reduce sustained bent postures and help minimize low back discomfort.*
2.2.3	Report initial assessment findings and the treatment and/or service plan to the client, relevant health professionals, and other stakeholders, and collaborate as needed to ensure shared understanding and agreement.	• *Submit an exercise rehabilitation treatment plan to an insurance provider outlining the proposed program and goals supporting a client's return to full-time studies following a motor vehicle accident.* • *Collaborate with the treating physiotherapist to establish agreement on a coordinated plan for alternating treatment days for a mutual client.*

Competency 2.3 - Skills to deliver evidence-informed client treatment or services

Competency Indicators		*Practice Examples*
2.3.1	Prescribe therapeutic exercise programs to support the rehabilitation, symptom management and improved function in clients with orthopaedic injuries resulting from acute trauma or chronic overuse.	• *Prescribe isometric strengthening exercises to support pain management and functional recovery in a client with Achilles tendinopathy.* • *Prescribe stretching and strengthening exercises to support restoration of cervical range of motion and symptom management for a client recovering from a whiplash-associated disorder (WAD).*
2.3.2	Prescribe therapeutic exercise for the prevention, symptom management, and improved function of non-complex clients of all ages living with common neurological, cardiovascular, metabolic and/or other chronic disorders or diseases.	• *Prescribe a cardiorespiratory exercise program to improve insulin sensitivity and lower blood sugar in a client with Type II diabetes.* • *Prescribe therapeutic exercises to restore shoulder range of motion and reduce the risk of lymphoedema for a client who has undergone breast cancer surgery and has been cleared for exercise.*
2.3.3	Prescribe muscular strength, muscular endurance, cardiorespiratory, flexibility, and/or skill development exercises to support physical performance optimization, body composition change, and enhancing overall health and fitness.	• *Incorporate speed and agility exercises into a training program to support skill development and performance enhancement in youth basketball players.* • *Apply the FITT principle to develop a progressive run-walk program for a client preparing to participate in their first 8km fun run.*
2.3.4	Prescribe rehabilitation exercise to clients pre- and/or post-orthopaedic surgery to support recovery and long-term functional outcomes.	• *Prescribe pre-habilitation strengthening exercises to support recovery, reduce hospital length of stay, and improve functional outcomes for a client scheduled to undergo hip arthroplasty surgery in eight weeks.* • *Considering the phases of tissue repair, prescribe a progressive 16-week rehabilitation exercise program for a client following rotator cuff repair surgery.*

2.3.5	Use rehabilitative and manual therapy modalities, within one's training and competence, to manage symptoms and improve client function.	• *Apply myofascial release techniques, within scope of training and competence, to support symptom management in a client with chronic headaches associated with trapezius trigger points.* • *Provide low-intensity laser therapy as an adjunct modality to support pain modulation and functional recovery in a client with a hamstring strain.*
2.3.6	Support optimal client treatment or service outcomes by providing education and applying knowledge of pain psychology and behavioural change theories.	• *Provide ongoing education throughout a client's active rehabilitation program to support independent exercise.* • *Provide positive reinforcement and celebrate incremental gains to reinforce client self-efficacy.*

Competency 2.4 - Skills to evaluate treatment or service efficacy and create a client discharge or service conclusion plan

Competency Indicators		*Practice Examples*
2.4.1	Continuously evaluate treatment and/or service effectiveness by re-assessing the client, comparing data with previous findings and goals, and modifying the treatment or service as needed to ensure efficacy.	• *Four weeks into a client's work conditioning program, re-assess push/pull strength and compare it with initial data to confirm progress.* • *Modify a client's strength training program to accommodate an acute flare of medial epicondylitis.*
2.4.2	Identify criteria for discharging or concluding service (e.g., program goals met, insurmountable barriers, and logistical factors), as applicable to the specific client.	• *Discharge a rehabilitation client once functional goals outlined in the initial treatment plan have been achieved.* • *Support the identification of alternative supervised exercise options for a client unable to attend scheduled sessions due to childcare constraints.*
2.4.3	Develop and report a discharge or service conclusion plan, in collaboration with the client, relevant health care providers, and other stakeholders, to ensure shared understanding and agreement.	• *Develop a plan for continued independent exercise with a cardiac rehabilitation client who has completed a 12-week outpatient program.* • *Prepare a comprehensive discharge report for a short-term disability client and submit it to the insurance provider that funded the treatment.*

Competency 2.5 - Skills to provide health and wellness promotion and/or programming for organizational clients

Competency Indicators		*Practice Examples*
2.5.1	Obtain relevant information from an organizational client to clarify the purpose of the service request, expected outcomes, scope of services, and budget.	• *Interview a department manager to clarify the scope of wellness topics expected to be addressed at a community wellness fair.* • *Prior to conducting multi-office ergonomic assessments, confirm with the site coordinator the information and outcomes expected in the follow-up report.*

2.5.2	Assess an organizational client's needs and develop a service delivery plan, considering organizational goals and objectives, determinants of health, existing models, available resources, stakeholders, risks, and funding.	• *Develop and implement a survey to assess interest and participation barriers related to group stretching classes at a seniors' community living facility, to inform service delivery planning.* • *Review and evaluate organizational or population-level data on the relationship between employee wellness programs and absenteeism to support development of a workplace wellness service proposal for an employer client.*
2.5.3	Deliver services to an organizational client, considering goals and objectives, stakeholders, socio-economic factors, existing models, and potential barriers to implementation.	• *Design and deliver a safe lifting workshop for employees at a furniture company experiencing high rates of workplace injuries.* • *Conduct pre-employment physical abilities testing for BC Corrections Officer candidates.*
2.5.4	Evaluate and communicate the efficacy of services delivered to an organizational client by analyzing outcomes and comparing them to established objectives and goals.	• *Consult with organizational stakeholders to evaluate the economic impact of implementing recommended health-related policy changes and communicate findings relative to established objectives.* • *Analyze engagement data, such as click-through rates, to evaluate the effectiveness of an online education video developed for the British Columbia Arthritis Society.*

Competency 2.6 - Skills to participate in and/or lead clinical research initiatives in kinesiology practice

Competency Indicators		*Practice Examples*
2.6.1	Apply appropriate research methodologies when designing research projects to determine treatment efficacy and/or inform best practices.	• *Select a cohort study research design to examine how individuals living with dementia interact with health services and support systems over time.* • *Design and conduct a randomized controlled trial (RCT) to compare changes in VO2max between two cardiorespiratory training interventions.*
2.6.2	Demonstrate critical analysis across all stages of the research process (e.g., selecting research instruments, data collection methods, and evaluation protocols).	• *Determine the appropriate sample size required to support valid, reliable, and representative findings in a survey measuring self-reported exercise frequency among adolescent females.* • *Evaluate the concordance of heart rate data collected from wearable technology used by research participants to assess data accuracy and reliability.*
2.6.3	Engage in knowledge transfer and exchange (KTE) programs and activities to promote continuous improvement and advance the profession of kinesiology.	• *Participate in health and fitness conferences to disseminate research findings and contribute to professional knowledge exchange.* • *Share research findings through webinars delivered on knowledge transfer and exchange (KTE) platforms focused on exercise and physical rehabilitation.*

Competency 2.7 - Skills to provide case management services for work-related disabilities

Competency Indicators		*Practice Examples*
2.7.1	Apply foundational disability management principles – such as prevention, accommodation, and recovery support - to minimize the impact of injury, illness, or disability on a worker.	• *Implement regular workplace safety training to support the prevention of work-related injury and illness.* • *Provide timely and appropriate recovery support to a worker following a workplace slip-and-fall incident to reduce the risk of prolonged disability.*
2.7.2	Conduct a case management meeting to discuss the worker's injury, assess needs and capacity for return to work, and develop a rehabilitation plan.	• *Interview a worker, on leave from work due to anxiety and depression, to discuss the impact of their symptoms on daily function and work-related activities as part of return-to-work planning.* • *Review MRI reports and related clinical documentation to understand the functional implications of a worker's carpal tunnel syndrome and inform rehabilitation and return-to-work planning.*
2.7.3	Develop a return-to-work (RTW) or vocational rehabilitation plan in collaboration with relevant stakeholders.	• *Adopt a strengths-based approach by focusing on a worker's functional abilities to support return to work with appropriate modified duties.* • *Collaborate with the worker, workplace manager, and union representative to develop a return-to-work (RTW) plan that is clearly understood and mutually agreed upon.*
2.7.4	Continuously evaluate a disability program by monitoring a worker's progress and adjusting the plan as needed.	• *Regularly monitor a worker's rehabilitation progress and compare outcomes against established rehabilitation and return-to-work goals.* • *Communicate with the worker's manager to evaluate the worker's ability to meet job demands during a graduated return-to-work program and adjust the plan as needed.*

DOMAIN 3 – JUDGEMENT

Apply sound judgement to determine when, why and how knowledge and skills are applied to uphold professional conduct, make ethical decisions and prevent harm.

Competency 3.1 – Apply sound judgement to practice with professional responsibility and accountability

Competency Indicators		*Practice Examples*
3.1.1	Practice within kinesiology scope of practice, demonstrating understanding of permitted treatments and appropriate delegation.	• *Evaluate whether providing Transcutaneous Electrical Nerve Stimulation (TENS) to a client falls within your own scope and sphere of competence, recognizing that observing a regulated professional (e.g.*

		chiropractor) perform an intervention does not, on its own, establish competency. • *Ensure that a physiotherapist who delegates activities to you understands their accountability for the aspects of client care they have delegated, while recognizing your own responsibility to practice within your scope and competence.*
3.1.2	Recognize when to refer a client to an appropriate health care provider when required services fall outside the scope of kinesiology and/or one's personal sphere of competence.	• *Refer a client to their family physician for further assessment and diagnosis when findings from your physical assessment indicates a possible supraspinatus tear.* • *Refer a client who is exhibiting signs of anxiety following a motor vehicle crash to their general practitioner, with the understanding that further referral to a mental health professional may be required.*
3.1.3	Apply critical thinking and decision-making skills in practice.	• *Measure a client's blood pressure at the start of a session, despite the client reporting that they feel well, because they present as flushed, perspiring without an obvious cause, and report working in a high-stress occupation.* • *Review available scientific literature on the ingredients of a new "fat-burning" supplement presented by a client to provide evidence-informed education about possible contraindications and likely effectiveness.*
3.1.4	Accept responsibility and accountability for actions and decisions in practice.	• *Appropriately document, report, and take corrective action after realizing that a client file was mistakenly left at a community gym.* • *Re-assess a client's cervical rotation active range of motion (AROM) after recognizing that the goniometer was not correctly positioned during the initial measurement.*
3.1.5	Establish and maintain a professional image that is becoming of the profession, both in person and across all forms of media.	• *Exercise discretion in professional interactions with clients by avoiding discussions or behaviours that may compromise professional boundaries or therapeutic relationships.* • *Recognize that comments, images, and other content shared on social media may be accessible to clients, colleagues, or members of the public, and consider how this content reflects on you and the profession.*
3.1.6	Advocate for, and participate in, activities that support the advancement of the profession.	• *Share newly released exercise rehabilitation-related research or evidence-informed articles with the interdisciplinary team at your clinic to support high-quality and collaborative practice.* • *Take appropriate action when concerned about a colleague's unprofessional practice by offering constructive feedback or seeking guidance through appropriate professional or organizational channels, with the goal of supporting safe and responsible practice.*

Competency 3.2 – Apply judgement to uphold ethical and safety standards in all areas of practice

Competency Indicators	*Practice Examples*
3.2.1 Apply ethical standards and procedures in the planning, delivery, and evaluation of client services.	• *Explain and reinforce to a youth client the risks of returning to sport too soon following a concussion, despite external pressure from a coach, and emphasize the importance of appropriate recovery and medical clearance.* • *Establish business practices within a sole proprietorship that prioritize ethical client care, safety, and professionalism over financial gain.*
3.2.2 Recognize and maintain appropriate professional relationships and boundaries and respond appropriately when boundary concerns are identified.	• *Politely decline a social invitation from a new active rehabilitation client to go for drinks after work, recognizing the need to maintain appropriate professional boundaries.* • *Respectfully explain to a long-term client why you cannot assist with a personal request, such as babysitting their child, to maintain clear professional boundaries.*
3.2.3 Maintain ethical financial practices that comply with applicable regulations and professional standards.	• *When practising in dual roles (e.g., as a kinesiologist and a registered massage therapist), maintain separate invoicing and financial records for each profession, even when providing services to the same client.* • *Apply fee structures consistently and transparently, avoiding preferential pricing or undisclosed financial arrangements with select clients.*
3.2.4 Maintain ethical advertising and promotional practices that comply with applicable regulations and professional standards	• *Decline marketing strategies that involve providing financial or other incentives for referrals from health practitioners, and explain to your business coach why such practices may be unethical or non-compliant with professional standards.* • *Avoid advertising claims that guarantee results or outcomes, recognizing the ethical obligation to ensure accuracy and avoid misleading the public.*
3.2.5 Maintain appropriate infection prevention and control procedures, policies, and guidelines.	• *Clean and disinfect equipment such as goniometers, measuring tapes, and hand-grip dynamometers after each client assessment, in accordance with infection prevention and control guidelines.* • *Correctly DOFF personal protective equipment (PPE) following a clinical shift, in compliance with established infection prevention and control procedures.*
3.2.6 Assess and identify workplace risks and hazards, including conducting point-of-care risk assessments (POCRA).	• *Report a frayed cable on a pulley machine to the clinic manager and take immediate steps to reduce risk, such as clearly identifying the equipment as unsafe until repairs are completed.* • *Assess the situation at the point of care to determine the appropriate personal protective equipment (PPE) required before interacting with a client.*

Competency 3.3 – Apply judgement to deliver client-centred care in practice

Competency Indicators	*Practice Examples*
3.3.1 Recognize and respect each client's cultural, spiritual, and personal values, and ensure dignity throughout the service delivery process.	• *Explain the purpose of a physical assessment or palpation, what it will involve, and obtain the client's consent prior to physical contact.* • *Attend to, and respect, a client's verbal and non-verbal cues, recognizing that cultural norms (such as preferences around eye contact) may differ and adjusting your interactions accordingly.*
3.3.2 Respect diversity in age, gender identity, and sexual orientation to deliver client-centred services that are consistent and free from bias.	• *Provide an opportunity for clients to indicate preferred names and pronouns on intake forms, and use this information consistently in verbal and written communication.* • *Reflect on personal values and potential biases and take appropriate steps to ensure these do not influence the quality, consistency, or fairness of services provided to clients.*
3.3.3 Consider a client's psycho-social, as well as physical, needs when providing services.	• *Recognize verbal and non-verbal cues from a client who is new to exercise and adapt your communication by providing additional education, reassurance, and encouragement to help reduce fear of movement.* • *Engage in appropriate, client-centred conversation (e.g., asking about family or social interests) to build rapport and support a positive exercise experience for a client who may be socially isolated (e.g. a senior who lives alone).*
3.3.4 Involve clients - and, when appropriate, their family - in decision-making about care, and respect informed client choices.	• *Collaborate with a client to develop a realistic home exercise schedule that reflects their goals, work responsibilities, and family commitments.* • *With the client's consent, invite a cardiac rehabilitation client's partner to attend a session to support shared understanding of healthy nutrition and lifestyle strategies.*
3.3.5 Consider a client's socio-economic factors and support access to timely and appropriate services and resources.	• *Provide a client with information about local programs or facilities - such as subsidized fitness classes - that may support access to services for individuals with limited financial resources.* • *Support a client's access to appropriate equipment or services by providing relevant clinical rationale or documentation to an insurer or third party, recognizing how the client's work and family circumstances affect their ability to access in-person services.*

Competency 3.4 – Apply judgement to maintain professional documentation and record keeping standards

Competency Indicators	*Practice Examples*
3.4.1 Use a systematic approach to record keeping that is appropriate to the practice setting and in consistent with regulation.	• *Use the documentation format or charting system (e.g., SOAP notes) adopted within your practice setting to ensure consistent and systematic record-keeping across practitioners.* • *Understand and comply with legal requirements when using Electronic Medical Record (EMR) systems for client documentation.*
3.4.2 Document legibly, concisely, comprehensively, and accurately, using terminology, abbreviations, and acronyms that are commonly accepted in kinesiology practice.	• *Critically evaluate a client's subjective report regarding factors that aggravate or alleviate pain throughout the day, identify the clinically relevant details, and document the information concisely and accurately in the client record.* • *Use terminology, abbreviations, and acronyms commonly accepted in kinesiology practice to improve the clarity and efficiency of charting, while ensuring documentation remains understandable to other members of the care team.*
3.4.3 Maintain comprehensive client records, including pertinent client information, informed consent, assessment findings, reports, treatment plans, session notes, exercise record sheets, and communication with clients, health care providers, and relevant stakeholders.	• *Refer to the previous three assessments completed with a client to accurately convey functional improvements in a progress report prepared for ICBC.* • *Document a phone call with an occupational therapist regarding a mutual client's graduated return-to-work plan.*
3.4.4 Document the informed consent process and the client's understanding of the information provided, including if consent was obtained, refused, or withdrawn.	• *Provide a client with an Informed Consent form, allow time for them to read it and ask questions, and include the signed document in the client record.* • *Document a phone call from a client indicating that they have changed their mind and do not consent to you contacting their massage therapist to discuss their treatment plan.*
3.4.5 Record details related to delegation of an activity from a regulated health professional and / or involvement of support personnel in the delivery of care.	• *Record details of a physiotherapist delegating therapeutic exercise delivery to you for a client whose rehabilitation is billed by the clinic as physiotherapy treatment through the client's extended health plan.* • *Document a client's consent and session details when a university practicum student shadows you and, under your supervision, provides exercise guidance to the client.*
3.4.6 Document details of critical incidents and errors.	• *Document the details of a potential emergency in which a client reports feeling nauseous and faint, you take their vital signs and subsequently call 911.* • *Document in a client's chart an error where their exercise program was mistakenly emailed to the wrong client, and detail the correction actions and reporting undertaken.*

Competency 3.5 – Apply judgement to professionally communicate and collaborate in practice

Competency Indicators	*Practice Examples*
3.5.1 Apply appropriate communication skills – active listening, verbal, non-verbal, written, and observation.	• *Repeat back to a client what you hear after they describe how they landed when they collided with another player on the soccer field and injured their shoulder.* • *Ask a client how they are feeling when you observe them grimace when performing a low-back stretch, but they do not verbally report discomfort.*
3.5.2 Communicate in a timely, accurate, effective, and respectful manner with clients, other health care providers, and relevant stakeholders.	• *Provide a client with two weeks' notice regarding your upcoming vacation and inform them of the kinesiologist on your team who will work with them during your absence.* • *Respond confidently and professionally to a case manager who indicates they believe a client should have progressed further and that additional sessions will not be funded.*
3.5.3 Identify and assess the communication needs and barriers of an individual client, group, or population, and adapt to meet the needs.	• *Encourage a Cantonese-speaking client who does not speak or understand English well to bring their son, who is able to translate, to their initial assessment.* • *Provide appointment reminders by phone call rather than automated text message reminders to an 82-year-old client who does not have a cell phone.*
3.5.4 Use effective cuing, counselling, coaching skills and strategies in practice.	• *Inform a client that they performed 50 kg of resistance on the shuttle press, compared to 38 kgs four weeks earlier, and use positive reinforcement (e.g., an enthusiastic high five) to support motivation and engagement.* • *Ask a client who did not complete their prescribed home exercises about the reasons they were unable to do so and collaboratively strategize ways to address motivational barriers.*
3.5.5 Demonstrate effective, appropriate, and timely inter-professional collaboration when decision-making, care planning, problem solving and/or engaging in conflict resolution.	• *Contact a client's case manager to discuss attendance issues you are experiencing with the client and to collaboratively problem-solve next steps.* • *Email a client's program summary to the kinesiologist who is assuming care when the client moves to a new city.*
3.5.6 Understand and consider the service expectations, obligations, policies, and procedures of treatment funders and business partners when providing client services funded by a third party.	• *When recommending continued client treatment, submit a treatment plan to ICBC one week before the current approved end date, in accordance with funder requirements.* • *Meet the terms and conditions of a service agreement held with a corporation that has hired you to provide employee ergonomic assessments.*

Competency 3.6 – Apply judgement to understand and apply jurisprudence in practice

Competency Indicators	*Practice Examples*
3.6.1 Demonstrate knowledge of federal and provincial laws/legislation impacting informed consent, privacy, confidentiality, health and safety, and infection prevention and control.	• *Understand the requirements of the Personal Information Protection Act (PIPA) to determine how and when old client records may be securely destroyed.* • *Respectfully explain to a client's life partner, who calls to request the date and time of the client's next scheduled appointment, that you are not legally permitted to disclose that information.*
3.6.2 Demonstrate knowledge of the roles federal and provincial governments play in the organization, funding, access, and delivery of health care across Canada.	• *Understand your obligations under the BC Human Rights Code to ensure that the space you sub-lease for your kinesiology practice is accessible to individuals who use wheelchairs.* • *Encourage a client to contact the Office of the Seniors Advocate for support in exploring options to help reduce their prescription costs.*
3.6.3 Demonstrate knowledge of the various kinesiology work environments, practice expectations, and roles within the continuum of health care across Canada.	• *Analyze the job description for a kinesiology position you are considering applying for in the outpatient department of a hospital within the Northern Health region.* • *Help a new client understand the similarities and differences between working with a kinesiologist and a physiotherapist.*
3.6.4 Understand the roles of health professions' regulatory colleges and professional associations within Canada.	• *Consider the potential advantages and disadvantages of kinesiology becoming a regulated health profession in BC and reflect on how regulation could affect your scope of practice and professional responsibilities.* • *Understand the level of authority of the BCAK, as a professional association, with respect to receiving and addressing public complaints about members, including its ability to discipline, suspend, or expel a member.*
3.6.5 Understand the federal, provincial and municipal business and licensing regulations that apply to kinesiology practice.	• *Maintain compliance with federal excise tax laws, including the collection and remittance of the Goods and Services Tax (GST) when operating a business or working as an independent contractor.* • *As a sole proprietor working as a mobile kinesiologist, obtain the required municipal business licenses in all municipalities in which you provide services.*

DOMAIN 4 – MAINTENANCE OF COMPETENCY

Engage in self-reflection, continuing education, and development for ongoing competence.

Competency 4.1 - Maintain competency using a reflective approach to practice

Competency Indicators		*Practice Examples*
4.1.1	Demonstrate continuous self-awareness by critically evaluating one's own knowledge, skill, judgement, client outcomes, and feedback from others.	• *Reflect on the applied skills that require further development before accepting a referral to work with a client presenting with a complex concussion.* • *Seek feedback from a trusted and respected colleague on potential adjustments to a treatment plan for a client who is not progressing, despite best efforts by both you and the client.*
4.1.2	Analyze the impact and consequences of one's own professional behaviours and actions on clients, health care providers, and relevant stakeholders.	• *Consider that clients may overhear personal conversations, such as sharing a weekend story with a colleague, and take steps to minimize potential impacts, including ensuring the staffroom door is closed.* • *Recognize your influence as a role model for clients who are working to improve their lifestyle behaviours and intentionally lead by example in your professional conduct.*
4.1.3	Demonstrate consideration and incorporation of lived experiences and learning in practice.	• *Reflect on personal lived experience, such as the challenges you experienced after tearing your ACL, and apply those insights to practice and supporting greater empathy and understanding when working with clients.* • *Share learning from early professional experiences, such as the challenges encountered during your first client assessment, when mentoring a kinesiology student, to support their learning and development.*

Competency 4.2 - Maintain competency by engaging in continuous learning and professional development

Competency Indicators		*Practice Examples*
4.2.1	Identify professional learning needs, determine measurable goals and outcomes, and engage in applicable learning activities.	• *Consider the number of clients in your practice who would benefit from myofascial release to evaluate whether acquiring this skill would be beneficial, and register for a training course if appropriate.* • *Review and practice protocols for functional and special tests that you have not performed recently and are likely to be required when volunteering to provide courtside care at an amateur lacrosse tournament.*
4.2.2	Maintain current knowledge and skills in evidence-informed practice, research, practice standards, changes in the practice environment and technology.	• *Subscribe to an online medical journal so that new and relevant research is regularly delivered to you for review.* • *Regularly visit the BCAK website to stay informed about new and revised practice standards.*
4.2.3	Demonstrate sharing of new knowledge and experiences with others.	• *Present a lunchtime in-service to clinic staff to share key information and learning gained from a*

recent course on rehabilitation after hip arthroplasty.

- *Establish an informal learning club with other kinesiologists in which participants take turns identifying, reviewing, and sharing relevant kinesiology-related literature and research.*

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