

Public Health Interventions Advisory Committee

Workplace Physical Activity - Consultation on the Synopsis of Evidence – Stakeholder Comments and Response Table

24th August – 21st September 2007

Stakeholder Organisation	Evidence submitted	Document name	Section	Page No.	Comments Please insert each new comment in a new row.	Response Please respond to each comment
Association for the Study of Obesity (ASO) and University of Newcastle		General			The evidence indicates that the workplace is a useful arena in which to conduct interventions.	We agree. Thank you.
Association for the Study of Obesity (ASO) and University of Newcastle		General			The five key areas into which the reviews were divided seemed to cover a broad range of interventions which would impact health behaviours. The 'other' group seemed particularly broad and with multi-component interventions.	We agree. The evidence covers a very broad field and there was no clearer way to split the data. The key areas were derived from the evidence found and not developed a priori
Association for the Study of Obesity (ASO) and University of Newcastle		General			Interesting the lack of well designed interventions in this important context. Perhaps there needs to be a specific call for workplace based interventions to fit in with the Choosing Health (2004) themes.	Noted.
Association for the Study of Obesity (ASO) and University of Newcastle		General			Limiting the review to academic literature was perhaps limiting the data. It was raised at the Stakeholder meetings that a number of large organisations have workplace based interventions which have not had academic evaluation.	We agree. This is the main reason for this period of consultation where NICE invites stakeholders to submit evidence, and for the fieldwork phase of guidance production where NICE meets with practitioners to learn from their experience.
Association NHS Occupational Health Physicians (ANHOPS)		Effectiveness Review	General		Agree, a valid review of the evidence has been performed	Thank you.
Association NHS Occupational Health Physicians (ANHOPS)		Effectiveness Review	General		Agree, appropriate statements have been produced	Thank you.
Association NHS Occupational		Economic Review	General		Agree, a valid review of the evidence (such as it is) has been performed	Thank you.

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Health Physicians (ANHOPS)						
Association NHS Occupational Health Physicians (ANHOPS)		Economic Review	General		Agree, appropriate statements have been produced from the limited evidence currently available	Thank you.
CASPE Research		General			On this occasion we have no comments on the proposed synopsis of the evidence.	Thank you.
Centre for Workplace Health (CPWH), St. Mary's University College		Synopsis	General		The Centre for Workplace Health (CPWH) welcomes and supports this comprehensive review of the available evidence on the effectiveness of workplace physical activity interventions, but expresses a concern that no acknowledgement has been made to the imminent publication of the results of the national British Heart Foundation 'Well@Work' pilots which will have a notable impact in building the evidence base. We recommend that future documents produced as part of this review include reference to the study as a signpost for readers.	Thank you for your support. We note your concern. We agree the Well@Work pilot projects are important. Unfortunately the timescale for this guidance means that we are unable to wait for the publication of the results of this project or to consider them in this review.
Centre for Workplace Health (CPWH), St. Mary's University College		Synopsis	Evidence statement 13	18	We would welcome clarification as to whether there is no evidence available to support the involvement of employees in planning OR whether the evidence suggests that this does not increase effectiveness (this distinction is made for many of the other evidence statements). Perhaps it is worth linking this evidence statement with the information provided in evidence statement 4c (page 13).	Evidence statement 13 should read "there is no evidence that the involvement in implementation and review of the physical activity interventions. We will amend the evidence statement to reflect this. However, linking to evidence statement 4c there is evidence from one study (Titze et al., 2001) that employee designed interventions (i.e. those that involve employees in the planning stage) can have a positive effect on physical activity

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Centre for Workplace Health (CPWH), St. Mary's University College		Synopsis	Evidence statement 14	19	We would suggest that better clarity is needed when making the distinction between negative perceptions and physical barriers to the implementation of workplace physical activity interventions. A more explicit description of each category with the detail of the main examples might help to make this clear.	<p>Negative perceptions included:</p> <ul style="list-style-type: none"> • Views about stair climbing messages • Perceived time constraints • Perceived fitness constraints <p>Physical barriers included</p> <ul style="list-style-type: none"> • Location/absence of showers • Location of lifts c.f. stairs • Lack of cycle paths • Unsafe lighting on cycle paths <p>These are detailed in pages 122-127 of the main report.</p>
County Durham PCT / Darlington PCT		General			<p>From a County Durham PCT / Darlington PCT viewpoint I have offered this out to all staff concerned with Public Health, Obesity, physical activity etc. Unfortunately responses have been extremely poor and feedback indicates that staff have contributed to the consultation in other forums as it has been brought up on the agenda.</p> <p>General discussions reveal a feeling of clarity concerning interventions appears clear, understandable and workable. The conclusions appear valid and helpful.</p>	Thank you.
CTC, the national cyclists' organisation	Workplace Interventions work - <i>A Synopsis of evidence showing that active transport can be increased through workplace</i>	General			Please see attached.	Thank you for this evidence. We look forward to considering it.

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	<i>based interventions</i> by Thomas A Stokell					
Cycling England		Evidence review	General		Cycling England welcomes this guidance, particularly its stated focus on active commuting.	Thank you.
Cycling England		Evidence review	General		<p>We were disappointed with the paucity of evidence on the effectiveness of interventions to increase cycling to work. Increasing rates of cycling to work has the potential to make a significant contribution to public health, yet the lack of well-conducted studies means that other less promising interventions that lend themselves better to intervention research (such as stair climbing) have prominence in this review.</p> <p>We encourage NICE to use a broader definition of study types to look specifically for evidence on cycling to work. These might include case studies and qualitative analysis. Examples are given below:</p> <p>Employer travel plans, cycling and gender: will travel plan measures improve the outlook for cycling to work in the UK? Janet E. Dickinson, Simon Kingham, Scott Copsey, Deborah J. Pearlman Hougie Transportation Research Part D, January 2003, Volume 8, Issue 1, pages 53-97</p> <p>Promoting active transport in a workplace setting: evaluation of a pilot study in Australia Li Ming Wen, Neil Orr, Jeni Bindon and Chris Rissel Health Promotion International, February 2005, Volume 20, Issue 2, Pages 123-133</p>	<p>The evidence base is poor. NICE looked at the broadest possible evidence base, including case studies and qualitative studies. We will consider the evidence you suggest here. Thank you.</p> <p>Screened out as no measure of behaviour change (one of key inclusion criteria)</p> <p>This paper was included under WEN</p>

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					<p>Changing travel to work patterns in South East England. Helena Titheridge, Peter Hall Journal of Transport Geography, January 2006, Volume 14, Issue 1, pages 60-75</p> <p>Factors influencing the propensity to cycle to work. M Wardman, M Tight and M Page Transportation Research Part A: Policy and Practice, Volume 41, Issue 4, May 2007, Pages 339-350</p>	<p>Screened out as not an intervention study (one of key inclusion criteria)</p> <p>Screened out as not an intervention study (one of key inclusion criteria)</p>
Cycling England		Evidence review	Summary	55	The reporting of the Gatersleben and Appleton study seems unduly negative: the study looks into the facilitators for cycling as well as the barriers, but the review focuses on the barriers.	Noted – the full details of both facilitators and motivators for this study are reported in full on page 125
Department of Health		General			<p>Thank you for the opportunity to comment on the synopsis of evidence for the above Public Health (intervention guidance) topic.</p> <p>I wish to confirm that the Department of Health has no substantive comments to make, regarding this consultation.</p>	Thank you.
MRC Epidemiology Unit		Evidence review	General		The literature has been reviewed thoroughly and this has revealed interesting evidence statements. We appreciate that the review takes into account that there are differences in quality of the studies. However, in describing the evidence statements, this does not seem to be taken into account. The phrasing of the evidence does not seem to differ when conclusions are based on high or low quality research (for example: evidence statement 3 vs. 6 or 11 vs. 10). It would be helpful if the evidence statements could better reflect the differences in validity and with that the strength of the available evidence. Did studies with a weaker study design and a lower internal validity contribute less to the	NICE evidence statements use neutral language, but do clearly mark the methodological strength of the contributing studies.

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					overall evidence than other studies?	
MRC Epidemiology Unit		Evidence review		10 - 11	The studies conducted by O'Loughlin and Talvi are reported to have statistically significant effects. The reported p-values however are p=0.05 and p=0.06, respectively. Why are these included as statistically significant results?	Noted – p values checked and accurate so the report will be amended to reflect that these results were not significant. Thank you
MRC Epidemiology Unit		Evidence review		10 - 11	The results of the Hanlon study and the Addley study are reported to positive, although no p-value is reported. How did the reviewers decide to still include this as positive evidence?	These papers report a perceived positive change in physical activity (%) but no p values presented so no conclusions can be drawn about significance of effect of intervention. PHIAAC are interested in the outcomes of interventions even if they are not statistically significant.
MRC Epidemiology Unit		Evidence review		13 - 14	It appears that the Marshall study did not include a non-intervention control group, whereas this was the case in the Plotnikoff study. This difference in design has possibly contributed to the differences in effect, as the Marshall study did report overall increases in PA. This does not seem to constitute conflicting evidence, as stated in Evidence Statement 5a. Could this be rephrased to better reflect the evidence?	Thank you. We will consider alternative wording.
MRC Epidemiology Unit		Evidence review		15	Evidence statement 6 includes a statement about maintenance of physical activity. It appears that the Perkio study is the only study actually assessing long term follow-up. Although the fact that PA levels dropped highlights important issues with maintenance, this statement now reads very negative in relation to the previous evidence statements where no reference to length of follow-up is made. It should be highlighted that evidence for sustained changes in PA is not available in any of the other categories.	We agree and evidence statement 6 will be amended to reflect the fact that evidence for sustained change in PA is not available in the other categories.
Nottinghamshire Healthcare		General			As a disabled person, I would find it difficult to be involved with quite a few of the items suggested and	Thank you for this observation. The purpose in gathering this information at this stage is to

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NHS Trust					am sure some disabled people would find it impossible. What is the purpose of gathering this information? Is the information likely to be used to isolate or discriminate against disabled people? Who has carried out the equality impact assessment and where can it be seen?	review the evidence on interventions to promote physical activity in the workplace. It examines the published literature to determine which (if any) interventions are likely to be effective. The information will be used to suggest ways that employers can improve the physical activity levels of their employees. The question of equity impact will be considered by the Public Health Interventions Advisory Committee when it reviews the evidence that has been found, along with the comments from stakeholders. If you feel there is a role for specific NICE guidance relating to physical activity and people with physical disability, then we would welcome this. Future topics can be suggested via the NICE website http://www.nice.org.uk/page.aspx?o=ts.home
Nottingham University Hospitals NHS Trust		Both reviews	General		We have only one main comment to make about the whole review – namely that it would appear that there is a paucity of academic evidence on workplace wellness programmes and that no conclusions can be drawn about their effectiveness until current studies have been published and further studies have been commissioned and completed. It would be irresponsible of NICE to recommend anything other than future work needs to be done on this area to provide the evidence-base.	Noted. Thank you.
Royal College of Nursing		General			The synopsis of the evidence considered for this public health guidance is comprehensive.	Thank you.
Sefton Metropolitan Borough Council (Leisure)	Active Workforce 12 Month Report	General			I append for your information/interest details of an exemplar scheme based in North Mereseyside. In context; this is one of the Active England (Sport England funded) pilot projects which is now being	Thank you. We will read this with interest.

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Services)	Baseline Data for Active Workforce Programme.				considered by the SE Chairman (Derek Mapp) for national roll out across England	
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	General		<p>We welcome this guidance. SEPHO is the lead public health observatory for physical activity and its 2006 report highlighted the importance of the environment in helping to create opportunities for people to be active as part of everyday life.</p> <p>The workplace appears to offer great potential for promoting physical activity, particularly through active commuting.</p>	Thank you. We agree.
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	Review of effectiveness	5	<p>The review found 33 studies. There are a number of additional studies that have looked into the effectiveness and cost effectiveness of physical activity programmes in the workplace and these seem to have been missed from the searches.</p> <p>References for these seven studies are below:</p> <p>Aldana, S., Merrill, R., Price, K., Hardy, A., Hager, R., (2005) Financial impact of a comprehensive multi-site workplace health promotion program, Preventive Medicine, 40: 131-137.</p> <p>Bly, J., Jones, R., Richardson, J. (1986) Impact of worksite health promotion on health care costs and utilization. Evaluation of Johnson and Johnson's Live for Life program, Journal of the American Medical Association, 256(23): 3235-3240.</p> <p>Jacobsen, B., Aldana, S., (2001) Relationship</p>	<p>This ref did not come up through the search strategy employed for this review – we will follow it up</p> <p>Excluded due to date (criteria was 1996)</p> <p>We will follow this up</p>

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					<p>between frequency of aerobic activity and illness-related absenteeism in a large employee sample, Journal of Occupational Environmental Medicine, 43(12): 1019-1025.</p> <p>Steinhardt, M., Greenhow, L., Stewart, J., (1991) The relationship of physical activity and cardiovascular fitness to absenteeism and medical care claims among law enforcement officers, American Journal of Health Promotion, 5(6): 455-460.</p> <p>Shephard, R., (1992b) Twelve years experience of a fitness program for the salaried employees of a Toronto Life Assurance Company, American Journal of Health Promotion, 6(4): 292-301.</p> <p>Wang, F., McDonald, T., Champagne, L., Edington, D., (2004) Relationship of body mass index and physical activity to health care costs among employees, Journal of Occupational and Environmental Medicine, 46(5): 428-436.</p> <p>Wood, A., Olmstead, G., Craig, J. (1989) An evaluation of lifestyle risk factors and absenteeism after two years in a worksite health promotion programme, American Journal of Health Promotion, 4(2): 128-133.</p>	<p>Excluded on date</p> <p>Excluded on date</p> <p>Excluded as not an intervention study</p> <p>Excluded on date</p>
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	Stair walking	5	<p>It is unfortunate that stair climbing appears first in the evidence review as it seems to have limited potential to improve public health compared to other areas (notably active commuting). The duration is extremely short and total calorific expenditure is unlikely to be great (particularly walking downstairs, which we note some studies included).</p>	<p>Noted. Thank you. We believe that stair climbing is still an important part of overall physical activity in the workplace setting and may be a more accessible intervention to a greater majority of the target population in question. This is an evidence review and PHIAC will consider what they want to make recommendations on at their</p>

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						meetings, taking into account issues such as the level of activity and the reach/cost of an intervention
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review		12	The term 'healthy worker effect' needs explanation	We will clarify this. Thank you.
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review		15 - 16 & 75	Analysis by intention to treat is introduced in a few places but it is not clear whether this criterion is applied to all studies.	Colleagues at SEPHO will be aware that in many cases the published literature does not specify whether the analysis was based on intention to treat. A narrative review such as this one can only report on what is contained in the original paper.
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	2.2	37	We do not believe the exclusion of studies from the USA can be justified, especially when studies from Canada are included. This seems an arbitrary way to reduce the review load and led to the exclusion of 30 studies that may have contained extremely valuable evidence.	It was felt by the NICE team and review team that the contextual factors related to US healthcare and health insurance schemes provided a very different cultural context.
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	2.3	37	We note that previous NICE documents have used the plural for data (i.e. 'data were') but it is singular here.	Noted. Thank you.
South East		Evidence	ES1	52	It seems odd that even though all four interventions	We agree with reviewers comments and will

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Public Health Observatory (on behalf of the Association of Public Health Observatories)		review			used pedometers, the evidence statement does not mention the use of pedometers at all. In at least three of the studies, pedometers appeared to have been a major part of the intervention (as opposed to just being used to measure the outcome). Guidance coming from this would have to be carefully cross-checked with the previous pedometer guidance from NICE, but we don't think this justifies not mentioning them.	add the words 'using pedometers' in the evidence statement 2 on page 52. (after 'workplace walking interventions')
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review			<p>We note that the following study was excluded from the review "because the intervention is not initiated or endorsed by the employer". We would dispute this. This seems a very limiting definition, especially when the paucity of evidence on cycling is considered.</p> <p>Oja P, Vuori I, Paronen O. Daily walking and cycling to work: their utility as health-enhancing physical activity. Patient Educ Couns. 1998 Apr;33(1 Suppl):S87-94.</p> <p>In addition the following study appears to have been missed:</p> <p>Vuori IM, Oja P, Paronen O. Physically active commuting to work--testing its potential for exercise promotion. Med Sci Sports Exerc. 1994 Jul;26(7):844-50.</p>	<p>We will follow this up. Thank you.</p> <p>Excluded as not an intervention study</p> <p>Excluded on date</p>
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review			<p>Similarly it seems odd that this study was excluded when the qualitative study from Gatersleben and Appleton was included. Both studies provide important context for active commuting to work. Factors influencing the propensity to cycle to work. M Wardman, M Tigh and M Page Transportation Research Part A: Policy and Practice, Volume 41, Issue 4, May 2007, Pages</p>	<p>Noted however excluded on key search criteria for review</p> <p>Excluded as not an intervention study</p>

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					339-350	
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	3.1.4	56	We were not sure that the category 'other' made intuitive sense. Many workplace programmes are multi-faceted in nature and it is probably not worth trying to disentangle the impact of the separate factors. It seems better to categorise by specific approach (e.g. counselling, screening) and then to look at multi-faceted programmes.	We will consider this. Thank you.
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review	Excluded studies	158	<p>It is not clear why the following two studies were excluded from the review. These all investigate absenteeism and sick leave outcomes from physical activity programmes in the workplace. This seems important as it is clearly of great interest to employers.</p> <p>Nurminen, E., Malmivaara, A., Ilmarinen, J., Ylöstalo, P., Mutanen, P., Ahonen, G., Aro, T., (2002) Effectiveness of a worksite exercise program with respect to perceived work ability and sick leave among women with physical work, Scandinavian Journal of Work Environment and Health, 28(2): 85-93.</p> <p>Lechner, L., de Vries, H., Adriaansen, S., Drabbels, L., (1997) Effects of an employee fitness program on reduced absenteeism, 39(9): 827-831.</p>	<p>We agree that this is important, however the two studies you mention did not meet the inclusion criteria.</p> <p>Excluded as</p> <ol style="list-style-type: none"> 1. primary aim of intervention was not to increase physical activity 2. no measure of physical activity was included <p>Excluded as</p> <ol style="list-style-type: none"> 3. primary aim of intervention was not to increase physical activity
South East Public Health Observatory (on behalf of the Association of Public Health Observatories)		Evidence review			The following high quality systematic review was also excluded and again it is not clear why this was not included in the reviews section. Marshall, A., (2004) Challenges and opportunities for promoting physical activity in the workplace, Journal of Science and Medicine in Sport, 7(1) Suppl: 60-66.	We will follow this up
South East		Economic			See comments above re missing studies (many of	Thanks you for your identification of these

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Public Health Observatory (on behalf of the Association of Public Health Observatories)		review			these have an economic element)	studies as they were not picked up in the searches for the cost-effectiveness review, although the effectiveness data from the Lechner studies will be used in the further economic analyses being undertaken. We will follow these studies up.
Sports Council for Wales (SCW)		Economic Review	General		There does not appear to be any standard methodology for measuring the economic benefits of workplace interventions that promote physical activity. We suggest that this ought to be investigated.	The economic review only reports what has been published in the studies. The economic analyses currently being undertaken will attempt to pay standard methodologies to make comparison possible.
Sports Council for Wales (SCW)		Economic Review	General		It is difficult to compare study results as each study uses different outcome measures. This means that the reported interventions cannot be ranked by their cost-effectiveness.	Please see above comment.
Sports Council for Wales (SCW)		Economic Review	General		None of the reported studies took place in the UK. We need to be mindful that other countries have different health care systems to that of the UK.	Noted, thank you. PHIAC will take into consideration issues of generalisability when considering the evidence.
Sports Council for Wales (SCW)		Economic Review	General		Most of the interventions were conducted in large commercial companies; there will therefore be issues of generalisability.	Please see above comment.
Sports Council for Wales (SCW)		Economic Review	General		The difference between cost-effectiveness between sub-groups was not addressed.	The economic review only reports what has been published in the studies. Further sub-group analysis may be possible as part of the further economic analysis, but only if evidence for these sub-groups is available.
Sports Council for Wales (SCW)		Economic Review	General		NICE needs to be mindful about the ability to draw effective conclusions about projects that contain multiple interventions.	Noted, thank you. PHIAC will take this consideration into account when considering the evidence.
Sports Council for Wales (SCW)		Economic Review	General		We suggest that since there is little economic evidence for workplace interventions, there needs to be a programme of research that fills this research gap.	Noted, thank you. PHIAC will consider the lack of economic evidence when making research recommendations within the guidance.
Sports Council for Wales		Evidence Review	General		There are a number of gaps in the evidence: <ul style="list-style-type: none"> • There were no studies which compared different 	We agree there are substantial gaps in the evidence.

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(SCW)					<p>types of workplaces and whether this has an effect on how successful physical activity interventions were;</p> <ul style="list-style-type: none"> • None of the studies presented any evidence which compared the effectiveness of physical activity interventions on gender, ethnicity, temporary/casual workers; • There weren't any studies which looked at how the employers viewed an intervention; • There weren't many studies which concentrated on qualitative data to assess the effectiveness of physical activity interventions; • Motivations and barriers of both employers and employees were also not addressed. 	
Sports Council for Wales (SCW)		Evidence Review	General		<p>We were concerned about the quality of the studies detailed within the review, particularly in terms of:</p> <ul style="list-style-type: none"> • The very small sample sizes of some studies; • Little follow-up to assess 'success' and/or effectiveness; • Hard to disaggregate the effectiveness of the physical activity component within a wider 'well-being' intervention. 	We agree that the quality of published studies is very variable.
Sports Council for Wales (SCW)		Evidence Review	General		<p>We are also concerned that guidance for implementing a physical activity intervention within the workplace will be produced on insufficient evidence.</p>	<p>We note your concern, however NICE guidance is not produced solely on the basis of the evidence review. The review is part of a longer process that involves stakeholder consultation, fieldwork, consideration by expert committees etc. For full details of the NICE method for public health guidance production see http://www.nice.org.uk/phmethods</p>
Sports Council for Wales (SCW)		General			<p><u>For information:</u> SCW launched its Active Workplaces programme in April 2007. Recognising the major part an active workplace can play in enhancing business performance and employee health and wellbeing,</p>	Noted with interest. Thank you.

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					the SCW is encouraging businesses to capitalise on the £2m of Welsh Assembly Government and Lottery funding to introduce facilities and programmes in the workplace to ultimately increase people's physical activity.	
Sports Council for Wales (SCW)	SWC Example Questionnaire	General			SCW's Research and Evaluation department are undertaking a thorough evaluation of the funding. Funding has been made subject to the collection of base line data. Data is captured through an online questionnaire administered by SNAP online (attached). Types of data captured are current physical activity levels, motivations and barriers to physical activity, current sickness absence, active travel patterns, a need analysis and demographics.	Noted.
Sports Council for Wales (SCW)		General			Further to capturing base line data, we propose to do case study evaluations of a representative sample of workplaces, involving both small and large companies, public and private, a range of facilities and programmes and regional differences. Data captured at base line will then be followed up after the programme or facility has been implemented and used.	Noted.
Sports Council for Wales (SCW)		General			Additionally to the project evaluation; a process evaluation is also being carried out with those who were responsible for the delivery of the programme as well as those with first hand knowledge of applying for funding and the process of grant receipt.	Noted.
Transport for London		Synopsis of the evidence	General		Effectiveness: In 2006 Transport for London commissioned through TRL and its sub-contractor JMP Consulting an Evidence Review on Physical activity, absenteeism and productivity' which NICE has been notified of. Although there are differences in inclusion criteria including our start date of 1980, and our particular focus on absenteeism, and the NICE focus on motivating behaviour change,	Thank you.

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					there are areas of overlap	
Transport for London		Synopsis of the evidence	Active Travel	8	There are other interventions in the workplace involving active travel which NICE may not be aware of. For example, de Geus et al (2007) Determining the intensity and energy expenditure during commuter cycling, Br. J. of Sports Med. 41: 8-12.; Boyd, H., Hillman, M., Nevill, A., Pearce, A. and Tuxworth, B. (1998). Health-related effects of regular cycling on a sample of previous non-exercisers, Resume of main findings; Hendriksen, I. (1996). The Effect of Commuter Cycling on Physical Performance and on Coronary Heart Disease Risk Factors, Amsterdam: Free University	Thank you. We will follow these up.
Transport for London		Synopsis of the evidence	Evidence statement 8	16	Does not the type of workplace include the size of the workplace given the likely ability of larger organisations to be able to fund or otherwise support incentives and other motivational programmes?	We suspect that this is the case however, no evidence was found to indicate this. This could simply be because the research has not been done.
Transport for London		Synopsis of the evidence	Part II	27	We note that our Evidence Review included two papers on health care costs. One of these Wang et al (2004) Relationship of body mass index and physical activity to health care costs among employees, J. of Occ. Env. Med, 46 (5)428-436 which might have been included in your review given its data of publication was not cited in Section 6 as an excluded study.	This paper would have been excluded since it is not an intervention study.
Transport for London			General		The inclusion criteria start year of 1996 means that some important papers eg Oja, P., Vuori, I. and Paronen, O. (1998). Daily walking and cycling to work: their utility as health-enhancing physical activity, Patient Education and Counseling, 33 , S87-S94; Oja P., Manttari, A., Heinonen, A, Kukkonen-Harjula, K, Laukkanen, R., Pasanen, M. and Vuori, I. (1991). Physiological Effects of Walking and Cycling to Work, Scandinavian Journal of Medicine, Science and Sports, Vol 1, pp 151-157 are excluded. This will have affected Evidence Statement 12 (p. 18)	Noted. Thank you.

Public Health Interventions Advisory Committee

Workplace Physical Activity - Consultation on the Synopsis of Evidence – Stakeholder Comments and Response Table

24th August – 21st September 2007