

Assessor Marking Guide

Programme Name	Health and Fitness Coach (Personal Trainer) (Level 4)	
Assessment Number	Assessment 2 of 2	
Assessment Title	Nutrition Home Case Study	
Course Number	Course 3	Version 2 Level 4 Credit 10
Course Title	Nutrition	

Internal feedback related to design of assessment tools should be submitted via the online Continuous Improvement Form (eCIF).

This assessment leads to the following graduate profile and learning outcomes.

NZQA GPO	Learning Outcome	Task #
GPO 5: Apply a health and wellness framework and evidence-based nutrition principles to support a personalised exercise programme and recommend referral pathways to allied health professionals.	5.4: Use appropriate techniques for gathering nutritional data, and templates for summarising data. (2 credits)	Task 1
	5.5: Analyse current client dietary practices and make appropriate recommendations for improvement. (1 credit)	Task 2
	5.6: Demonstrate an understanding of appropriate referral options for nutritional advice/information. (1 credit)	Task 3

NZQF Level 4 Descriptors	
Knowledge	<ul style="list-style-type: none"> Broad operational and theoretical knowledge in a field of work or study
Skills	<ul style="list-style-type: none"> Select and apply solutions to familiar and sometimes unfamiliar problems. Select and apply a range of standard and nonstandard processes relevant to the field of work or study.
Application	<ul style="list-style-type: none"> Self-management of learning and performance under broad guidance. Some responsibility for performance of others.

ADMINISTRATION

Assessors are required to provide feedback to students:

- Constructive feedback to the student must be documented within assessment evidence. Including where resubmission is required.
- Notes on demonstrated performance and application of skills, knowledge, attributes; future improvement/development planning e.g. task management, study skills; relationship to other programme content and use in career.

Student evidence must be assessed against all specified criteria to meet learning outcomes.

- Any adaption in assessment methods must be documented and attached to the assessment by the assessor (where deemed necessary to be fair and transparent in relation to student's specified needs).
- Assessment Pack Cover should be dated and signed by assessor when the student has received the final result.
- Assessment opportunities must be indicated accurately
Where any practical criteria are not achieved, an additional practical sheet must be used for reassessment for all practical outcomes and attached to this assessment pack. Refer to Assessment opportunities policy for additional detail.

- The student must sign the post-assessment agreement after receiving final result.
- It is the Assessors responsibility to ensure all relevant documentation is included in the assessment prior to reporting and filing
- Samples of assessments will be forwarded to internal and/or external parties for moderation as required.

Where appropriate **sample answers and or exemplars** may be included: Sample answers are a guide only providing an example of the sufficiency of qualitative and quantitative evidence the assessor could expect to see.

ASSESSMENT SCHEDULE	
<i>Give feedback to student on successes, for N add a note to the student on their assessment evidence (e.g. in Turnitin) about how to improve for resubmission.</i>	
Task Evidence	Achievement Criteria / Judgement
Task 1	Appropriate templates are used, and all required data is presented in an easy to read way. All questions and sub questions have appropriate answers and sufficient detail at the tutor's discretion. Templates can be self-developed or provided by tutors.
Task 2	Appropriate analysis is evident including detail for each of the 4 sub questions asked, including any additional analysis that the students want to provide. A sufficient answer would provide a recommended change including a reason why based on knowledge learned in class and guidelines provided (MOH) 200-250 words.
Task 3	For each case study the issues are clearly described, and an appropriate referral is identified. 80-120 words per case study.

Task 1: Data Gathering

Utilising one of the methods discussed in class you will need to gather nutritional data from a potential client in the real world. This data must contain:

1. Personal and biometric data
 - a) Age
 - b) Height and Weight
 - c) Work details including type of work and activity level within work
 - d) Exercise and/or sport details including frequency, RPE, type, and duration
 - e) Weight goals (if applicable)
2. Minimum of a 3-day food log
 - a) Meal details including types of food, rough amounts, and drink consumption
 - b) Snack details
 - c) Timings of both meals and snacks during the day

NOTE: You may develop your own templates, or use one provided by your tutor.

Name:	Julian Smith
Age:	46
Height:	182 cm
Weight:	98 kg
Weight goal:	82 kg
Work details:	Office job, at a computer, lots of online meetings, 40 to 55 hours per week, no lunch breaks, eat at desk. Largely sedentary at work. Travel to work by bus.
Exercise details:	Uses treadmill at home when has the chance. 30 mins slow jog maximum 3 times per week, usually at 10 km per hour. Walks to bus stop, and from bus stop to work. (ten minutes each way).

Sources	Recommended serves (daily)	Day 1	Day 2	Day 3
Grains, cereals and breads	6-10+	Subway sandwich 12 inch white		
Fruit and Vegetables	5-8	Lettuce 2-3 leaves, tomato x 3 slices Frozen mixed vegetables 1cup Mashed potato		
Dairy	2-3	Cheese 20 gram Butter 1 tsp		
Meat and Meat substitutes	2	Ham 100 gram		

		Steak 300 gram BBQed		
High calorie, low nutritional value food	1	Biscuits x 4 Ice-cream large bowl		
Liquids		Coffee x 3 (large flat white) Coke can x 1 Water 1 L Beer x 2		

TIMING OF INTAKE

	Day 1 Time	Day 2 Time	Day 3 Time
Breakfast	N/A		
Morning snacks	10.30 AM		
Lunch	1 PM		
Afternoon snacks	3.30 PM		
Dinner	8.30 PM		
Late snacks	N/A		

Task 2: Analysis (200-250 words)

Based on your knowledge of nutrition guidelines and knowledge gained from class, analyse the collected information and make at least **four** recommendations that you would pass on to the client from task 1. These recommendations should include, but are not limited to:

- a) Timings of meals around training or exercise
- b) Overall amounts of carbohydrates, proteins, and fats
- c) Types of foods to increase or decrease in relation to micro or macronutrients
- d) Methods of preparing food (baking, fryer, air fryer, cooking with oils etc)

Justify each recommendation, with reference to evidence based nutrition principles.

No sample answer provided as answers could vary considerably. Tutor to check that the minimum 4 recommendations are supplied, and align with evidence based principles. Word count should also be met.

Some examples of references can be found:

MOH website

Nutritionfoundation.org

Worldhealthorganisation.com

Task 3: Appropriate industry referral options

When in the industry, it is important to know where your expertise is **not** applicable. If someone is interested in a detailed meal plan or presents with possible long term nutrition-based problems, it is important to pass them on to someone who is suitably qualified and has the correct expertise to give the right information. In NZ we refer to dietitians and nutritionists, both with required national registrations and minimum qualifications.

Dietitians - <https://dietitians.org.nz/>

Nutritionists - <http://www.nutritionistsociety.ac.nz/>

For the following case studies identify:

- who you would refer the client to.
- why you would refer them.
- The name, contact details and specialty area of an actual practitioner/s in your region who could help the person in each case study. (Note: you **do not** have to contact the practitioner)

You should write 80 to 120 words for each case study.

Case Study One

Karen is a late 30s eccentric workaholic who sits behind a desk majority of the day for her work. She likes to keep fit, sometimes obsessively so, and trains 6 of the 7 days a week without having rest weeks. She often feels tired in the 2nd half of the day, while also waking up early for trainings before work, often without breakfast. Because of her history as a dancer, she is used to eating lower than the recommended calorie intake for someone her size and daily requirements and up to now has not felt this to be a problem. She has started to find that her gym workouts are becoming harder, and she is not getting the improvements she is after so has come to you for some advice.

Karen “likes to keep fit, sometimes obsessively so, and trains 6 of the 7 days a week without having rest weeks”, and, because of her history as a dancer, is used to eating lower than the recommended calorie intake for someone her size and daily requirements without thinking this to be a problem. These all could indicate that Karen is at moderate to high risk for disordered eating behaviours and therefore in reality should be referred to an appropriate clinician – in this case I think a **Registered Dietitian** would be the most appropriate first step. This is because dietitians are registered health professionals, unlike nutritionists who are not registered and may vary in the level of qualifications they have.

Practitioners that specialise in this area include:

Tutor to check that learner has supplied the name and contact details of a suitable practitioner, to confirm that the practitioner would be a suitable referral for this case study.

Case study 2

Carla is a 28-year-old office worker and keen gym-goer who is seeking advice on nutrition that will help her improve her health for her and her unborn baby. In the past 2 years Carla has experimented with different diets including fasting, cleansing (lemon detox) and very low carbohydrate diets. Last year one of these diets led to her becoming significantly underweight and as a result she lost her menstrual cycle for a short time. Carla has recently become pregnant is now fearful that if she doesn't get her nutrition right she may harm her unborn baby. She has been told that when she is pregnant, she needs to eat more, but is fearful that increasing the amount of food that she eats will cause her to gain unwanted weight, so wants some professional advice.

Carla should be referred to a **nutritionist**. There are a couple of clear reasons for this. Firstly, Carla is pregnant and this requires specialist nutritional knowledge beyond the scope of practice of someone with a PT certification. There is also evidence of disordered eating in Carla's recent past and Carla's comments around not wanting to put on unwanted weight suggest that this is still in evidence. Disordered eating falls outside the scope of practice for a personal trainer. The potential consequences of giving the wrong advice to Carla, is that it causes complications with her pregnancy, or to the birthweight of her baby. This can have a negative effect on the health of both the mother and baby.

Practitioners that specialise in this area include:

Tutor to check that learner has supplied the name and contact details of a suitable practitioner, to confirm that the practitioner would be a suitable referral for this case study.

Case study 3

Alex is a 45-year-old male. An ex professional basketballer who retired around 10 years ago. Alex has lived a fairly sedentary lifestyle since joining the workforce post basketball. He has a desk bound job and his bachelor lifestyle means he relies mainly on bought food and eating out/socialising with mates. The impact of this lifestyle has taken its toll and Alex's once sculptured body is now getting a bit flabby. While he is still in good general health, he recognises that he needs to make a change to his nutrition and has come to you for help. Alex confesses to being a very picky eater and names a number of foods he simply won't eat.

Alex does not need a referral. There are no medical reasons for his condition, just poor lifestyle choices and a lack of nutritious food. The fact that Alex is a picky eater means the PT may have to accommodate this in their nutrition advice, but Alex will benefit from M.O.H guidelines for healthy eating and this advice is within the scope of practice for a PT. There is little chance of any risk from Alex following M.O.H guidelines

Practitioners that specialise in this area include:

Tutor to check that learner has supplied the name and contact details of a suitable practitioner, to confirm that the practitioner would be a suitable referral for this case study.

Case study 4

Harry is a 23-year-old student. He is a keen weightlifter and would like to compete this year. He has come to you for a training programme but is also hoping to get some nutritional advice. He is particularly interested in what he should be eating pre and post training to ensure he gets the best out of his training. Harry was diagnosed with Irritable Bowel Syndrome (IBS), so some foods are off limits. Harry is also keen for advice on what supplements he should buy to maximise his training? He only has a limited budget, so wants to get the best bang for his buck!

While a PT is able to give advice around pre and post exercise nutrition, Harry has a diagnosed medical condition that can be adversely affected by the wrong food choices. A full understanding of the conditions and the food choices that are suitable is required. This, along with the fact that Harry would like some advice on supplementation suggests he needs professional advice, so a referral to a **dietician** would be recommended (due to the medical nature of his complaint). The potential risk of not referring Harry is that his condition is worsened by the dietary advice given, leading to discomfort and affecting his training.

Practitioners that specialise in this area include:

Tutor to check that learner has supplied the name and contact details of a suitable practitioner, to confirm that the practitioner would be a suitable referral for this case study.

Case Study Five

Megan is a gym enthusiast and has been training for a few years. She has always liked to stay fit and in shape but has never really had any structure to her workouts or diet. She tends to just go with the flow and train in anything she feels like and has the same approach to her nutrition. However, she wants to start taking her training and nutrition a little more seriously and wants to compete in an amateur 'biggest loser' night her gym is hosting in 4 months' time. The category she would like to enter is the "muscle gain, body toning category". She has come to you to for a program to help with her overall training and strength in preparation. She also knows that she

needs to do something with her diet to support the added training schedule but doesn't know where to start. She wants a specific meal plan to stick to so she doesn't have to think about her food choices.

Qualified PTs can only make recommendations around general nutrition. A sports nutritionist or dietician who would specialise in fuelling her for not only her workouts but to incorporate a healthy calorie deficit into her training program would be appropriate. Qualified PTs are not allowed to prescribe or give a specific meal plan.

Practitioners that specialise in this area include:

Nichola (Nikki) Hart -specialises in hydration and sports

Tracy Kirkcaldy-specialises with elite sports professionals, groups and individuals from all walks of life.

Any other sports nutrition/dietician who specialises in a similar field.

Assessor only resource