BY ORDER OF THE COMMANDER
AIR RESERVE PERSONNEL CENTER

AIR RESERVE PERSONNEL CENTER
INSTRUCTION 36-8105

9 JANUARY 2006

Civilian Personnel

PHYSICAL FITNESS PROGRAM (PFP)

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements and complies with the requirements of AF/DPP Letter, 23 June 2003, *Excused Absence for Physical Activities for Air Force Civilian Employees*, and AFRC/CV Letter, 23 Jul 2003, *Physical Fitness Program (PFP) Policy*. It applies to all HQ ARPC full time, permanent civilian employees. It establishes local policy in accordance with higher headquarters guidance and provides standardized instruction of employee application and supervisory approval of employee participation in the HQ ARPC PFP.

1. Policy. The AF Director of Personnel Policy stated that the purpose of this program is to enhance the Air Force's mission in some appreciable manner. "The goal is to ensure the health and wellness of the Air Force's workforce." Decisions regarding matters covered by this policy will be made without regard to race, sex, religion, color, national origin, age, or disabled condition.

2. Coverage. Full-time permanent HQ ARPC civilian employees are covered by this guide and may participate in the PFP, provided the employee obtains medical clearance and supervisory approval. The program does not cover temporary, Student Temporary Employment Program, contractor personnel, or part-time employees.

3. Definitions.

3.1. PFP: An optional program available to full-time, permanent HQ ARPC civilian employees with the goal to improving or maintaining employees' physical fitness.

3.2. Medical Clearance: An annually signed ARPC IMT 43 (**Attachment 1**), **Medical Clearance for Physical Fitness Program (PFP)**, from employee's primary care provider/physician certifying that physical fitness activities are permitted and identifying any limiting conditions. The employee must acquire a signed medical statement.

4. Responsibilities.

4.1. Managers and supervisors are responsible for:

4.1.1. Approving or disapproving employees' request to participate in the PFP and filing a copy of the approved/disapproved ARPC IMT 42, **Physical Fitness Activities for Civilians**, in the employee's SF 971 folder.

4.1.2. Monitoring their employees use of excused absence for PFP activities and accurately documenting applicable Time and Attendance records.

4.1.3. Modifying or suspending employee's PFP participation schedules, if necessary, to accomplish HQ ARPC's mission.

4.1.4. Notifying employees, by signing the application and providing a copy to the employee, when they have been approved to participate in the PFP.

4.1.5. Maintaining the PFP records, i.e. medical statement allowing participation and agreement between the supervisor and employee in the Supervisor's Employee Work Folder (No medical information is to be maintained in this folder).

4.1.6. Taking appropriate action to terminate employee participation in the PFP if the employee violates program requirements and notifying the Civilian Personnel Office for possible disciplinary action.

4.2. Employees are responsible for:

4.2.1. Obtaining medical clearance annually in accordance with ARPC IMT 43, and providing that along with the PFP application, ARPC IMT 42 to their first line supervisor; (Employees must obtain medical clearance (physical) from their primary care provider or physician);

4.2.2. Engaging in PFP activities when the mission of the organization allows, and only to the extent approved and documented in their medical clearance and PFP application;

4.2.3. Promptly reporting to their supervisor any injuries sustained while engaging in PFP activities;

4.2.4. Coordinating excused absences for PFP purposes with the supervisor and timekeeper;

4.2.5. Complying with the requirements of the program. Failure to adhere to PFP requirements may result in removal from participation and possible disciplinary action.

4.3. Timekeepers are responsible for accurately reflecting employee's excused absences for PFP purposes on the time and attendance records with code "LN" on the timecard with the remark "Physical Fitness".

5. Authorized Activities.

5.1. The following are activities authorized under the PFP: running; jogging; brisk walking; weight training; aerobics; rope-jumping; bicycling; calisthenics; and other types of cardiovascular exercises. Golfing; bowling; softball; team sports, etc. are examples of activities that do not fall under this program. However, some sports like basketball or other aerobic sports, which are played one-on-one, may be authorized as long as the fitness fundamentals are met. Exceptions may be determined by the Director. Questions about the appropriateness of an activity should be elevated through supervisory channels to the Civilian Personnel Office.

5.2. Employees shall engage in the PFP only as authorized on the employee's current medical clearance ARPC IMT 43. Any physical restrictions must be stated on the IMT.

5.3. Employees participating in the PFP should consider developing an exercise program that combines an aerobic workout, strength training, and flexibility.

6. Scheduling PFP Activities.

6.1. Employees may use up to 3 hours of duty time per week for physical fitness. Only one block of time per day in increments of 1.5 hours or less (in increments of 15 minutes) is authorized if approved by the employee's supervisor. The 3 hours per week consists of total time away from the job and included time for changing clothes, and showering. Any unused time from previous weeks cannot be banked.

6.2. A supervisor may require an employee to change or suspend participation in the PFP because of TDY, training, or work exigencies.

6.3. The physical fitness period cannot be combined with authorized breaks, but may be done in conjunction with the lunch period.

6.4. All employees must start and end PFP activities in their work area.

7. Documenting and Reporting PFP Time.

7.1. Although leave slips are not normally required for PFP excused absences, employees must notify their supervisor before leaving the workplace to participate in the PFP. If work exigencies demand the presence of an employee at the employee's selected time, the supervisor may require the employee to choose another time to participate in the PFP. Supervisors must use this provision judiciously so as not to discourage employee participation in the PFP.

7.2. PFP hours are excused absences (transaction code "LN" with remark "Physical Fitness") for timekeeping purposes.

7.3. Normally, overtime or compensatory time may not be approved nor earned on days when use of duty time for PFP activities is approved. In deciding whether to approve excused absence for physical fitness activities under any of these situations, a supervisor should consider the benefits to the employee's fitness against the needs of the organization.

7.4. If any abuse is identified, the program privileges may be revoked and/or disciplinary action taken.

8. Injuries.

8.1. All PFP participants must promptly report to their supervisors any injuries sustained while engaging in PFP activities.

8.2. The Federal Employees Compensation Act (FECA) provides for wage replacement benefits and medical coverage for injuries sustained by federal employees arising from the course of employment. While injuries and occupational diseases arising from participation in a structured physical fitness program are generally compensable under the FECA, such coverage is determined on a case-by-case basis at the Office of Worker's Compensation Programs.

9. IMTs Prescribed: ARPC IMTs 42 and 43.

ANN C. SHIPPY, Colonel, USAF
Commander

Attachment 1

PHYSICAL FITNESS ACTIVITIES FOR CIVILIANS

PHYSICAL FITNESS ACTIVITIES FOR CIVILIANS

REQUEST FOR APPROVAL OF EXCUSED ABSENCE AND MEMORANDUM OF UNDERSTANDING FOR PHYSICAL FITNESS ACTIVITIES OF ARPC CIVILIAN EMPLOYEES

This request must be completed by the employee and submitted to the first level supervisor accompanied by a doctor's statement certifying that physical fitness activities are permitted and identifying any limiting conditions. The original shall be maintained in the supervisor's record of employee (971 file) along with the doctor's certification.

EMPLOYEE

I, JOHN SMITH, REQUEST APPROVAL OF EXCUSED ABSENCE, NOT TO EXCEED 3 HOURS PER WEEK, FOR THE SOLE PURPOSE OF PARTICIPATING IN PHYSICAL FITNESS ACTIVITIES. I UNDERSTAND *(Employee must initial each line):*

_____ I MAY ONLY PARTICIPATE IN APPROVED PHYSICAL FITNESS ACTIVITIES DURING ANY PERIOD OF EXCUSED ABSENCE FOR SUCH ACTIVITIES.

_____ MY PARTICIPATION IS SUBJECT TO DAILY SUPERVISORY SCHEDULING AND APPROVAL AND THE ABSENCE MAY BE DISAPPROVED BY MY SUPERVISOR PERIODICALLY OR COMPLETELY DUE TO MISSION REQUIREMENTS.

_____ IF MY REQUEST IS NOT APPROVED OR I CANNOT BE RELEASED FROM WORK FOR PHYSICAL FITNESS ACTIVITIES DUE TO MISSION REQUIREMENTS, I MAY NOT CHALLENGE THE DECISION UNLESS THE DECISION IS ARBITRARY OR CAPRICIOUS.

_____ I MUST RECORD EACH ABSENCE ON MY TIME SHEET WITH THE APPROPRIATE CODE FOR EXCUSED ABSENCE (LN) ALONG WITH THE REMARK "PHYSICAL FITNESS."

_____ THAT IN ORDER TO ENHANCE MISSION EFFECTIVENESS, I MUST MAKE EVERY EFFORT TO IMPROVE MY HEALTH AND WELL BEING DURING ANY PERIOD OF EXCUSED ABSENCE FOR THE PURPOSE OF PHYSICAL FITNESS.

_____ THAT THIS REQUEST MUST BE ACCOMPANIED BY A DOCTOR'S STATEMENT CERTIFYING THAT PHYSICAL FITNESS ACTIVITIES ARE PERMITTED WITH ANY LIMITING CONDITIONS IDENTIFIED. I AM RESPONSIBLE FOR ANY EXPENSES TO OBTAIN THIS CERTIFICATION.

_____ THAT SHOULD MY ABILITY TO PARTICIPATE IN PHYSICAL FITNESS ACTIVITIES BECOME LIMITED IN ANY MANNER, I WILL NOTIFY MY SUPERVISOR IMMEDIATELY.

EMPLOYEE'S SIGNATURE	DATE *(YYYYMMDD)*

FIRST LEVEL SUPERVISOR

RETAIN A COPY OF THIS SIGNED REQUEST AND DOCTOR'S CERTIFICATION IN THE EMPLOYEE'S 971 FILE

_____ THIS EMPLOYEE IS NOT ON A TEMPORARY APPOINTMENT.

_____ ENHANCEMENT OF MISSION ACCOMPLISHMENT CONSIDERED.

_____ PERIODIC EXCUSED ABSENCE IS APPROVED FOR UP TO 3 HOURS PER WEEK. THIS MAY BE CANCELLED OCCASIONALLY OR PERMANENTLY DUE TO SCHEDULING OR MISSION REQUIREMENTS.

_____ THIS REQUEST IS DENIED DUE TO MISSION REQUIREMENTS AT THIS TIME. RECONSIDERATION MAY BE REQUESTED AS MISSION REQUIREMENTS ALLOW.

SUPERVISOR'S SIGNATURE	DATE *(YYYYMMDD)*

ARPC IMT 42, 20040318, V2

Attachment 2

MEDICAL CLEARANCE FOR PHYSICAL FITNESS PROGRAM (PFP)

MEDICAL CLEARANCE FOR CIVILIAN PHYSICAL FITNESS PROGRAM (PFP)

DOCTOR'S STATEMENT FOR PARTICIPATION IN PHYSICAL FITNESS ACTIVITIES

PLEASE COMPLETE THE FOLLOWING STATEMENT FOR JOHN SMITH
(EMPLOYEE'S NAME)

☒ IS PHYSICALLY ABLE TO PARTICIPATE IN A PHYSICAL FITNESS PROGRAM WHICH SHE/HE HAS SELECTED WITHOUT LIMITATIONS, OR

☐ IS PHYSICALLY ABLE TO PARTICIPATE IN A PHYSICAL FITNESS PROGRAM WHICH SHE/HE HAS SELECTED WITH THE FOLLOWING LIMITATIONS OF:

☐ IS NOT PHYSICALLY ABLE TO PARTICIPATE IN A PHYSICAL FITNESS PROGRAM

DOCTOR'S PRINTED NAME	DOCTOR'S SIGNATURE
ELIZABETH JACKSON	Elizabeth Jackson
DOCTOR'S ADDRESS	DOCTOR'S PHONE NUMBER
2762 S. Trent Blvd. Jamestown CO 89999	(303) 999-9999

PROTECTED BY THE PRIVACY ACT OF 1974

ARPC IMT 43, 20040322, V1

Attachment 3

LET'S GET READY FOR FITNESS

Congratulations! You've just made the first step to a healthier lifestyle. You've decided to participate in an exercise program! Whether your reason to start this program is improved health, improved appearance, or an improved sense of well being, regular exercise is one of the best ways to gain healthful benefits.

If you have been inactive and are just beginning a fitness program you will need to get permission from your medical doctor. Be sure that your doctor understands what level of activity you've had before beginning the program.

Obviously, you are starting a fitness regimen to succeed. But good intentions alone will not help you do so. There are a variety of things you can do or be aware of that can help you achieve your desires.

Let's talk briefly about attitude. Starting the process indicates a positive change in your attitude. But to be successful, you must maintain that change. Here are a couple of areas that will help you maintain the right attitude. First, set realistic goals. Losing 50 lbs in five weeks is not realistic. Talk to your primary health provider. Ask him/her what is realistic and then set a goal that matches that advice. The same is true of other goals such as running a marathon, bench pressing 300 lbs. and many, many more. Keep your goals realistic.

Second, be patient. You didn't get in the shape you are now overnight and you are not going to make drastic improvements overnight either. One sure method of maintaining a level of patience is to track your progress. Depending on what your goals are, check and record your weight, blood pressure, heart rate, and possibly your stamina on a regular basis. Chances are good that if you are maintaining your regimen, you will be making progress. If you maintain records of these unseen changes, you can look at them and actually see that you are improving.

And then make and keep a commitment of your time and effort. Thirty minutes a day, of the right type of exercise, will do wonders for your overall health and make great inroads into whatever other goals you have set for yourself.

And now some words of caution. Stretch before you start exercising. It is a good idea to stretch at the end of an exercise session as well. Stretching does many things. It helps prevent lower back pain and injuries. Stretching also prepares your body for exercise by increasing your range of mobility, and it prepares the body for the exertion by adjusting your pulse, your breathing, and furnishing lubricants to muscles and joints. One other benefit that comes from stretching is the improvement in your posture. Stretching after a workout significantly reduces muscle soreness.

Probably the most important advice you can get is to listen to your body. Be alert for such things as pain or pressure in the chest, abdomen, neck, jaw or arms; unaccustomed shortness of breath; dizziness, nausea or vomiting; an irregular pulse; and of course slow recovery from exercise or extreme fatigue. See your medical provider and give him/her all of the particulars. Then follow their advice. All of these are warning signs of potentially serious health problems.

Now here are some more tips to help you succeed:

1. Eating a carbohydrate rich food within 2 hours of exercising will help you perform at your best.

2. Drink plenty of water before, during, and after exercise, especially in hot weather.

3. Avoid common injuries, usually resulting from high impact workouts; from doing too much too quickly; and from wearing improper shoes.

4. Test your pulse at your wrists or neck for 10 seconds immediately after you stop exercising. Multiply this number by 6 to determine if your heat rate is in your target range. Just for reference, subtract your age from 220 to get your maximal heart rate. Another test is to talk to someone while you are exercising. If you can do that without being too out of breath you should be within acceptable limits.

Remember, this is not a quick process. Plan on this being a lifetime behavioral change that will help you live a longer, healthier, and happier life. Good luck.