Essential Competencies of Practice for Kinesiologists in Ontario
Draft Revisions December 1, 2026

The College of Kinesiologists of Ontario is the regulatory body for the kinesiology profession in Ontario, Canada. The College is mandated to protect the public interest by ensuring that kinesiologists deliver competent, safe, and ethical services. The College does this through defining practice expectations and quality assurance requirements and by providing ongoing monitoring and support to the registered kinesiologists.

The Essential Competencies of Practice for Kinesiologists in Ontario, initially published in 2014, define the knowledge, skills, judgment, and professional behaviours required of kinesiologists throughout their careers. Compared with the Entry-to-Practice Competencies, which inform the licensure examination blueprint and the higher education curriculum, the Essential Competencies are broader, encompassing the full career span of a kinesiologist. The Essential Competencies reflect expectations for ongoing competence, professional development, and ethical practice in diverse roles (clinical and non-clinical). These competencies serve as the basis for the College's quality assurance program and other regulatory oversight.

Under *the Regulated Health Professions Act, 1991 S.O. 1991, c.18* the College has a legislated obligation to define and communicate practice standards to the public. Registered kinesiologists, in turn, must meet these standards and demonstrate ongoing competence. The Essential Competences provide an overarching standard for continuing competence across a range of practice areas and roles.

Kinesiologists use the essential competencies to:

- understand practice expectations throughout their career
- plan continuing professional development and maintain competence
- ensure compliance with minimum professional standards
- support career progression
- communicate their role and standards of practice to other health professionals, employers, government agencies, and the public

The College uses the essential competencies to:

- communicate minimum expectations and standards of practice
- recognize the diverse roles of kinesiologists in clinical and non-clinical settings
- measure competence and hold registrants accountable to the competencies
- inform regulatory functions, including quality assurance, complaints, and investigations

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Application and Relevance

While not all competencies apply equally across settings or roles, kinesiologists are expected to demonstrate and maintain the knowledge, skills, and judgment defined for competencies relevant to their roles and practice. Performance indicators illustrate typical behaviours but are not exhaustive; relevance depends on client needs, practice setting, and role.

The competencies underpin:

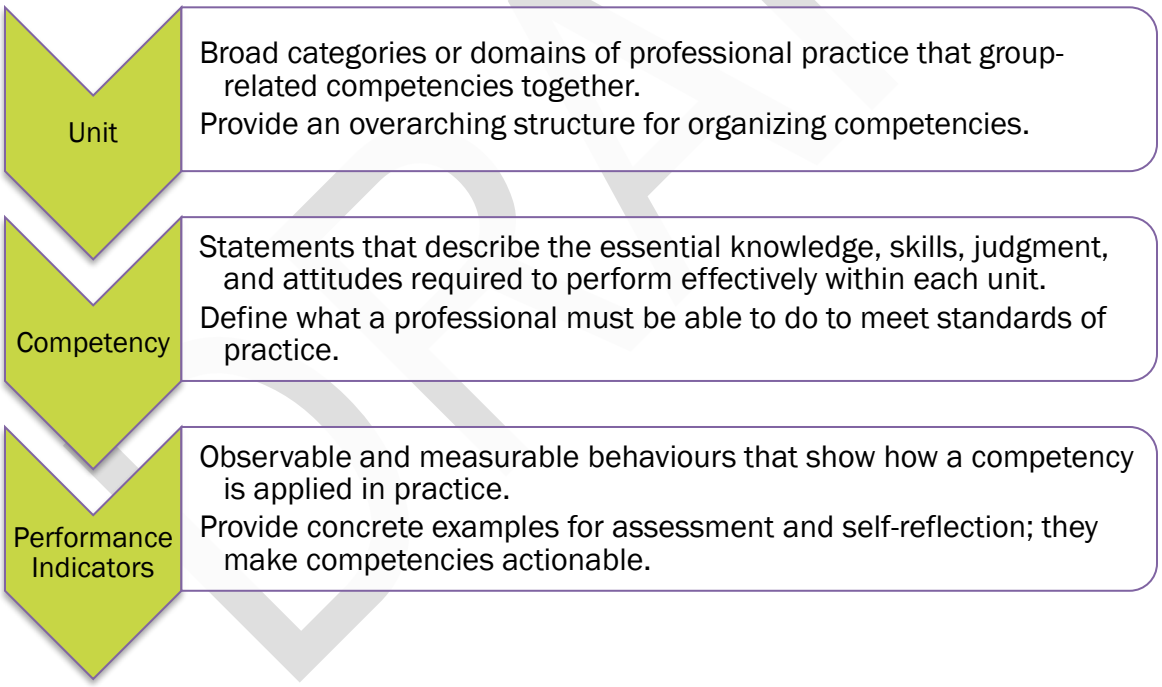
- The Quality Assurance Program, including the self-assessment and the peer and practice assessment.
- The practice standards and guidelines (e.g., consent, record keeping, advertising) are an overarching foundational document.
- Investigations of complaints and mandatory reports.

A Functional Analysis Competency Framework

A total of 44 competencies and 252 performance indicators were developed within the following eight units:

Unit 1: Foundational Knowledge
Unit 2: Professionalism and Ethics
Unit 3: Professional Service Delivery
Unit 4: Program Development
Unit 5: Leadership
Unit 6: Education and Research
Unit 7: Communications, Collaboration and Advocacy
Unit 8: Professional Development

The competencies are organized within a functional analysis competency framework that links expectations for essential competencies such as communication, leadership, professional behaviours and functions or roles and responsibilities, including providing professional services and engaging in program development and research. Each competency describes a component of a professional's role in small, clear terms. These pieces can be observed, measured, and used in various workplaces and situations. All competencies are interrelated and work together within each function or activity.



New Emphasis

The revision introduces competencies that now explicitly support:

- **Enhanced foundational knowledge**: Biomechanical principles, biopsychosocial factors, pharmacology and pharmacokinetics, nutrition, complementary and alternative therapy, and advancements in technology.

- **Equity, Diversity and Inclusion**: Reinforcing cultural humility and safety and concepts of co-creation to ensure the patient/client is an equal contributor.
- **Non-clinical practice:** Conducting research, program management, leadership, and financial stewardship.
- **Compliance with health legislation and policy**: Require actions related to regulatory requirements for informed consent, infection prevention and control, privacy laws, and ethical obligations in everyday practice.

These updates reflect the growing integration of kinesiology in healthcare and wellness, community, workplace, sports medicine, rehabilitation, research and leadership roles, ensuring that practitioners meet both professional and regulatory expectations.

Unit 1: Foundational Knowledge

1.1 Apply biomechanical principles to human body movement in the provision of treatment and services to individuals, groups and populations.

1.1.1 Use biomechanical principles to identify normal and abnormal movement patterns.
1.1.2 Use biomechanical principles to optimize movement and performance.
1.1.3 Explain the interaction between the human and the environment to understand the complex interplay between internal and external factors.
1.1.4 Use biomechanical findings to inform recommendations that improve assessment and efficacy of interventions.
1.1.5 Analyze the mechanism of injury and disease to inform prognosis and treatment recommendations.
1.1.6 Identify multiple factors that influence biomechanical function in health, disease and injury.

1.2 Apply knowledge of anatomy and physiology to human movement, performance, and rehabilitation.

1.2.1 Explain the impact of individual anatomical and physiological characteristics on human movement, function, and abilities.
1.2.2 Consider the human life cycle and the impact on the body structure and function.
1.2.3 Recognize variances in anatomy and physiology and the presence of pathology to inform assessment.
1.2.4 Apply knowledge of human system pathology and its implications for human functional and performance implications.
1.2.5 Consider the reaction of the body to injury (e.g. cellular adaptation/tissue responses, neoplasia/anaplasia, cellular degeneration/necrosis, infective agents) and disease.
1.2.6 Consider the impact of fatigue on physiological changes.
1.2.7 Apply pain theories, pain referral patterns, pain management, and ratings of perceived exertion.
1.2.8 Analyze the impact of environmental factors on physiology.

1.3 Apply principles of motor learning and control across the lifespan.

1.3.1 Summarize the process of skill and movement acquisition at significant developmental milestones.
1.3.2 Analyze the effect of individual presentation, diagnosis, dysfunction, condition or disease on motor learning and control.

1.3.3 Apply knowledge of the principles of motor learning to skill and re-acquisition of skills to fit the individual variables and the environment.
1.3.4 Recognize patterns of cortical and subcortical motor dysfunction.
1.3.5 Describe how impairments in cortical and subcortical motor systems can affect movement, posture, coordination, and motor learning.

1.4 Apply knowledge of dysfunction, disease, or condition as it relates to the performance, rehabilitation, management and enhancement of human movement.

1.4.1 Consider the pathology and progression on functional capacity.
1.4.2 Analyze the impact of exercise, lifestyle, behaviour and the environment on management.
1.4.3 Determine key factors that influence the prevention and treatment.
1.4.4 Consider the impact of epidemiology and natural history on diseases and injury.
1.4.5 Consider the pathophysiological process of inflammation and repair, and the impact of the disease state on human movement and performance.
1.4.6 Consider the impact of disease state and injury on the body system and function (e.g. energy, healing, impact on physical activity and rest).

1.5 Apply knowledge of exercise and work physiology in health, disease, injury and recovery.

1.5.1 Evaluate the body's response and adaptation to exercise and occupational work.
1.5.2 Evaluate the pathological adaptations and responses to exercise and work inherent in chronic diseases and other pathologies.
1.5.3 Consider how body systems respond and function in different environmental stressors and with the introduction of stimuli.
1.5.4 Apply behavioural strategies considering the needs and preferences of the client/patient and their progress towards achieving realistic goals.

1.6 Apply health promotion and prevention principles across the life cycle.

1.6.1 Compare the impact of the determinants of health on wellness (e.g. physical, intellectual, cognitive, behavioural, psychological, social, spiritual, environmental, occupational, and lifestyle).
1.6.2 Explain the benefits of exercise on a population and individual level.
1.6.3 Determine factors that influence exercise adherence and motivation.
1.6.4 Apply knowledge of epidemiology related to wellness and disease prevention.
1.6.5 Apply behavioural strategies considering the needs and preferences of the patient/client to

facilitate their progress towards achieving realistic goals.

1.7 Apply ergonomic principles related to human movement and performance.

1.7.1 Consider ergonomic risk factors in injury prevention and recovery.
1.7.2 Recognize adaptation of the individual, group or population to the environment and occupation.
1.7.3 Analyze the environment to inform alterations and accommodations.
1.7.4 Identify the need to conduct a cognitive demand analysis and mental health assessments.
1.7.5 Recognize when job demands exceed functional capacity and recommend appropriate ergonomic or workload modifications.

1.8 Apply food and nutrition science to human movement, performance, and rehabilitation.

1.8.1 Calculate nutrition requirements based on human movement and performance.
1.8.2 Analyze the influence of nutrition, supplements, and hydration on human movement, performance and wellness.
1.8.3 Recognize signs of dietary behaviours and energy concerns that adversely affect human movement, performance, and overall wellness.
1.8.4 Evaluate the evidence for the efficacy of supplements and ergogenic aids.
1.8.5 Make evidence-based nutrition recommendations to support performance, healing and recovery within the kinesiology role.

1.9 Consider the impact of biopsychosocial factors on human performance and rehabilitation.

1.9.1 Analyze the benefits of physical activity on mental health and well-being.
1.9.2 Recognize the correlation between mental well-being and comorbidities.
1.9.3 Identify and address the psychological factors that influence recovery and athletic performance.
1.9.4 Identify sociocultural and historical factors that influence attitudes and emotions toward physical activity.

1.10 Apply fundamental knowledge of pharmacology and pharmacokinetics to inform decisions.

1.10.1 Apply knowledge of how drugs interact with biological systems to produce a therapeutic effect.
1.10.2 Recognize drug classes and their indications, benefits, risks and contraindications.

1.10.3 Consider the impact of movement and performance on pharmacokinetics and the overall physiological response to exercise.

1.11 Apply an understanding of complementary and alternative therapy to inform decision-making and client education.

1.11.1 Recommend complementary and alternative therapies within the scope of practice of kinesiology.
1.11.2 Evaluate evidence-based literature to inform decisions related to complementary and alternative therapy.
1.11.3 Identify indications, benefits, risks and contraindications of complementary and alternative therapy.

1.12 Use evidence-based-technology to monitor, promote and improve physical activity, rehabilitation and function (e.g., Artificial Intelligence, tele-rehabilitation, wearable monitoring, remote monitoring).

1.12.1 Determine the suitability of digital health tools or other technologies, considering the situation and need, the environment, and organizational policies.
1.12.2 Confirm the data's validity and reliability before making a judgement and determine triggers for manual review or in-person care.
1.12.3 Interpret data trends to modify plans and to identify the need for additional evaluation.
1.12.4 Assess the reliability of AI-generated information by verifying cited sources, comparing claims with guidelines and research, and determining the limitations of the information before use.

Unit 2: Professionalism and Ethics

2.1 Obtain informed consent before and throughout service provision.

2.1.1 Obtain informed consent before initiating an assessment, treatment or services or when there is a change in the plan.
2.1.2 Identify situations where there are challenges to obtaining informed consent and take steps to rectify issues.
2.1.3 Seek informed consent from the substitute decision-maker when the patient/client's capacity to understand information is problematic.

2.2 Demonstrate professional responsibilities and accountabilities when performing assessments and treatments and providing services.

2.2.1 Obtain the required knowledge, skill and judgement before performing an assessment and procedures.

2.2.2 Inform referral source and relevant others when an activity is beyond personal competence or professional scope of practice.
2.2.3 Identify activities that are a controlled act and prohibited to be performed by kinesiologists without delegation.
2.2.4 Ensure delegation authorizing mechanisms are in place before accepting delegation of a controlled act.
2.2.5 Demonstrate required competence to perform the delegated activity and to manage potential adverse outcomes.
2.2.6 Seek consultation and referral when services are beyond personal competence or the scope of practice.

2.3 Adheres to the Code of Ethics and Practice Standards for the profession.

2.3.1 Report unsafe, unethical and incompetent practice or behaviours.
2.3.2 Recognize and manage potential and perceived conflicts of interest.
2.3.3 Manage conflicts with professional obligations and organizational policies.
2.3.4 Take action to ensure organizational policies align with professional obligations, regulations and legislation.
2.3.5 Maintain ethical and transparent fees and billing practices according to regulations and standards.
2.3.6 Manage dual practice by clearly separating both practices according to the standards.
2.3.7 Adhere to confidentiality and privacy legislation, and related practice standards and organizational policies when collecting, maintaining, disclosing and destroying patient/client personal information or personal health information.
2.3.8 Maintain professional boundaries, adhering to the practice standards and organizational policies.
2.3.9 Implement infection prevention and control measures to mitigate risks to patients/clients, self, colleagues and others.
2.3.10 Use a systematic approach to record-keeping consistent with the practice standards.
2.3.11 Document all patient/client interactions and service provisions in a timely and accurate manner.

2.4 Align practice with the principles of equity, diversity and inclusion.

2.4.1 Contribute to a culturally safe environment.
2.4.2 Recognize the limits of one's own knowledge, skills, and abilities in managing diversity and equity issues, and consult when necessary.
2.4.3 Acknowledge individual experiences, culture, beliefs and personal expression in service delivery.

2.4.4 Recognize biases, assumptions, and the power differential in the provider-patient relationship.
2.4.5 Assess the need for, develop, and implement accessible service and delivery strategies, adhering to relevant legislation and regulations.
2.4.6 Practice in a manner that respects diversity and avoids prejudicial treatment of individuals, groups and populations.

Unit 3: Professional Service Delivery

3.1 Responds to professional service requests through analysis and synthesis of information.

3.1.1 Confirm reason and scope of referral by reviewing, evaluating, and interpreting available patient/client records and referral documents.
3.1.2 Clarify and confirm reasons for services with the patient/client and others involved in their care.
3.1.3 Identify the knowledge, skill and judgement required to provide the services.
3.1.4 Determines that the services required are within the legislated scope of practice of a kinesiologist and personal competence.

3.2 Perform an assessment to inform clinical decision-making.

3.2.1 Adhere to guidelines, protocols, and policies when performing assessments.
3.2.2 Collect patient/client history using interviewing skills, observation, and by reviewing clinical records and available data to inform the assessment process.
3.2.3 Collect information about the patient's /client's prior function, abilities, physical performance, vocational and avocational activities, and their environment.
3.2.4 Collect both subjective and objective data and evaluate the accuracy and relevance of the information.
3.2.5 Confirm the patient's/client's vocational and avocational needs and health history.
3.2.6 Determine the patient/client baseline to compare to their current function, movement and abilities before treatment.
3.2.7 Measure the patient's/client's physical characteristics and their responses to activities and environments, with reference to health, safety, symptoms, and performance.
3.2.8 Examine the physiological function of the patient/client at rest and during prolonged or maximal exercise, and with environmental stress (heat, cold, altitude, hyperbaric).
3.2.9 Assess the environment, product or system design to inform the treatment plan.
3.2.10 Conduct a physical assessment, including gait, neurological exam, palpation, range of motion, joint integrity and tissue quality assessments.
3.2.11 Identify relative and absolute contraindications that may impact the assessment, treatment plan, care or service and take required action.
3.2.12 Evaluate available support and prioritize resources to meet patient/client needs.

3.3 Select assessment methods and tools considering the reason for the assessment, patient/client and environmental factors.

3.3.1 Determine the validity and reliability of the measure or test, considering measurement concepts and methodologies.
3.3.2 Apply evidence-informed test protocols to inform clinical reasoning.
3.3.3 Identify contraindications in the assessment method and tools and take action to mitigate risks.
3.3.4 Consider the normative reference or benchmark when selecting the assessment method and when evaluating the data.

3.4 Analyze and synthesize assessment data to inform an impression.

3.4.1 Interpret data in the context of standardized measurement or population pool.
3.4.2 Determine or confirm the currency, accuracy and relevance of the assessment data collected.
3.4.3 Recognize limitations in assessment data, or invalid results, and make recommendations for re-assessment if necessary.
3.4.4 Identify patient/client goals, level of desired participation, and strengths and limitations.
3.4.5 Identify the impact of the availability and limitations of environmental supports and resources on the patient/client's well-being, recovery and participation in treatment.
3.4.6 Identify the patient/client's capabilities, current health status and risks based on the assessment.
3.4.7 Identify the impact of vocational and avocational needs on patient/client well-being, recovery and participation in treatment.
3.4.8 Identify normal and abnormal test and diagnostic results (e.g. x-ray, ultrasound, blood work, imaging) and quantitative assessment data.
3.4.9 Identify the patient/client's functional abilities to match task demands to their abilities safely.
3.4.10 Analyze patient/client barriers and system-level limitations, and identify solutions to address them.

3.5 Develop patient/client-centred recommendations and treatment plan, including exercise prescription and other interventions based on assessment data and patient/client goals.

3.5.1 Communicate assessment results in a manner that the intended recipient understands.
3.5.2 Co-create realistic, relevant, measurable, sustainable, and evidence-informed recommendations and/or goals.
3.5.3 Select interventions that are evidence-informed and consistent with patient/client goals, health status, determinants of health, functional needs and assessment findings.

3.5.4 Consider the contraindication(s) of therapeutic treatments.
3.5.5 Make recommendations for accommodation based on the assessment data and environmental factors.
3.5.6 Apply evidence-based principles of exercise prescription to design an individualized, patient/client-centred treatment plan.
3.5.7 Establish and consider patient/client expectations to inform the treatment plan.
3.5.8 Consider patient/client socio-economic factors and disparities (health, availability, finances, access to services) when developing the plan of care.
3.5.9 Select and integrate manual therapy to address pain, improve joint mobility, and maintain or restore optimal movement and function.
3.5.10 Prioritize recommendations and/or goals and expected outcomes, based on assessment findings and evidence-informed practice, in collaboration with the patient/client and others.
3.5.11 Implement treatment plan in collaboration with the patient/client, inter-professional team and other stakeholders.
3.5.12 Recognize how sociocultural, personal, and historical factors influence a person's attitudes and emotions towards, and participation in their care.

3.6 Co-create accommodation plans that integrate physical, cognitive, and environmental supports.

3.6.1 Identify the required accommodation based on the patient/client's needs and their situation.
3.6.2 Co-create and recommend accommodations (e.g. adjusted workload, flexible scheduling, assistive technologies).
3.6.3 Analyze the effectiveness of the accommodation and make recommendations to adjust or discontinue the accommodation plan.

3.7 Perform treatments in a competent, safe and ethical manner.

3.7.1 Perform procedures that are authorized and within the personal competence, or obtain the required knowledge, skill and authorization before proceeding.
3.7.2 Schedule services and allocate resources in a reasonable timeframe.
3.7.3 Respect the patient/client's time, financial resources, privacy and involvement of significant others or substitute decision-makers.
3.7.4 Assess the patient/client's ability to perform the exercise competently and safely and modify when required.
3.7.5 Implement support tools to facilitate the patient/client to complete the treatment (e.g. activity log, instruction sheets, diagrams).

3.7.6 Apply therapeutic modalities and uses aids, equipment, engineering, and administrative and personal controls relevant to the needs of the patient/client, the situation and the environment.
3.7.7 Apply manual therapy interventions using proper technique in an ethical, patient/client-centred, and evidence-informed manner.

3.8 Monitor and evaluate the efficacy and safety of treatment plans and the exercise prescription.

3.8.1 Assess the patient's/client's ability to recreate the intervention and confirm their understanding of instructions.
3.8.2 Measure goals and track outcomes against established benchmarks to ensure desired goals are met.
3.8.3 Re-assess the patient's/client's progress and status to determine the effectiveness of the intervention and/or exercise prescription.
3.8.4 Determine the level of supervision required during the intervention and the modification needed for treatment.
3.8.5 Identify and address risk factors associated with patient/client adherence to the treatment plan.

3.9 Develop a follow-up, transitional or discharge plan of care in collaboration with the patient/client and others involved in their care.

3.9.1 Conduct an assessment to guide discharge planning and to determine if patient/client goals are met.
3.9.2 Determine the need to refer to other health professionals and services.
3.9.3 Review with the patient/client the maintenance plan and ongoing need for self-management.
3.9.4 Educate patient/client on the availability of services to support transition of services.
3.9.5 Discontinue services in accordance with professional obligations.

Unit 4: Program Development

4.1 Conduct a needs assessment to develop and implement wellness, exercise and health promotion programs for individuals, groups and populations.

4.1.1 Identify determinants of health and other target audience characteristics to inform the benefits and limitations of participation.
4.1.2 Critically review literature and research to identify evidence-based trends.
4.1.3 Determine the level of support, resource implications, opportunities and risks.
4.1.4 Identify the short-term and long-term goals of the target audience to inform the program goals.
4.1.5 Identify individual, public/private organizations, and government roles and responsibilities within the systems.

4.2 Design and implement wellness, exercise and health promotion programs to meet the needs of the group or population.

4.2.1 Synthesize assessment data to determine and prioritize program goals and objectives.
4.2.2 Consider patient/client demographics, lifestyle, risk factors, biopsychosocial and socio-economic factors and ecological issues.
4.2.3 Design programs based on needs assessment and evidence-informed literature.
4.2.4 Prioritize goals and objectives based on the level of importance and changeability of the health problem.
4.2.5 Apply community and population-based models and theories in the development of the programs.
4.2.6 Apply wellness theories and strategies that contribute to long-term health in planning and delivery of programs.
4.2.7 Create a tailored approach to promote movement and self-regulation of behaviours and actions, and lifestyle changes.
4.2.8 Utilize behavioural change theories, behaviour economics and communication strategies in the delivery of programs.
4.2.9 Collaborate with community partners and organizations to design and implement programs.

4.3 Conduct a program evaluation to assess the effectiveness of the wellness, exercise and health program and required modifications.

4.3.1 Develop an evaluation plan and indicators using program evaluation models.

4.3.2 Analyze evaluation data to draw inferences and reach conclusions.
4.3.3 Develop recommendations for change based on evaluation.
4.3.4 Present data and assessment findings to inform future program design solutions.

Unit 5: Leadership

5.1 Demonstrate and apply leadership skills.

5.1.1 Engage in active discussions with others to establish common goals and a shared understanding of different opinions.
5.1.2 Manage inter-and intra-professional differences to promote positive outcomes.
5.1.3 Demonstrate self-awareness, self-management, social awareness and relationship management to navigate situations and build relationships.
5.1.4 Demonstrate inclusive leadership to foster innovation and to enhance collaboration and co-creation of goals and objectives.

5.2 Contribute to a safe practice and work environment.

5.2.1 Confirm the accuracy, precision and safety of the equipment before use and report unsafe and potential risk situations.
5.2.2 Identify risk and safety issues and take action to manage or mitigate risk and safety issues.
5.2.3 Assign responsibilities to team members based on role and competence.

5.3 Lead and participate in quality management activities.

5.3.1 Set and monitor clear targets aligned with common objectives and goals.
5.3.2 Collect and use data to track and report quality trends, identify patterns and provide evidence-based insight.
5.3.3 Determine potential root causes of quality issues and recommend quality improvement and risk reduction measures to achieve improved outcomes.

5.4 Apply financial stewardship and management principles.

5.4.1 Consider the financial implications when making decisions or recommendations.
5.4.2 Prioritize goals to manage time and workload effectively.
5.4.3 Employ principles of productivity to optimize efficient resource utilization.
5.4.4 Maintain professional and ethical financial practices.

5.5 Apply critical thinking and decision-making in practice.

5.5.1 Demonstrate effective problem-solving and professional judgement.
5.5.2 Interpret and integrate evidence-informed practice, research and literature in decision making.
5.5.3 Recognize situations where services should be adjusted, limited, modified or discontinued.
5.5.4 Demonstrate effective, appropriate, and timely consultation with experts and others.
5.5.5 Reflect and evaluate using critical thinking when faced with problems, issues and challenges.
5.5.6 Demonstrate insight into personal expertise and limitations.
5.5.7 Consider alternative methods and justify selected option(s).
5.5.8 Analyze and synthesize information and identify new information, patterns and findings.
5.5.9 Integrate relevant information with previous learning, experience, professional knowledge and current practice models.
5.5.10 Identify and implement a plan to address the problem, issue or challenge.
5.5.11 Evaluate the effectiveness of the plan to address the problem, issue or challenge and identify opportunities for continuous quality improvement.

Unit 6: Education and Research

6.1 Participate in and lead research initiatives, following ethical principles and research methodology to advance kinesiology practice.

6.1.1 Identify knowledge gaps that may lead to novel research or further exploration.
6.1.2 Determine a suitable research methodology to address the research questions.
6.1.3 Demonstrate critical analysis in selecting and developing validity and reliability research instruments and tools.
6.1.4 Conduct research following ethical principles and established policies.
6.1.5 Collect data using a variety of valid and reliable methods and technologies.
6.1.6 Analyze research using appropriate data analysis techniques.
6.1.7 Engage in knowledge translation activities to promote health literacy and further the profession and evidence-based practice.

6.2 Develop educational materials and deliver education to meet the needs of the learner.

6.2.1 Apply education and learning theories and principles in practice.
6.2.2 Assess learning needs and required accommodations to inform instruction, personalize learning and improve outcomes
6.2.3 Critique and select evidence-based literature and practice-based references to support the development of educational resources.
6.2.4 Develop a variety of learning activities based on the learner's needs and evidence-based information.
6.2.5 Use a variety of inclusive education materials.
6.2.6 Implement the learning plan to promote, maintain and enhance health, wellness, function and movement.
6.2.7 Evaluate learning to confirm the effectiveness of teaching and the learner's competence.

Unit 7: Communication, Collaboration and Advocacy

7.1 Communicate in a timely, accurate and effective manner with patients/clients and stakeholders.

7.1.1 Assess the communication needs of the target audience.
7.1.2 Identify barriers to effective communication.
7.1.3 Adapt messages and modes of delivery to meet the needs of the audience.
7.1.4 Observe non-verbal cues and respond appropriately.
7.1.5 Evaluate the effectiveness of the communication.
7.1.6 Foster open and honest communications.
7.1.7 Verify accuracy of verbal communications and written information.
7.1.8 Communicate clearly, concisely, comprehensively, and accurately.

7.2 Collaborate with inter- and intra-professional teams to achieve common goals and to optimize services.

7.2.1 Identify opportunities for shared benefit and vision.
7.2.2 Engage in inter-professional collaboration when making decisions, problem-solving, and engaging in conflict resolution.
7.2.3 Identify and encourage team members to work within their full scope of practice and personal sphere of competence.
7.2.4 Collaborate with interprofessional teams by sharing, analyzing, and developing common goals and initiatives.
7.2.5 Evaluate interprofessional approaches for efficiency and appropriateness.
7.2.6 Co-create integrated care pathways that streamline navigation across providers.

7.3 Manage assignment of service to support personnel and students.

7.3.1 Consider the role and approved responsibilities of support personnel and students.
7.3.2 Obtain informed consent from the patient/client for the direct involvement of support personnel and students.
7.3.3 Assign tasks according to competence, individual scope of practice and the organizational policies.
7.3.4 Anticipate and take responsibility for managing potential adverse outcomes.
7.3.5 Provide feedback to improve practice and to ensure positive patient/client outcomes.

7.4 Use technology to enable and enhance secure communication and collaboration.

7.4.1 Obtain patient/client informed consent to the use of technology to support transcription and documentation, communicate electronically and to provide virtual services.
7.4.2 Demonstrate professional behaviours and professional boundaries when using social media.
7.4.3 Adhere to privacy legislation and practice standards when using technology, including when providing virtual services or using technology to support transcription and documentation.
7.4.4 Apply privacy and cybersecurity best practices when using technology and digital systems, and monitor security and data protection according to privacy legislation and regulations.
7.4.5 Take required action in response to unauthorized access, use and disclosure of information according to legislation and practice standards.

7.5 Advocate for the patient/client, self and the profession.

7.5.1 Advocate for the professional involvement of kinesiology services.
7.5.2 Advocate for patient/client access to services, resources and programs.
7.5.3 Educate patient/client to self-advocate.
7.5.4 Advocate for and participate in activities that support advancement of the profession.
7.5.5 Educate employers and the public on the role of kinesiologists and the benefits of receiving care from kinesiologists.
7.5.6 Advocate for the development and implementation of programs and resources that support health, wellness, function and movement.
7.5.7 Navigate resources and systems to obtain desired outcomes.

7.6 Use effective counselling and coaching skills and strategies in practice.

7.6.1 Apply coaching and counselling theories and strategies to support and empower patients/clients.
7.6.2 Assess patient/client readiness to change to inform counselling techniques and care plan.
7.6.3 Co-create realistic counselling and coaching goals.
7.6.4 Identify and address barriers to achieving counselling and coaching goals.
7.6.5 Refers to other professionals when patient/client counselling needs are beyond either or both of the professional scope of practice and personal sphere of competence.

7.7 Engage in ethical marketing and advertising activities.

7.1.1 Adhere to advertising legislation, regulations and professional obligations.
7.1.2 Ensure advertising and marketing information is truthful, balanced, accurate, not misleading and is in the public interest.

Unit 8: Professional Development

8.1 Apply reflective practice.

8.1.1 Engage in continuous self-awareness by critically evaluating one's own knowledge, skill and judgement, patient/client outcomes and feedback from others.
8.1.2 Analyze the impact of your professional behaviours and actions on others.
8.1.3 Analyze consequences of actions before, during and after action is taken.
8.1.4 Obtain feedback and demonstrate a willingness to consider the opinions of others.
8.1.5 Consider and incorporate experiences and learning in practice.
8.1.6 Calibrate self-assessment based on experiential learning and feedback from patients/clients and others.
8.1.7 Provide constructive feedback to others.

8.2 Engage in continuous learning and professional development.

8.2.1 Develop a plan to address learning needs, including measurable goals and anticipated outcomes.
8.2.2 Engage in learning activities relevant to identified needs.
8.2.3 Keep abreast of current evidence-informed practice, research, practice standards, changes in the practice environment and technology to inform practice.
8.2.4 Critically evaluate literature and other resources to inform practice.
8.2.5 Evaluate the effectiveness of learning on practice.
8.2.6 Share new knowledge and experiences with others.

Glossary of Terms

Approaches are methods, tools, and strategies used to design and implement care plans, treatments, and programs (ESSA, 2024).

Biomechanical principles are fundamental physical and mechanical concepts that underlies the understanding of how living organisms generate and respond to forces and movement. (Innocenti, 2018)

Biomechanical function is the role played by an organism's structures, anatomical units, and tissues in generating or responding to force and movement.

Biopsychosocial factors are the anatomical, physiological, cognitive, emotional, cultural and other individual characteristics that contribute to health outcomes and humane care (Borrel-Carrió, Suchman & Epstein, 2004)

Care plan is a document that records the care to be provided to an individual which includes the consideration of that person's unique abilities, physical, social and emotional needs, and cultural and spiritual preferences (Government of British Columbia, 2009).

Client is the direct recipient of services. A client may be an individual, a group, or a population.

Co-creation is a collaborative and iterative approach to problem-solving and decision-making that brings together patients/clients, internal, and external partners to develop mutually agreed-upon, innovative solutions. In this approach, all participants are active participants who share their opinions to improve overall outcomes. It is a democratic approach that recognizes patients' unique experiential knowledge and aims to create shared value for all (Israilov & Cho, 2017; William F, 2023).

Competence is the ability to integrate and apply contextually appropriate knowledge, skills and psychosocial factors, including beliefs, attitudes, values and motivations. Consistently perform within a specified domain. Competence defines the minimum performance expectation for skill development and critical thinking (Mainz et al., 2024; Worsfold, 2015).

Competencies are a broader set of knowledge, skills, judgment, and behaviours necessary to a particular role or function (Worsfold & Kattelmann, 2025).

Competency Model is a framework for identifying and defining the skills, knowledge, and attributes necessary for successful performance in a given role or responsibility.

Complementary and alternative therapy is a broad group of therapeutic practices, services, remedies, or devices based on various theories or beliefs, which may or may not be grounded in evidence-based practice and scientific principles. This definition may include conventional treatments, practices, and products used in unconventional ways, as well as new or emerging treatments, practices, and products based on conventional medical understanding and scientific reasoning (College of Kinesiologists of Ontario, 2023).

Critical Thinking is the ability to objectively analyze and evaluate information gathered from, or generated by, observation, experience, reflection, reasoning, or communication to form beliefs and guide action about an issue or situation.

Determinants of Health are the combination of structural determinants, including political, cultural, economic and the natural environment, for example, the land, climate change, political and social structure, and the person's characteristics, behaviors and circumstances in which they are born, grow up, live, work and play for example income and social status, Education, housing, social support networks, genetics, health services, gender and age. The intersection of these determinants on the health of individuals, groups and communities in different ways (National Collaborating Centre for Determinants of Health, 2023; WHO, 2017).

Diversity encompasses differences among groups and individuals, including ethnicity, race, socioeconomic status, culture, experiences, language, religion, sexual orientation, geographical area, and gender, body, relationship, and sexuality (ESSA, 2024).

Evidence-based information and research involve processes that apply the best available evidence to decision-making (ESSA, 2024).

Ergonomic principles are the foundational concepts that may be applied to safeguard health and improve performance (Bridger, 2008),

Inclusion is an environment in which all people are respected equitably and have equal access to opportunities. Requires the identification and removal of barriers (e.g., physical, procedural, visible, invisible, intentional, unintentional) that inhibit participation and contribution (Graybridge-Malkam, 2023).

Informed Consent is the process by which the professional recommending the assessment or treatment is fully transparent with the patient/client regarding the proposed services and ensures their understanding of the purpose, risks, benefits, alternatives, and consequences of not engaging in the proposed services or treatment, so that the client or the substitute-decision-maker may make a voluntary decision to participate. Consent may be verbal or in writing and can be withdrawn at any time (Healthcare Consent Act, 1996).

Pharmacology is the study of drugs and their safe use, including drug classes, contraindications, biological effects, and therapeutic uses. Pharmacology focuses on the effect of drugs on the body.

Pharmacokinetics is the study of how the body absorbs, distributes, metabolizes and excretes drugs.

Performance is the body's achievement of or capacity to achieve a task or outcome as determined by comparison against one or more measurements or criteria (Baker et al, 2016).

Performance Indicators provide a means of assessing an individual's progression toward or achievement of a set of competencies (Kentucky Department of Education, 2023).

Motor Learning is the process of acquiring, improving, and retaining new movement skills through practice, involving changes in the brain that enable smoother, more consistent, and adaptable actions, shifting from conscious effort to automatic performance (Krakauer, 2019).

Technology is a broad term encompassing technology ranging from those currently used in everyday work and life to those that are more advanced. Examples of advanced technology include artificial intelligence, speech and handwriting recognition, virtual reality and 3D visualization, real-time collaboration, digital monitoring systems, wearable devices, robotics and exoskeletons, motion capture, biofeedback/neuromodulation devices (Russell et al, 2021).

Well-being is a positive experience for individuals and societies. The holistic state of health and happiness encompasses physical, mental, emotional and social dimensions of wellness (ESSA, 2024).

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