### RPL Standard



### SISXFAC002 Maintain Sport, Fitness and Recreation Facilities

**How to complete this form:**

Complete all areas in **blue** on the following pages by providing information on your previous skills and qualifications using the information below as a guide.

**Unit Description:**

### This unit describes the performance outcomes, skills and knowledge required to maintain facilities within a sport, fitness and recreation context

### To gain RPL for this unit of competency the applicant must meet the following benchmarks along with providing evidence that their current level of knowledge and skills is

Relevant to all performance criteria, knowledge and **performance evidence**.

**The applicant must provide evidence of the following to gain RPL for this unit:**

* Evidence of work as an administration assistants who work under direct supervision in a range of roles and settings in the sport, fitness and recreation industry. This includes providing support in the provision of grounds and facilities maintenance; routine housekeeping; or administrative assistance in locations such as fitness centres, aquatic centres, or outdoor sporting grounds or complexes. Work is performed according to relevant legislation and organisation policies and procedures.
* The applicant must demonstrate knowledge of all Performance Criteria, Essential Knowledge and Skills

**Example Evidence:**

### Relevant transcript & certificate

### Evidence of working with the industry through letters from employers outlining job role and duties

### Completion of ACFB e-learning quiz/oral questioning related to work within a fitness practice; If required this will be completed at a later stage

### Cleaning and maintenance and cleaning checks and records

### *Unit Evidence Description*



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| **Applicant Name** |  |  |  |



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| ***SIS30315*** | | Certificate III in Fitness | | | **SISXFAC002** | **Maintain Sport, Fitness and Recreation Facilities** | **Office Use only** | |
| **Type of Unit:** Elective | | | **Prerequisite:** None | | **Sufficient** | **F.E.R.** |
| **Elements / Performance Criteria** | | | | **EVIDENCE** *(Applicant; Explain in detail how your evidence relates to the required knowledge listed)* | | |  |  |
| **1.** **Conduct maintenance checks of facilities or areas** | | | | | | | | |
| 1.1 | Identify potential hazards in facility or area by conducting regular facility checks | | |  | | |  |  |
| 1.2 | Report hazards to supervisor | | |  |  |
| 1.3 | Maintain areas and amenities | | |  |  |
| 1.4 | Store and handle chemicals safely | | |  |  |
| 1.5 | Remove and dispose of wastes and dangerous chemicals promptly | | |  |  |
| **2. Check supplies** | | | | | | | | |
| 2.1 | Check supplies regularly for quantity, quality and expiry date | | |  | | |  |  |
| 2.2 | Order or request supplies as required to meet anticipated demand | | |  |  |
| 2.3 | Dispose of expired supplies | | |  |  |

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| **3. Clean facility areas** | | | | |
| 3.1 | Locate and wear personal protective clothing |  |  |  |
| 3.2 | Conduct cleaning tasks at specified times |  |  |
| 3.3 | Display notices advising clients of cleaning in progress |  |  |
| 3.4 | Use cleaning agents safely |  |  |
| 3.5 | Clean and store cleaning equipment |  |  |
| 3.6 | Identify and catalogue lost property |  |  |
| 3.7 | Maintain cleaning records |  |  |
| 3.8 | Lock storage areas when unattended |  |  |

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| **Knowledge Evidence** | **EVIDENCE** *(Applicant; Explain in detail how your evidence relates to the required knowledge listed)* | **Office Use Only** | |
|  | | **Sufficient** | **F.E.R.** |
| Relevant legislation related to customer service:  • Consumer law  • Equal opportunity  • Work health and safety/ occupational health and safety  • Promotions |  |  |  |
| Organisational policies and procedures to enable ethical and non-discriminatory treatment of: client requests and resolution of complaints:  • Communication protocols  • Complaint procedures  • Customer service procedures  • Reporting procedures  • Personal presentation  • Privacy, Record keeping procedures |  |  |  |
| Communication mediums required to provide service to clients and colleagues |  |  |
| Conflict resolution strategies |  |  |
| Awareness of customs and practices of various social and cultural groups within Australia, to assist with meeting client needs and expectations in regards to:  • Modes of greeting, fare-welling and conversation  • Body language, e.g. body gestures, clothing  • Formality of language |  |  |  |
| Services and products within the organisation that may be suited to particular clients |  |  |  |
| Principles and benefits of enhanced customer service experiences and positive communication |  |  |

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| **Performance Evidence** | **EVIDENCE***(This evidence will be collected via documents outlined on first page)* | **Office Use Only** | |
|  | | **Sufficient** | **F.E.R.** |
| * Select and safely use cleaning agents and equipment to clean at least two of the following areas over three service periods: * outdoor * indoor * dry or wet recreation centre * build and non-built | *This evidence will be collected via submission of documentation requested on the first & second page.* |  |  |
| Complete the above in response to at least three of the following hazards:  leaking or damaged containers  defects in the storage area   * contamination * spillages * unsecured equipment * breakages | *This evidence will be collected via submission of documentation requested on the first & second page.* |  |  |
| Complete above cleaning tasks to required standards while:   * conserving resources in the cleaning process * disposing of or recycling waste * using correct manual-handling and cleaning techniques * using hygienic cleaning practices * within commercially-realistic timeframes * minimising disruption to clients | *This evidence will be collected via submission of documentation requested on the first & second page.* |  |  |
| * Complete all required documentation according to policies and procedures and with the following information: * dates and times * areas cleaned * staff member involvement. |  |  |  |

**Office Use Only**

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| **RPL Outcome** | | | | |
| **RPL Achieved** | Yes □ | No □ | |
| **Further Evidence Required** | Yes □ | No □ | |
| **Further Evidence *(list of required evidence)*** | | | | |
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| *RPL Assessor Name:* | | | *Date:* | |