

Public Health Programme Guidance

Promoting physical activity for children–Consultation on Draft Guidance– Stakeholder Response Table 18th August – 16th September 2008

Stakeholder Organisation	Evidence submitted	Section	Page Number	Comments Please insert each new comment in a new row.	Response Please respond to each comment
Alder Hey Children's NHS Foundation Trust		General		<p>The main thing that stands out is that the word "disabled" only occurs once in Recommendation 4.</p> <p>There is a problem in some establishments that children are left in equipment / wheelchairs rather than activities being adapted for them to be inclusive,</p> <p>There seems to be no guidance or even a reminder that this should be happening.</p> <p>There are staff in education or in fact the children's Physiotherapist who will give advice on how to promote inclusion.</p>	Thank you for your comment. While there is much evidence about therapeutic interventions for children with disabilities, no evidence was found which fit the scope of this programme; as a result the PDG could not make specific recommendations. However, the recommendations relate to all children and young people up to the age of 18, including those with a medical condition or disability (except where clinical assessment or monitoring is required prior to and/or during physical activity). Appropriate changes have been made to some of the recommendations (including examples) to emphasise this.
Alder Hey Children's NHS Foundation Trust		General		The words accessible and inclusive are notably missing from most of the recommendations and this could certainly limit what local authorities and other agencies feel they are required to take into account in planning and providing services and information. These words require people to think not only in culture and gender terms but also in terms of levels of ability or disability.	Thank you for your comment. In the final guidance the issue of accessibility has been added to recommendation 10 and considerations 15 & 20. Inclusivity has been added to recommendation 14. Further mention of disadvantaged groups has been made as appropriate throughout the final guidance.
Alder Hey Children's NHS Foundation Trust		General		<p>we must make the point that in addition to physical activity, education on healthy eating must be part of the Public Health initiatives.</p> <p>I would also like to see a point that in order to facilitate children going to school by walking or bike need to have appropriate clothing (i.e. weather adjusted and season adjusted, with reflectors) and safe ways to walk and cycle with appropriate traffic lights and side walk markings.</p>	<p>Thank you for your comment. Healthy eating was not part of the referral from the DH and so is beyond the remit of this piece of guidance.</p> <p>Thank you for your comment. Safety issues have been considered further by the PDG in finalising the guidance.</p>
Alder Hey Children's NHS Foundation Trust		General		<p>Should the guideline make clearer what its aims and objectives are? I.e. should there be a statement outlining the purpose of the guideline.</p> <p>The guideline clearly states who the target population are. The target</p>	Thank you for your comments.

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				<p>user's of the guideline has been clearly defined.</p> <p>The review provides the key questions covered by the guideline.</p> <p>Guideline has involved relevant stakeholders - Has the guideline involved children and their experiences of physical activity to help develop the recommendations?</p> <p>Systematic methods were used to find evidence, comprehensive search of databases to look for published/unpublished studies. Quality appraisal of studies reported. Identified research gaps. Methods for developing recommendations described. Each recommendation describes health benefits. Recommendations are clear and unambiguous. Recommendations described different options.</p> <p>Does there need to be a link between the recommendation and supporting evidence?Guideline is being peer reviewed.</p> <p>The guideline does not appear to discuss the organisational barriers to implementation or cost implications. To implement the guideline effectively I would imagine you would need to have multi-organisational co-operation such as dept of education, dept of transport etc. Have these organisations been consulted over this guideline? Would all of the organisations contribute to the cost of implementation?</p> <p>I feel that the guideline is clear, well written and appears to be methodologically rigorous.</p>	
Alder Hey Children's NHS Foundation Trust		Section 2	Page 8	it may be worth mentioning previous work in this field done by Goals and Sportslinx which is supported by Liverpool John Moores University, as the reference made by Cale and Harris does not suggest this.	Thank you for this comment. The guidance template limits the amount of information that can be included in this section.
Alder Hey Children's NHS Foundation Trust		Section 3.10	page 10	Factors that encourage or hinder physical activity, it states that parents, carers and other family members have a crucial role in encouraging children to be physically active should this mention the previous nice guidelines for physical activity in the workplace as if parents are active at work they are more likely to continue the activity at home and encourage the children.	Thank you for your comment. The factors associated with children's physical activity were investigated in two correlates reviews. No evidence was found about a link with parental activity at work and so is not included here.
Alder Hey Children's NHS		Recommendation 6	page 22	paragraph 4 states any dress policy should be practical, affordable and acceptable to participants without compromising their safety or	Thank you for your comment. The PDG have reviewed the wording of the

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Foundation Trust				restricting participation should this also say about respecting culture?	recommendations for clarity and are satisfied that the word 'acceptable' incorporates different elements of acceptability, including cultural acceptance.
Alder Hey Children's NHS Foundation Trust		Recommendation 15	Page 29-30	may need to mention about girls who may need monitoring due to low weight problems.	Thank you for your comment.
Association of Directors of Public Health				Whilst NICE is an independent organisation responsible for providing national guidance on the promotion of good health and prevention and treatment of ill health, it is widely perceived to be NHS focused. The fact that the audience for this draft guidance is largely non-NHS, NICE will need to consider how best to exert influence over key non-NHS stakeholders.	Thank you for your comment. The Implementation and Communications teams at NICE will work with key organisations to disseminate and assist with implementation of the guidance.
Association of Directors of Public Health				Whilst there are many references to the need to consult with children and young people, it is more appropriate to actively engaged and involved them. The Children's Commissioner for England should be involved to advise on how best children and young can be engaged in the development of some of this work (there exists a national network).	Thank you for your comment. The PDG have reviewed the wording of the recommendations. The final guidance now makes reference to consultation and active involvement. It is for local organisations to find the best ways to do this.
Association of Directors of Public Health				Volunteering is frequently referred to within the document, although there is no mention of the third sector or social enterprises. As a significant element of the plan is to be delivered by the third sector, then the third sector needs to be explicitly referenced.	Thank you for your comment. Consideration 25 in the final guidance has been expanded to reflect the role played by volunteers and the importance of providing them with support. The voluntary sector is identified in the 'Who should take action?' section where appropriate.
Association of Directors of Public				Schools, particularly in primary schools, are key to the successful implementation of this guidance in view of their	Thank you for your comment. The National Healthy Schools Network has

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Health				position at the centre of communities, their potential for engaging with parents and families on a daily basis, in a safe environment. Schools and the national healthy schools network, provide an ideal vehicle for influence, and this should be strengthened within the document.	been identified by our Implementation team as an important route for disseminating and implementing the guidance.
Association of Directors of Public Health				Recommendation 1 (page 15): <ul style="list-style-type: none"> social marketing to be included in the section relating to determining the best media vehicles and the most effective messages and languages for different populations. the inclusion of street sports and games is welcomed, as this provides opportunities for local community involvement, and the possibility of involving cross-generational project work. 	Thank you for your comment. The PDG have reviewed the wording of the recommendations and decided not to make this addition. Thank you for your comment.
Association of Directors of Public Health				Recommendation 2 (page 17): <ul style="list-style-type: none"> local Sports and Physical Activity Alliances (SPAAs) should be included as a key partnership network to help coordinate the delivery of multi-component interventions. 	Thank you for your comment. SPAAs are responsible to their local strategic partnership (LSP) and so are encompassed within the inclusion of the LSP in those who should take action. Physical activity networks are mentioned in the 3 rd bullet point of the action to be taken by the LSP.
Association of Directors of Public Health				Recommendation 3 (page 18): <ul style="list-style-type: none"> children and young people should be engaged and involved in the process rather than consulted. 	Thank you for your comment. The PDG have reviewed the wording of the recommendations. The final guidance now makes reference to consultation and active involvement.
Association of Directors of Public Health				Recommendation 4 (page 19) <ul style="list-style-type: none"> Directors of Children's Services, local Sports and Physical Activity Alliances (SPAAs), local healthy schools networks, local Overview and Scrutiny Committees (Health/ well-being, Children's Services, 	Thank you for your comment. The PDG considered the key organisations to be involved when finalising the guidance.

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				<p>Environment etc) and local elected members should be included in the list of individuals/organisations/groups groups that should be involved.</p> <ul style="list-style-type: none"> Local councils should actively promote the use of public parks and facilities to children and young people, to promote physical activity. (For example we should be replacing signs such as “keep off the grass” and “ no ball games permitted” to “ Please play on the grass” and “Ballgames welcomed”.) We should be promoting the young person friendly society. 	<p>Thank you for your comment. A bullet about this issue has been added to recommendation 4 in the final guidance.</p>
Association of Paediatric Chartered Physiotherapists APCP		General		<p>This comprehensive document is welcomed by the Association of Paediatric Chartered Physiotherapists (APCP) a specialist clinical interest group of the Chartered Society of Physiotherapy (CSP). It is encouraging to see a return to a common sense, fun and enjoyment approach to the promotion of physical activity for children and young people. We would like to fully endorse the recommended return to ‘old fashioned’ values relating to the risk and challenges when undertaking physical activity.</p> <p>The document does mention, on occasions, children and young people with disability but not their individual and specific needs. It is well recognised that children and young people with disability, either physical or sensory, are often less physically active than those without.</p> <p>The benefits of physical activity in this group of children and young people is not only to promote their general health and well being but also helps to prevent disease and reduce the secondary conditions that can result from an initial disability.</p>	<p>Thank you for your comment.</p> <p>Thank you for your comment.</p> <p>Thank you for your comment. The PDG reconsidered disability in relation to equity and equality when finalising the guidance. Further mention of children and young people with disabilities has been made as appropriate throughout the final guidance.</p>
Association of Paediatric Chartered Physiotherapists APCP		Recommendations 3.3 and/or 3.16	Page 9	<p>Planners should ensure that the physical activities provided are not only adapted for mainstream children and young people with differing physical and developmental needs, but also includes the necessary modification of the play or activity environment. This will allow children with additional needs to have the optimal chance for</p>	<p>Thank you for your comment. Please see previous response.</p>

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				inclusion and participation in these activities with their more able bodied peers. Local authorities should also ensure that these facilities are adapted to allow improved access to play grounds and play areas e.g. placing them near pathways suitable for wheelchairs etc.	
Association of School and College Leaders (ASCL)		General		ASCL welcomes the aims of this guidance. The association fully supports the need to give every encouragement for pre-school and school-age children to take part in physical activities so that young people establish and retain a good level of physical fitness and have a healthy lifestyle. Schools and colleges will be very willing to assist in the achievement of the aims but we would emphasise that there are resource implications that will need to be addressed. There are also already considerable pressures on curriculum time in schools and the association would have concerns about any changes that put further constraints on the curriculum flexibility of schools to determine how they meet the needs of their own school community.	Thank you for your comment. Thank you for your support.
Association of School and College Leaders (ASCL)		General: re format		Although the recommendations are sectioned the report format is rather muddled and could be clearer in that it is currently repetitive both in terms of 'who should take action' and 'what action should they take'. It would be helpful to focus on the desired outcomes and what actions may bring about those outcomes or to focus on the contributions that various groups/organisations could make. The recommendations in essence are a list of actions which when added together produce a very long list indeed. Some form of prioritisation with the identification of strategies considered to be most effective in terms of outcomes would be useful. Better linking with the Every Child Matters (ECM) agenda for schools, the work of the Sports Colleges and School Sports Coordinators' networks and the extended schools programme would help give a focus to the school based recommendations. Cross referencing with these initiatives would be helpful to schools. The school based sections need to be provided separately (although	Thank you for your comment. The PDG reviewed the organisation of the recommendations when finalising the guidance. To assist target audiences a schematic representation of the recommendations and listing of recommendations by target audiences has been added to the beginning of the document. Please see above response.

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				as part of an integrated strategy) as this would make it easier for schools to identify what is directly relevant to them.	
Association of School and College Leaders (ASCL)		Rec 1	15	There is an inherent risk that the recommendations to government departments end up as directives to, or legislation about, school provision. The government should be encouraged to build on the best practice of its existing initiatives and not to produce further guidance or even more initiatives.	Thank you for your comment. The recommendation calls for the campaign to 'be integrated with and support other health campaigns and strategies'.
Association of School and College Leaders (ASCL)		Rec 4	20	There are issues that need to be taken into account related to opening up school facilities out of school hours to young people and the general public. These include the management of these facilities and the accountability of the school. There are additional costs incurred and the resource implications must be taken into account.	Thank you for your comment. Allocation of resources is beyond the remit of NICE. However, NICE has developed a costing statement that helps organisations consider these types of issues.
Association of School and College Leaders (ASCL)		Rec 7	22	As with a number of these recommendations child protection issues will need to be addressed.	Thank you for your comment. The term 'achieved relevant sector standards' covers this.
Association of School and College Leaders (ASCL)		Rec 9	25	Again the resource implications of activities such as the proposed school-based activity days will need to be externally funded. School budgets cannot be expected to cope with these additional demands.	Please see above response about allocation of resources.
Association of School and College Leaders (ASCL)		General		There is much to recommend in this guidance but to be most effective in changing the practices of schools and the young people in their communities a more focused set of recommendations with resource implications would be helpful.	Thank you for your comment. The Implementation team at NICE will produce a costing statement which will be published at the same time as the final guidance.
Berkshire West PCT- Regional Public Health Group		General	All	The target population should include children and young people aged 19 and under to reflect other policies in this area that take childcare to 19 years.	Thank you for your comment. The target population was defined at the scoping stage for this guidance.
Berkshire West PCT- Regional Public Health Group		General	All	Inclusiveness should be made more obvious i.e. children with disabilities.	Thank you for your comment. The PDG reconsidered equity and equality when finalising the guidance and have made further mention of disadvantaged groups throughout the final guidance.

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Berkshire West PCT- Regional Public Health Group		Rec 2	17	Link to other policies such as Fair Play, Healthy Towns, Healthy Weight Healthy Lives and the National Child Measurement Programme.	Thank you for your comment. A selection of the relevant policies is given section 2 of the final guidance.
Berkshire West PCT- Regional Public Health Group		Rec 4	19	Link to other policies such as Healthy Towns, Healthy Weight Healthy Lives. Noted that it is difficult to engage with schools re access out of hours	Please see previous response.
Berkshire West PCT- Regional Public Health Group		Rec 5	21	Links to social marketing and childhood obesity should be highlighted	Please see previous response.
Berkshire West PCT- Regional Public Health Group		Rec 6	22	CRB checking system needs to be streamlined	Thank you for your comment. The process of CRB checking is beyond the remit of this guidance.
Berkshire West PCT- Regional Public Health Group		Rec 7	22	CRB checking system needs to be streamlined	Thank you for your comment. Please see previous response.
Berkshire West PCT- Regional Public Health Group		Rec 8	24	Monitoring and evaluation of schemes should be mentioned	Thank you for your comment. The PDG considered the wording when finalising the guidance. A bullet about monitoring and evaluating training programmes has been added.
Berkshire West PCT- Regional Public Health Group		Rec 9	24	Will private schools be included?	The guidance is applicable to private schools.
Berkshire West PCT- Regional Public Health Group		Rec 10	25	Activities to promote gross motor skills should begin as soon as possible to help promote other skills – even before attending school. Parents should be taught how to encourage their toddlers to be more active.	The draft recommendation included early years providers and carers for the reason you outline. Children's centre staff have been added to the final version.
Berkshire West		Rec 11	26	Cycle racks at school should be covered in the Healthy Schools plans	Than you for your comment. This issue is

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PCT- Regional Public Health Group				– however, safety of cycle at home are a different issue and should be given some consideration.	beyond the scope of the guidance.
Berkshire West PCT- Regional Public Health Group		Rec 12	27	Children's Centres should be included	The PDG reconsidered the key organisations to be involved when finalising the guidance and are satisfied that those listed are those with the responsibility for initiating the actions. This does not mean that children's centres would not be involved in the development of such plans (please see bullet 6).
Berkshire West PCT- Regional Public Health Group		Rec 16	31	Advice, support and education should also be delivered to health professionals to help them deliver successful and helpful messages to the public. www.wellbeingsoutheast.org.uk hosts case studies and advice for health professionals	Please see Recommendations 7& 8 in the final guidance which cover training for all persons involved in the planning and delivery of physical activity.
Birmingham Children's Hospital NHS Trust		General		Please could you advise me as to whether this guidance will apply to the acute hospital setting?	Yes, the guidance will be relevant in some cases. Professional judgment will be required to determine which individuals these are.
Bradford MBC- Play Team /Early Years/Childcare and Play Service		2		The DCSF document "Fair Play" (2008) should be added to the list of current govt policy documents promoting active outdoor play	This document has been added to section 2.
Bradford MBC- Play Team /Early Years/Childcare and Play Service		2	8	Home Zones are not an initiative of the Children's Play Council / Play England (although they strongly support them), rather they are an initiative of the govt. Department of Transport	Thank you for noting this. This has been corrected in the final version of the guidance.
Bradford MBC- Play Team /Early Years/Childcare and Play Service		3	9	We very strongly support para. 3.5, "the focus should be on fun, enjoyment and active participation rather than on mastering rules and complex skills"	Thank you for your support.
Bradford MBC- Play Team /Early		3	11	Para 3.15 – Here and at a number of other points in the guidance, the new publication "Design for Play" (DCSF / DCMS 2008) should be	Thank you for bringing this publication to our attention. The guidance template only

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Years/Childcare and Play Service				cited as a key reference for design of spaces to promote active play	allows the inclusion of a selection of the documents available.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		3	13	Para 3.21 - Part of the task of practitioners is to extend children's horizons rather than just responding to expressed wants. Children who have never experienced adventure play are unlikely to ask for it, but all the evidence shows that they grasp it avidly when it is offered to them.	Thank you for your comment. An extra sentence has been added to this consideration (3. 26) and to recommendation 7 to express this.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 1	15	The proposed public awareness campaign by government, about the benefits of active play, must address parents' fears about children's safety in the public realm if it is to be effective. Exaggerated parental anxiety is one of the major reasons stopping children from playing out.	Thank you for your comment. An extra bullet has been added to this recommendation 1 to express this.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 1	16	Local play partnerships, now set up in every local authority area, would be able to help in promoting the campaign.	Thank you, we will pass this information on to our Implementation team.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 2	17	Local partnerships must include traffic, highways and planning departments, whose work is crucial to children's ability to play out.	Thank you for your comment. The involvement of the chairs of local strategic partnerships should include these local authority departments.
Bradford MBC-Play Team /Early Years/Childcare and Play Service			17	While it's desirable for the effectiveness of physical activity initiatives to be evaluated, it will not be easy to isolate the effects of specific programmes, especially when these involve opportunities for free play – despite the evidence from Prof. Roger Mackett at UCL that play is one of the most effective ways to boost children's physical activity. Measurement has a significant resource cost – who will do the measuring and how will it be funded?	Thank you for your comments. Allocation of resources and staff are beyond the remit of NICE.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 4	20	An additional action should be identified for parks and open spaces officers: to address the safety concerns that discourage families and children from using parks and open spaces for physical recreation.	Thank you for your comment. Safety has been added to bullet two of this recommendation.
Bradford MBC-Play Team /Early Years/Childcare			20	"Design for Play" (DCSF 2008) should be cited again here in connection with recommended design, installation and maintenance standards for playgrounds.	Please see previous response about this publication.

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Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 7	23	Specific qualifications for programme staff should be listed including, where appropriate, professional qualifications in Playwork	Thank you for your comment. Determining the level of qualifications and training is beyond the scope of this guidance.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 10	25	Actions for school governors and head teachers should include ensuring that playground supervisory staff receive training in Playwork.	Please see Recommendations 7& 8 which cover training for all persons involved in the planning and delivery of physical activity.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		Rec 12	28	Actions for practitioners should include taking up opportunities for relevant training including, where appropriate, in Playwork.	Please see above response.
Bradford MBC-Play Team /Early Years/Childcare and Play Service		6	33	When this section is written, it should include a recommendation for funding of research into the impact of free play opportunities on children's physical activity. Quantitative evidence in this field is very scanty at present.	Thank you for your comment.
British Heart Foundation		General		<p>The British Heart Foundation (BHF) welcomes the opportunity to respond to this consultation.</p> <p>Lack of physical activity is an independent risk factor for the onset of heart disease, but it also contributes to obesity which is also a risk factor. In turn, obesity contributes to further risk factors such as high blood pressure, raised blood cholesterol and diabetes. Childhood obesity in particular is a serious public health concern, as evidence suggests that overweight and obese children are likely to become overweight and obese adults. Concerted action is needed from all relevant players and we therefore welcome the draft guidance's emphasis on the need for a joined up approach from central and local government.</p> <p>www.heartstats.org</p>	Thank you for your comment.

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British Heart Foundation		General		<p>BHF research published in our <i>Couch Kids</i> report in 2004¹ found a number of potential barriers that could stop young people from being physically active. These included a lack of confidence in their own abilities and self-consciousness about their appearance, especially if they are already overweight. As the draft guidance notes, this is often a particular problem for girls who are often less physically active than boys. This can mean they will be unwilling to take part in conventional sport and PE at schools.</p> <p>The BHF believes that unstructured, free play should be integral to every childhood experience and that public spending on encouraging participation in physical activity should be at least equal to spending on competitive sports. While the draft guidance recognises the importance of both formal and informal physical activity, there is an opportunity for NICE to go further and recommend that resources should be evenly distributed between organised sports and other activities.</p> <p>² <i>Couch Kids, The Continuing Epidemic</i>, BHF, 2004 (please note that this publication is currently under review. We will provide NICE with a copy of the revised publication as soon as it is published).</p>	<p>Thank you for your comments. Allocation of resources is beyond the remit of NICE.</p> <p>Thank you.</p>
British Heart Foundation			Page 8	<p>We welcome mention of the work of the British Heart Foundation in promoting physical activity to young people. However, the following BHF publications should also be included:</p> <ul style="list-style-type: none"> • ‘Couch kids’ which was first published in 2004 and is currently being reviewed. It provides statistics and figures about physical activity amongst children as well as policy recommendations for Government departments, schools, regional health agencies, local authorities, parents, and school governors; and 	<p>Thank you for this comment. The guidance template limits the amount of information that can be included in this section and the initiatives and resources included are only a sample of that provided by the organisations mentioned.</p>

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				<ul style="list-style-type: none"> the information booklet 'Get kids on the go' which is aimed at parents providing tips and tricks to get their children more active. 	
British Heart Foundation		Rec 3	Page 18	<p>Local policy makers and planners should take a health inequalities based approach to identifying and consulting with groups of children and young people who are less likely to be physically active. Limited evidence suggests that children from less well-off families are more likely to be obese², and the BHF can confirm that heart disease is a disease of inequality, that disproportionately impacts on people in lower socioeconomic groups.</p> <p>A focus on physical activity where children are the most economically disadvantaged is needed to break the cycle of poverty-driven ill health.</p> <p>³ <i>Obesity among children under 11</i>, joint health surveys unit, national centre for social research, department of epidemiology and public health at the Royal Free and University College Medical School, April 2005</p>	<p>Thank you for your comment.</p> <p>Thank you for your comment. Further mention of disadvantaged groups has been made as appropriate throughout the final guidance.</p>
British Heart Foundation	 Take action on a travel policy call	Rec 4	Page 19	<p>The BHF is part of a working group of national public health, walking, cycling and transport organisation which has developed a series of policy proposals on physically active travel, 'Take action on active travel'³. On page 5, the document calls for a 'five-year-old test' of urban areas. This means that urban areas should be linked and</p>	<p>Thank you for your comment. The main focus of this document is initiatives that are directly targeted at children and young people. Environmental changes were covered in an earlier piece of NICE</p>

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				crossed by traffic-free routes and streets with very low speed limits enabling families with young children to safely walk, cycle and play. We believe that recommendation 4 should mention this test and refer to the 'Take action on active travel' document. ⁴ An electronic copy of the document is included with this submission.	guidance - Physical activity and the environment. NICE public health guidance 8 (2008). Available from: www.nice.org.uk/PH8
British Heart Foundation		Rec 10 and 12	Page 25 and Page 28	We welcome inclusion of skipping within these recommendations. The BHF has previously promoted skipping as a good example of the benefits of play ⁴ , as it helps children to build strong bones, increases muscle strength and improves co-ordination and flexibility, as well as being a good aerobic workout for the heart. In addition, play helps children to grow in confidence through social interaction and contributes to general well-being. BHF also promotes physical activity in schools through Jump Rope for Heart, a national event that promotes skipping in schools while helping us to raise valuable funds. ⁵ http://www.bhfactive.org.uk/young-people/resources.html	Thank you for your comment Thank you for bringing this initiative to our attention.
British Heart Foundation National Centre for Physical Activity & Health		General		The British Heart Foundation National Centre for Physical Activity and Health (BHFNC) feels that there is a need to provide more specific detail if the recommendations are to be translated into action by practitioners.	Thank you for your comment. The PDG made the recommendations as specific as possible.
British Heart Foundation National Centre for Physical Activity & Health		General		Many of the recommendations are already being actioned and adopted. There is a need to acknowledge, in particular, national programmes that could support individuals and organisations in adopting the recommendations. Otherwise there is a danger of	Thank you for your comment. The PDG are aware that there is currently variation in the standard of practice and that some practitioners will already be undertaking

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Health				disengaging people if they feel there is no recognition of the work they are already doing.	the actions outlined in the recommendations. The NICE Implementation team are working with key stakeholders to identify sources of support for those responsible for implementing the guidance.
British Heart Foundation National Centre for Physical Activity & Health		General		The physical activity criteria for the National Healthy Schools Programme align closely to many of the recommendations outlined. Links should therefore be made with this national programme which is recognised and valued within schools.	The National Healthy Schools Programme has been identified by the Implementation team as an important route for disseminating and implementing the guidance.
British Heart Foundation National Centre for Physical Activity & Health		General		When developing any implementation tools it will be particularly important to identify existing tools and resources in order that duplication is avoided.	Thank you for your comment. The Implementation team are putting together a Guide to Resources that will contain a selection of existing tools.
British Heart Foundation National Centre for Physical Activity & Health		General		There is very little mention of inclusion and/or promoting physical activity to young people with a disability or long term medical condition. Although evidence may be currently lacking in this area, these are an important group of young people who are often disadvantaged in terms of physical activity when it has significant benefits to offer them.	The PDG reconsidered disability in relation to equity and equality when finalising the guidance. Further mention of disadvantaged groups has been made as appropriate throughout the final guidance.
British Heart Foundation National Centre for Physical Activity & Health		General		There is increasing evidence that there is also a need to focus on a reduction of sedentary behaviour. Some countries already have a recommendation regarding a reduction in sedentary behaviour alongside their physical activity guidelines and it would therefore be appropriate to consider looking at this.	Thank you for your comment. The effectiveness reviews focused on interventions to increase physical activity. If these studies reported changes in sedentary behaviours this was reported in the reviews. However, very few studies measured changes in sedentary behaviour.
British Heart Foundation National Centre for Physical Activity & Health		General		The recommendations to not extend to meet the needs of children and young people who live in particularly rural areas. Geographical location is a significant barrier to many children as there are many related issues such as transportation and availability of facilities to overcome in order for them to participate.	Thank you for your comment. Little evidence was found relating to rural areas; as a result the PDG could not make specific recommendations.

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British Heart Foundation National Centre for Physical Activity & Health		2	4	60 minute a day message is for 5 years upwards. At present England does not have a national physical activity recommendation for under 5's although some other countries do.	The glossary in Appendix 1 of the Chief Medical Officer's recommendations defines children as 2-11 year olds therefore we assume this is the age range they include in their recommendation for children.
British Heart Foundation National Centre for Physical Activity & Health		2	4	The Health Survey for England questionnaire is used to generate estimates of habitual MVPA. Survey data underlies much of our public health policy and practice but it has not been validated for measurement of MVPA. There is a need for validated measurement tools to accurately assess and monitor children and young people's physical activity.	Thank you for raising this issue. It has been included as one of the recommendations for research in section 5 of the final guidance.
British Heart Foundation National Centre for Physical Activity & Health		2	5	PESSCL is no longer operating. It is now the PE and Sport Strategy for Young People (PESSYP).	The reference to PESSCL on page 5 of the draft guidance was a historic one in relation to the content of the CMO's 2004 report. It has been removed in the final guidance.
British Heart Foundation National Centre for Physical Activity & Health		2	5	Appears to be missing text at the bottom of the page	Please accept our apologies for the technical problems with the pdf. version of the draft guidance.
British Heart Foundation National Centre for Physical Activity & Health		2	8	BHFNC welcome mention of the work of the British Heart Foundation in promoting physical activity to young people. The Child's Play booklet was developed in partnership with Birmingham East and North PCT and they should therefore be acknowledged here. Also, the BHF Active Club Resource Pack and training for out of school clubs is particularly relevant to this document and it may be worth including (we would be happy to provide further information on this should you require it).	The guidance template limits the amount of information that can be included in this section and the initiatives and resources included are only a sample of those provided by the organisations mentioned. We have included the Active Club resource pack but removed Child's Play from this section.
British Heart Foundation National Centre for Physical Activity & Health		3.2	9	See previous comment re 60minutes a day recommendation	Noted.

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Health					
British Heart Foundation National Centre for Physical Activity & Health		3.13	11	Perception is an important issue. This is not only true of the weather but also of issues such as safety and accessibility of physical activity facilities. For example, some interventions to increase active travel through improving the environment and making it safer have not seen the anticipated increases in activity because they have failed to change people's perceptions. Likewise, just having physical activity facilities and opportunities available does not necessarily mean they will be used. Some of the most deprived areas of Glasgow have many physical activity facilities nearby but residents do not perceive them as accessible for them and do not therefore use them.	Thank you for your comment. In the final guidance this consideration (3.15) has been extended to include other perceptions.
British Heart Foundation National Centre for Physical Activity & Health		4	15	The key for government departments if they are to develop a campaign is that they work together, co-ordinate action and promote consistent messages. Although the government departments have differing priorities and agendas, there is considerable overlap in the area of physical activity and a good opportunity for collaboration. Practitioners, parents, children and young people are not interested in these different agendas, they need to be presented with a cohesive, joined-up campaign and a seamless transition between different types of activity.	Thank you for your comment. Bullet point 2 of recommendation 1 calls for a consistent sustained campaign that is integrated with and supports other health campaigns and strategies.
British Heart Foundation National Centre for Physical Activity & Health		4	15	Any campaign to promote physical activity would need to align closely to the obesity social marketing campaign.	Please see above response.
British Heart Foundation National Centre for Physical Activity & Health		4	15	Although there is, as yet, limited evidence underpinning the 60 minute recommendation, BHFNC feel it is important that practitioners, parents and young people are aware of this recommendation. Our experience suggests that many are not familiar with the message and there is much confusion regarding how much physical activity children and young people should be doing and whether it needs to all be done all at once or can be accumulated.	Thank you for your comment.
British Heart Foundation National Centre for		4	17	BHFNC totally agree that it is important to ensure there are safe, local indoor and outdoor opportunities for physical activity, however, there is also a need to address people's perceptions regarding the	In the final guidance this point has been amended to read "there are local indoor and outdoor opportunities for physical

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Physical Activity & Health				safety of such opportunities. Just making them safe may not be enough to encourage participation if perceptions remain negative.	activity where children and young people feel safe”.
British Heart Foundation National Centre for Physical Activity & Health		4	17	BHFNC agree that it is essential to identify local factors that help young people to be (or which prevent them from being) active and act on this. We feel it is important to stress here the need to engage young people in this process. Where possible, such engagement should include involvement in the development/action phase.	Thank you for your comment. The PDG have reviewed the wording of the recommendations. The final guidance now makes reference to consultation and active involvement.
British Heart Foundation National Centre for Physical Activity & Health		4	17	BHFNC welcome the fact that the need for evaluation is highlighted. There is still a dearth of well-evaluated physical activity initiatives and programmes targeted at children and young people and there is an urgent need to ensure that more programmes etc are well-evaluated in order that others can learn from these. There is currently no mention of more qualitative measures such as self esteem. If only objective measures are evaluated there is a danger that some valuable beneficial impacts will be missed. Advice needs to be given on simple evaluation tools that can be used.	Thank you for your comment. We agree that there is a lack of programme evaluation. Measures such as self esteem would be considered as a health outcome.
British Heart Foundation National Centre for Physical Activity & Health		4	18	BHFNC agree that there needs to be a particular focus on groups of children and young people who are currently not meeting the recommendation. It would be helpful here to suggest how these groups might be identified and the types of evidence/local data that could be used.	Thank you for your comment. The final version has been amended to include other groups who would have local knowledge that would assist with this.
British Heart Foundation National Centre for Physical Activity & Health		4	19	Increasing opportunities is one part of the solution, but refer to previous point re the need to change perceptions.	Please see previous responses about changing perceptions.
British Heart Foundation National Centre for Physical Activity & Health		4	19	A lot of mention re provision of ‘safe’ spaces etc, perception point is relevant here.	Thank you for your comment. In the final guidance bullet 2 has been changed to The strategy should ensure: there are local indoor and outdoor opportunities for physical activity where children and young people feel safe”.
British Heart Foundation		4	21	Cycle training is important and beneficial. It may also be worth mentioning road safety training for children here and also the need to	Thank you for your comment. Cycle training was included in the draft version

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National Centre for Physical Activity & Health				help young people to be 'streetwise.	of recommendation 5, 4th bullet. It has been added to recommendation 12 of the final guidance.
British Heart Foundation National Centre for Physical Activity & Health		4	21	When considering local transport and school travel plans it is important to take into consideration how timings of buses after school can have an impact on young people who travel by bus in terms of being able to access after school activity opportunities.	Thank you for your comment. This issue is covered by the first three bullets of recommendation 5.
British Heart Foundation National Centre for Physical Activity & Health		4	22	All the actions under recommendation 6 focus very much on structured physical activity opportunities. It is important to recognise and encourage both opportunities for free play and also opportunities to facilitate and encourage physical activity in non-specific physical activity settings.	Thank you for your comment. We believe the word 'opportunities' covers the informal and unstructured.
British Heart Foundation National Centre for Physical Activity & Health		4	22-23	BHFNC agree that it is important that those leading young people in physical activity should have the appropriate skills and qualifications to do so. However, there is a need to consider the breadth of practitioners who are in a position to promote physical activity to children and young people and to determine what levels of training/qualification are appropriate/necessary across this range. Practitioners such as youth leaders, playworkers, guide/scout leaders are well placed to promote physical activity and provide opportunities for their young people to be active although they will not necessarily be leading a specific physical activity programme. The BHF Active Club programme is very much targeted at these groups of people and our experience has shown that they need training and support at a different level to that often provided in the physical activity arena.	Thank you for your comment. Determining the level of qualifications and training is beyond the scope of this guidance.
British Heart Foundation National Centre for Physical Activity & Health		4	23	The BHFNC welcome the fact that the way in which physical activity is delivered is highlighted. We regard this as a very important area and one that is often overlooked. There tends to be an emphasis on the content and availability of physical activity opportunities for children and young people. Whilst these are important, good content in an accessible location will not be successful if it is delivered in a boring, uninspiring way. We feel there is a need for more training on this aspect.	Thank you for your comment.
British Heart		4	23	Further to the previous point. Interpersonal skills and the ability to	Thank you for your comment.

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Foundation National Centre for Physical Activity & Health				deliver sessions that are inspiring are essential, however, how will local organisations assess whether practitioners have these skills? Local organisations will need advice on this.	
British Heart Foundation National Centre for Physical Activity & Health		4	23	CPD is essential. The focus here is on CPD for those involved in organising and running physical activity programmes. In addition, consideration needs to be given to the training needs of other practitioners such as playworkers and youth leaders who have are in a position to provide less formal opportunities for children and young people to be active. The latter can be particularly important in encouraging physical activity in those children and young people currently not participating who may not access specific physical activity opportunities/programmes.	Thank you for your comment. The target population for this recommendation is all workers. The wording in the final guidance has been changed to “people who provide and deliver physical activity programmes (formal and informal) and other opportunities for children and young people.....”
British Heart Foundation National Centre for Physical Activity & Health		4	24	Last bullet point under recommendation 8. Yes people need to be trained to deliver CPD programmes, but it would be helpful if you were more specific here as to who should be trained.	Thank you for your comment. The recommendation is aimed at ensuring a skilled and sustainable workforce. Those wishing to progress to delivering CPD are usually self selecting.
British Heart Foundation National Centre for Physical Activity & Health		4	25	The BHFNC agree with the action point under recommendation 10 that children need to be encouraged to develop motor skills. You highlight the need for ‘qualified individuals’ to introduce more complex skills based on the primary school national curriculum for PE but do not clarify who this could be. Both staff in early years settings and many primary school teachers are not confident in delivering physical activity having received minimal training on this in their initial teacher training. There is a need to push for better initial teacher training on PE for primary school teachers and ongoing CPD and support. Some schools do bring in people from outside to deliver aspects of their PE curriculum but this isn’t without its problems (the Association for PE has produced a position statement on use of non teachers in delivering aspects of PE and school sport, please see p23 of July 08 edition of future fitness magazine). The School Sport Partnerships have helped with supporting and improving PE and physical activity provision in primary schools but this whole area needs to be explored more fully.	Thank you for your comment. The PDG are aware of these issues and consider that recommendations 7 and 8 will address them.

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British Heart Foundation National Centre for Physical Activity & Health		4	25	There appears to be text missing at the bottom of the page.	Please accept our apologies for the technical problems with the pdf. version of the draft guidance.
British Heart Foundation National Centre for Physical Activity & Health		4	26	Need clarification what constitutes 'appropriately trained and qualified'. It is likely this will need to vary according to the type of activity and context. (as per previous comments).	Determining the level of qualifications and training is beyond the scope of this guidance.
British Heart Foundation National Centre for Physical Activity & Health		4	26	Need to reiterate here schools providing or signposting cycle training and road safety training (for primary school). Would also be useful to encourage schools to look for ways to engage children and young people who have to be driven to school by car e.g. 'park and ride'.	Road safety schemes and cycle training have been added to this recommendation (rec 12) in the final guidance.
British Heart Foundation National Centre for Physical Activity & Health		4	29	'Teacher-led' extra-curricula physical activities are important, but research has indicated that some young people actually prefer after school activities that are led by non-teachers. Young people are looking for something different from after school activities, they do not want them to be organised in the same way as curricular PE. Leaders other than teachers can be particularly important for those young people who do not engage fully with curriculum PE.	Thank you for your comment. The wording has been amended in the final guidance so that deliverers are not specified.
British Heart Foundation National Centre for Physical Activity & Health		4	29	Please note previous comment re need to provide more training and development on how best to deliver physical activity to children and young people to make it enjoyable. There is a particular need to consider the best approach for those young people who do not like PE and physical activity and are not participating. Those who are passionate about physical activity can sometimes find it hard to relate to young people who do not like physical activity.	Thank you for your comment.
British Heart Foundation National Centre for Physical Activity & Health		4	30	As per comment earlier on, the BHFNC do agree that it is important that parents (and practitioners) are aware of the 60 minutes a day message. As part of this, it is important to illustrate what this means in practice – what could 60 minutes of physical activity a day look like	Thank you for your comment. The PDG agree that this is the type of support that practitioners could give families as in bullet 2.

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Health				for their child. Need to help parents see opportunities when activity can be slotted into the day and to recognise that physical activity can be accumulated.	
British Heart Foundation National Centre for Physical Activity & Health		4	30	Identifying the benefits of physical activity is important. The benefits that will be relevant and meaningful for parents may differ to those that children and young people see as important so it will be valuable to highlight both.	Thank you for your comment. This would link back to finding the best messages for different groups as advised in recommendation 1, bullet 2. Please refer to the diagram illustrating how the recommendations link together on page 7 of the final guidance.
British Society for Children's Orthopaedic Surgery		General		The British Society for Children's Orthopaedic Surgery supports the 16 recommendations. Hopefully increased physical activity will reduce obesity and increase fitness with a reduction in skeletal deformities such as slipped upper femoral epiphysis and knock knee/ bow leg deformities.	Thank you for your comment.
Business in Sport and Leisure		General		BISL would like to note our welcome and support for this excellent draft guidance. We are delighted that the recommendations so comprehensively cover the issues of promoting and providing physical activity for children, in particular highlighting the need for any promotional campaign to be a long-term commitment. We will work with our members and partners in the Get Active Alliance to promote them, when the guidance is finalised.	Thank you for your comment and for supporting promotion of the guidance.
Business in Sport and Leisure		2	5	PSA 22 needs to be quoted in full to highlight the policy extension to a five hour offer. It is important to note that the education sector alone cannot deliver this aspiration and recognises as such. The role of partner organisations in the public, private and voluntary sectors is essential.	Please accept our apologies for the technical problems with the pdf. version of the draft guidance.
Business in Sport and Leisure		2	7-8	We acknowledge the constraints on space but would like to note in reference to the list of "non-government initiatives" the work that has been undertaken by BISL members through the MEND programme and the Fitness Industry Association's Adopt a School and go programmes. These address not only physical activity, promoting it as a lifelong pursuit, but also broader healthy lifestyle issues. BISL also feels that the CCPR's work on physical literacy is relevant.	Thank you for bringing this work to our attention. The guidance template limits the amount of information in this section. However, 'go' and 'Adopt a school' have been added to the final document.
Business in Sport		3 (3.4)	9	BISL full endorses the emphasis that the Guidance places on the	Thank you for your comments.

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and Leisure				<p>importance of physical activity as a “fun” activity, first mentioned at section 3.4 and reiterated throughout. So many public health messages are negative ones (e.g. “don’t smoke”, “don’t drink too much”) that a real distinction can be made in the promotion of physical activity as something positive and enjoyable. We firmly believe that fun activities will be far more popular than just physical activities.</p> <p>It is worth noting that the early stages of National Governing Bodies’ Long Term Athlete Development Plans (i.e. those targeted at children) were described as the “FUNdamentals”. The importance of fun in engaging young people in sport and physical activity is not only relevant for health outcomes but also for performance potential.</p>	
Business in Sport and Leisure		(3.7)	10	BISL welcomes the acknowledgement of the important role of facilities in terms of providing opportunities for physical activity for children. We believe that the paucity of quality, accessible facilities should feature as a factor that hinders physical activity in the section that begins on page 10.	Thank you for your comment. Facilities are included in the environmental factors mentioned in this section.
Business in Sport and Leisure		(3.19)	12	The issue of children being moved from one type of activity to another by interventions rather than growing the overall number of participants is an important one in terms of absolute participation data and needs to be picked up in the evaluation of interventions. However, choice and variety in access to sport and physical activities can improve sustainability in participation in the long-term.	Thank you for raising this issue. It has been included as one of the recommendations for research in section 5 of the final guidance.
Business in Sport and Leisure		4	14	The classification of different types of physical activity could be misleading, for example the description of swimming as “an interest that is physically demanding”.	The wording of this has been changed as suggested.
Business in Sport and Leisure			15	As noted above, the recommendations are excellent.	Thank you for your comment.
CCPR		2.	7	The reference to the Department for Education and Skills in the paragraph headed ‘Active Travel’ is now obsolete. If the target still exists it is likely to be co-owned by the Department for Children, Schools and Families	Thank you for identifying this, this section has been updated.
CCPR		4.	15	The following organisations should also take action: Natural England, Arts Council England, OFSTED, Qualifications and Curriculum	Thank you for these comments the PDG reconsidered who should take action and

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				Authority	are satisfied that the responsibility for the campaign should lie within government departments.
CCPR		4.	23	Recommendation 8. Asking local organisations to establish a programme of CPD for those delivering activities, and to train the trainers to deliver this will lead to inconsistent quality. SkillsActive (the Sector Skills Council for Active Learning and Leisure) is responsible for setting standards for those working in this field. Local organisations should ensure that their staff or volunteers have access to nationally accredited CPD opportunities delivered by people accredited to do so.	The PDG are satisfied that the recommendation does not dictate that the programme should be developed and run by the employers.
CCPR		5.	32	<p>Whilst this guidance is very thorough and encompasses all relevant groups, the section on implementation demonstrates clearly that NICE lacks the power to enforce its guidance. This is made clear by the first words which read: 'NICE guidance can help' a variety of organisations to meet particular goals. This is not enough to ensure that the guidance is acted upon.</p> <p>For instance those organisations asked to take action in recommendations 7,8, 12,13, 14, 15, 16 are simply too far removed from contact with NICE to have any awareness of the guidance. Whilst the national and statutory local bodies required to take action may well be made aware of the guidance, NICE has no regulatory influence over these and so they will not feel compelled to act upon the guidance.</p> <p>As NICE is now involved in public health guidance it must be empowered to ensure that those statutory organisations to which it gives guidance take such guidance into account. Failure to provide NICE with this regulatory 'bite' will result in the guidance being ignored by its target audience.</p>	<p>Thank you for your comments. The current status of NICE Public Health Guidance is that its implementation is not mandatory.</p> <p>The NICE Implementation team are working with key stakeholders to identify sources of support for those responsible for implementing the guidance.</p> <p>Thank you for your comment.</p>
CCPR		5.	32	The broad scope of this guidance could in itself be a weakness i.e. there are so many recommendations that the target audiences simply will not know where to start, and therefore take no action. The	Thank you for your comment. To assist target audiences, a schematic representation of the recommendations

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				<p>guidance also duplicates existing strategies delivered by organisations which already have resonance with the target audiences. For instance educational settings will be familiar with the Healthy Schools Programme. This could lead to confusion among target audiences.</p> <p>An alternative approach would simply be a recommendation that 'all public authorities put in place measures to ensure that children to whom they have a statutory duty achieve the Department of Health recommended levels of physical activity. Wherever possible this should be achieved through utilising existing programmes'. These programmes could then be referenced within the supporting documentation. This approach would ensure:</p> <ul style="list-style-type: none"> • A clear message linked to an accepted evidence based target • Good integration with existing delivery systems 	and listing of recommendations by target audiences has been added to the beginning of the document.
Child Accident Prevention Trust (CAPT)		General		CAPT welcomes the draft guidance. The Trust understands that experimenting and risk-taking – including physical activity and active play - are part of growing up and the development of healthy lifestyles. CAPT works to secure lower injury rates without compromising children's health or quality of life.	Thank you for your comment.
Child Accident Prevention Trust (CAPT)		2	5-8	It is appreciated that this is not an exhaustive list of policies which are relevant to physical activity, but you may wish to include the Learning outside the classroom manifesto as an example of integrating physical activity with a wide variety of out of school and outdoor activity. The manifesto says that, " <i>Learning outside the classroom provides a powerful route to the 'Every Child Matters' outcomes, in particular enjoying and achieving, staying safe and being healthy...The potential for learning is maximised if we use the powerful combination of physical, visual and naturalistic ways of learning.</i> "	Thank you for bringing this publication to our attention. As you state this is not an exhaustive list. The guidance template only allows the inclusion of a selection of the documents available so the list is restricted to the most pertinent.
Child Accident Prevention Trust		3.8	10	Developmentally appropriate levels of physical activity, play etc can also provide safe opportunities to learn about risk and managing risk.	Thank you for your comment. Bullet 2 in recommendation 10 has been amended

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(CAPT)				While it is appreciated that defining acceptable levels of risk are beyond the PDG remit, it does seem that in promoting physical activity, there are also excellent opportunities to develop risk awareness and understanding as a necessary and transferable lifeskill. (See also below)	to include the opportunity to develop risk awareness skills.
Child Accident Prevention Trust (CAPT)		3.14	11	We suggest that there is a need to ensure more and better informed risk and safety education, in parallel with promoting physical activity. This would help to counter negative media portrayal, and parental misconceptions. As a whole school and family learning opportunity, risk education could be included within the Extended Schools offering, as well as through the Healthy Schools curriculum.	Thank you for your comment. An addition has been made to recommendation 1 (4 th bullet) about addressing parental concerns about health and safety issues. Considerations 17 and 18 also address risk.
Child Accident Prevention Trust (CAPT)		Rec 4 and 11	19/20 and 26	Improved local partnership working and a more 'joined up' approach by different local authority and community-based organisations, are likely to be key to success in this area. This can be promoted in parallel with local initiatives such as road safety campaigns, interactive safety centres or 'crucial crew' events, and the wide range of activities planned each year around Child Safety Week.	Thank you, we will pass this information on to our Implementation team.
College of Occupational Therapist Specialist Section – Children, Young People and Families		General		There is a lack of inclusion within the document, taking into account the needs of children and young people with special needs. Needs may include physical disability, but much more likely conditions such as developmental co-ordination disorder (DCD) and dyspraxia. Young children, especially boys can struggle with co-ordination and often drop out of the 'usual' ball sports because of this. Staff facilitating activities/sports, should have an understanding and awareness of such difficulties and be able to identify children who will find these activities difficult. Children who do find ball games difficult to take part in should then be encouraged and offered other options/activities.	Thank you for your comment. The PDG reconsidered equity and equality when finalising the guidance. While there is much evidence about therapeutic interventions for children with disabilities, no evidence was found which fit the scope of this programme, as a result the PDG could not make specific recommendations.
College of Occupational Therapist Specialist Section – Children, Young People and Families		2	4	'According to their age, developmental stage and gender' should surely include and level of physical ability. Disability is referred to in the document at a later stage but this should be highlighted earlier at this introductory stage.	Thank you for your comment. Developmental stage was used with the intention of covering physical ability and to acknowledge that a child's developmental stage may not accord with that expected for their chronological age.

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Families					
College of Occupational Therapist Specialist Section – Children, Young People and Families		3.16.	11	Should children with disabilities not also be considered a hard to reach group requiring special consideration? Children with disabilities & special needs have more difficulty in accessing facilities and indeed accessing public transport. Access to community/local facilities must be addressed. Staff also providing sport/exercise/activities are often inexperienced or nervous at including children with disabilities.	Thank you for your comment. Children with disabilities have been added to this group (now consideration 19) and a new consideration added (20).
College of Occupational Therapist Specialist Section – Children, Young People and Families		Rec 5	20	Local transport bodies. This should link in with 3.16 i.e. make public transport services accessible so that wheelchair users can access a wider range of facilities locally.	Thank you for your comment. In the final guidance the issue of accessibility has been added to recommendation 10 and considerations 15 & 20.
College of Occupational Therapist Specialist Section – Children, Young People and Families		Rec 10	25	Early years providers encouraging motor development. I would be concerned that nursery and playgroup staff do not have the knowledge of child motor development and that this should be addressed.	Thank you for your comment. We note your concerns. Recommendations 7 and 8 cover training.
College of Occupational Therapist Specialist Section – Children, Young People and Families		Rec 11	26	Needs to include/address safety of walking/cycling to school. As indicated in the document, local authorities must ensure adequate/safe crossing areas on school routes and cycle lanes. Many young people still do not wear cycle helmets, this too should be addressed.	Thank you for your comment. The main focus of this document is initiatives that aim to increase children and young people's physical activity and which are directly targeted at children and young people and their families. Environmental changes were covered in an earlier piece of NICE guidance - Physical activity and the environment. NICE public health guidance 8 (2008). Available from: www.nice.org.uk/PH8 . Safety issues such

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					as cycle helmets are beyond the scope of this guidance.
College of Occupational Therapist Specialist Section – Children, Young People and Families		Rec 11	28	Again, concerns re. nursery staff addressing and offering guidance on development of child motor skills.	Plases see previous response.
Cornwall and Isle of Scilly PCT		1	8	Refers to a “ <i>plethora of policies, initiatives and resources</i> ” already promulgated, yet children’s PA levels continue to decline. This prompts the question- what difference then can further ‘guidance’ have? The apparent ineffectiveness of these, existing policies and initiatives suggests that they are either; <ol style="list-style-type: none"> 1. too new to take visible effect 2. of the wrong design 3. too small-scale given the huge influence of obesogenic influences 4. or a combination of the above. 	Thank you for your comment.
Cornwall and Isle of Scilly PCT		3.14	11	This section addresses the heart of the problem. Just as the NHS prioritises immediate, serious threats to health with it’s A&E, intensive care and emergency services, so our safety culture concentrates on readily apparent cause-and-effect, closely linked in time. However, there are examples elsewhere, of the law being successfully used to influence firms which put their employees’ health at risk through long-term exposure to pathogens (eg asbestos). Given that we know the harm done to children in denying them exercise opportunities, it would be interesting were some enterprising lawyers instigate a class action on behalf of obese or overweight children whose education authority fails to provide them with sufficient time for daily PA.	Thank you for your comment.
Cornwall and Isle of Scilly PCT		3.16 to 3.21	12-13	“ <i>This lack of continuity in their home life reduces their opportunities to access leisure facilities or participate in team sports on a regular basis.</i> ”	Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment

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				As long as we expect formal leisure facilities and team sports to fill the PA 'gap', we will fail significantly to raise participation, and we will further widen inequalities. It is the <u>design of the physical environment</u> so as to make everyday walking and cycling safe easy and rewarding, which will have the widest benefit.	http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983
Cornwall and Isle of Scilly PCT		Rec 1	15	<p>It is disappointing to see a “<i>national campaign</i>” as the very first recommendation. These have a poor track record of achieving sustained, systemic change. The obesity epidemic is running rife despite a plethora of exhortation from every quarter.</p> <p>Besides, the best marketers have already been recruited by the ‘enemy’- for example- <i>To support the SENSES™ launch, KIT KAT® has invested £9 million into a fully integrated marketing campaign, fronted by Girls Aloud – chosen to epitomise the modern busy lives many women lead and thereby the need for the simple pleasure afforded by an occasional indulgent break.¹</i></p> <p>-and that’s just one brand of obesogenic snack. These mass-marketed sugary foods are to today’s children what Wills Whiffs were to their grandparents, and just as deadly in their long-term effects. NICE should come off the fence and say it is outrageous for such claims to be made. They should recommend that the same controls as now apply to tobacco should be extended to energy-dense, nutrient poor foods. http://www.superbrands.uk.com/programmes/issues/12/SB10_Kitkat.pdf accessed 27 Aug 2008 http://tinyurl.com/5br3bl (accessed 27 Aug 2008)</p>	Thank you for your comment. The 7 th evidence review included the evaluations of the VERB campaign. The PDG considered that the evidence was sufficient to make this recommendation.
Cornwall and Isle of Scilly PCT		Rec 2	17-18	This is much more likely than Rec 1 to have a long-term, cumulative effect on PA rates, and should come above, or replace Rec 1. It should go further and require that every LAA includes explicit measures and targets to make the local environment and all public	Thank you for your comment.

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				places conducive to regular every PA. The guidance should also include advice on how to do so without falling foul of disability discrimination legislation.	
Cornwall and Isle of Scilly PCT		Rec 3	19	This advises targeting children likely to be doing less than 1 hour PA per day. However, in your own introduction (p4) you say this is 97.5% of all 11 year-olds (and 99.6% of all girls of that age). The notion of 'targeting' over 90% of a population is patently absurd, as well as being uneconomic. This is also a perverse recommendation in that it encourages a piecemeal approach to a near-ubiquitous problem.	While this may appear to be an anomaly, the Health Survey for England as reported in the final version of the guidance, presents a more optimistic picture but identifies groups who may be low active and so can be targeted. The different populations (11 year olds versus 2-25 years and local versus national sampling), methods of measurement (objective versus self report) and lack of contemporaneousness of the data may explain some of the difference in the findings from the two publications.
Cornwall and Isle of Scilly PCT		Rec 4	20	<i>"outdoor playgrounds should have areas of shade from the sun and sheltered areas where children can play to reduce the impact of adverse weather"</i> . This indicates that the PDG has considered that its advice will affect policy in an era of adaptation to climate change. It should consider further, and explore the approaching 'energy-crunch'. Both phenomena are unstoppable, massive in their implications, and both offer immense opportunities for raising PA levels. We will be re-designing entire areas of public and private realm to minimise carbon, with implications for transport, consumption, (all commodities) diet and exercise. Locally sourced foods will become much more important, and children can be involved in foraging, growing and preparing them. Activities like scrumping for apples could be reintroduced, but on an organised scale, because they so neatly link physical activity with the 'five-a-day' message around Britain's iconic fruit crop.	Thank you for your comments. The PDG recognise the importance of green issues. Active travel, using sustainable modes of travel, is the focus of recommendations 5 and 12 and is included in recommendation 15.
Cornwall and Isle		Rec 5	20-21	This is an essential recommendation, which could be strengthened. It	Thank you for your comment. Please see

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Stakeholder Organisation of Scilly PCT		(comment also applies to Rec 16, page 30)		implies, but should state boldly, that too often, transport policies have favoured motorised personal over all other forms of travel. This has persisted over decades, so that the words 'transport' and 'car' as synonymous with progress. The car is an obesogenic machine, whose very pervasiveness reinforces poor health habits in all, not just car owners. See for example Ewing et al (2006) ⁱⁱ Your guidance should state that, and require that local transport plans explicit curb car usage through design, and ensuring that the full external costs are recovered from users.	the earlier response about the environment.
Cornwall and Isle of Scilly PCT		Rec 6	22	The emphasis on non-competitive sport and play is very important if we are to narrow the health inequality gap. However, post- Olympics, there is a resurgence in high-level support for the opposite. ("Gordon Brown says Bring Back Competitive Sport"). In fact, the preponderance of the public-school educated among our medal-winners demonstrates the tendency of competitive sport to widen, not reduce health inequalities. To focus on a tiny minority of highly visible success, or on sporting systems which create failure for nearly all, is not the way to encourage wider participation. <u>Say it, loud and clear.</u>	Thank you for your comment. The PDG consider that the guidance addresses physical activity in its widest sense.
Cycling England		General		Overall the draft guidance is comprehensive, well-written and sufficiently detailed to be useful.	Thank you for your comment.
Cycling England		General		While there is an acceptable emphasis on cycling, we feel that the potential importance of cycle training has been downplayed in the document. The most significant barrier to children cycling (including to school) is parental fear. This can be tackled by two main routes. The first (and arguably most important) is through making the roads safer and building suitable cycle infrastructure. This was tackled in previous NICE guidance on physical activity and the environment. The second is through making sure that parents are confident in their child's ability to cycle safely, and this can be addressed through cycle training. <i>Bikeability</i> training is being rolled out across the country and will offer significant opportunities to increase the amount of children who can cycle safely and with confidence. We urge NICE to give this issue greater prominence, especially in recommendations 3 and 13.	Thank you for your comment. Cycle training has been added to recommendation 12 of the final guidance.
Department for		2	7	Re Active Travel – Refer to the DCSF/DfT Travelling to School	Thank you for your comment. This

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Children Schools & Families & Department for Transport				Initiative when noting the School Travel Plan target.	initiative has been included in section 2 of the final version of the guidance.
Department for Children Schools & Families & Department for Transport		2	7	For information - although the return of walking/cycling levels to mid 80's levels was an aim at the turn of the decade, this is not a current stated aim or target of the Travelling to School Initiative. (Reducing levels of car use – excluding car share based on 2007 baselines are more commonly used and stated in relation to the school run in LTPs and LAAs).	Thank you for your comment. This new aim has been included in section 2 of the final version of the guidance.
Department for Children Schools & Families & Department for Transport		2	7	STP should read School Travel Plan. A brief note here as to an explanation of what a travel plan is would be useful (see it is noted in the annexe).	Thank you for your comment. This section has been altered in the final guidance. The guidance template limits the amount of information that can be included in this section.
Department for Children Schools & Families & Department for Transport		2	7	In terms of national policies, the Education and Inspections Act 2006 which has now placed a statutory duty on Local Authorities to promote sustainable (and therefore active) modes of travel to school. Also there is the inclusion of mode of travel to school as a national LAA indicator (NI 198), and a mandatory indicator in second Local Transport Plans. Work on school travel plans is essential for a school wishing to be awarded Healthy School status and supports Eco school and Sustainable School schemes. National Cycling Policy is seeing the roll out of Bikeability and cycle training for children to national standards. Significant investment is being made not just to improve skill levels but also see more children undertake everyday cycling activity such as the journey to school. Government funded Sustainable Travel Demonstration Towns and Cycle Demonstration Towns are seeing additional resources and developments for children in active travel. DfT awarded walking initiative grants in 2007 Active travel to school is also part of the UK Sustainable Development strategy and the Sustainable Schools framework.	Thank you for this information. This section has been altered in the final guidance and now refers to sustainable travel.

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Department for Children Schools & Families & Department for Transport		2	7	In addition to DCSF/DfT funding for a national network of school travel advisers and DCSF funding to provide capital grants to schools and work for LAs to meet the requirements of the Education and Inspections Act, local authorities fund Safer Routes to School and Local Safety Schemes outside schools through their Local Transport plans which help make conditions more favourable for active travel to school.	Thank you for this information which we will pass on to our Implementation team.
Department for Children Schools & Families & Department for Transport		2	7	The introduction on Active Travel doesn't reflect the excellent and substantial body of work that is being undertaken by local authorities and their schools to encourage more children walking and cycling through a school travel plan and/or through specific initiatives. Active travel initiatives include walking buses, walking/cycling incentive schemes (such as The Golden Boot, Travel Tribe, Wheelers N Walkers, Walk on Wednesday etc), park and stride schemes and 5 minute walking zones, Bike and Walk to School days/weeks/months, on site walking activities eg Walk around the World, cycle training and Bikeability. Reference could be made to progress made eg proportion of schools with school travel plans, fact that many schools now have improved facilities thanks to DCSF STP capital grants, provide examples of the kinds of hard and soft initiatives now commonplace.	Thank you for this information. The guidance template limits the amount of information that can be included in this section.
Department for Children Schools & Families & Department for Transport		2	7	Regarding comments about 'distance travelled to school increasing', the Education & Inspections Act 2006 provides some children with extended rights to free travel arrangements which aims to provide positive outcomes in terms of social inclusion and educational opportunity. In terms of distance travelled the 2006 National Travel Survey revealed that the average primary pupil travelled 1.5 miles to get to school having increased from 1.3 miles in 1995/97. For secondary pupils the average was 3.4 miles compared with 2.9 miles in 1995/07. Active travel options also need investigating for trips generated by Extended Schools and 14 to 19 study developments.	Thank you for your comment. Information about distance travelled to school has been removed in the final guidance due to limitations imposed by the guidance template.
Department for Children Schools & Families & Department for Transport		2	7	We would be happy to provide you with more current and positive information about the project.	Thank you for your comment. Please see above response.

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Families & Department for Transport					
Department for Children Schools & Families & Department for Transport		2	7/8	<p>Re Non-government initiatives other significant relevant organisations need mentioning include:</p> <ul style="list-style-type: none"> • Sustrans (a sustainable travel charity). It operates an excellent scheme called 'Bike It' in a number of local authorities and part fund with LAs Bike It officers to get children and their families cycling. They also part fund LAs to develop improved 'Links to School' (walking/cycling routes and cycle parking grants at schools on or near the National Cycle Network. • Living Streets/Act travel run the National and International Walk to School campaigns and develop walking incentive schemes notably WOW (Walk on Wednesday). • British Cycling provide training opportunities for staff in cycle coaching and delivery of 'Go Ride' cycle courses at schools. • Bike industry supports national Bike Week. 	Thank you for this information. The guidance template limits the amount of information that can be included in this section.
Department for Children Schools & Families & Department for Transport		2	9	<p>Considerations – Value of Physical activity –walking and cycling to school can also be built easily into everyday lives and support healthy and sustainable lifestyle agendas. Such activities also provide wider benefits in relation to the environment, local air quality, road safety and congestion. Children can gain a greater understanding of their local environment.</p>	Thank you for your comment. Incorporating physical activity into daily life is covered specifically in recommendations 1 and 15 and is implied in recommendations 5 and 12.
Department for Children Schools & Families & Department for Transport			10	<p>Other factors that encourage or hinder active travel include School location, design for sustainable/active travel and ethos/management. Provision of safer routes to school</p> <p>Families unaware of travel options to school and alternatives to car travel. Whether parents/carers make an 'informed choice' when choosing schools and assess the health benefits of choosing a local school. The Sustainable Modes of Travel Strategy (SMoTS) and individual school travel plans can assist families by providing useful information on how to access a school by more sustainable and active travel modes. Mapping current journeys, mapping current and projected congestion and</p>	Thank you for your bringing these additional factors to our attention. However, section 3 of the guidance outlines the factors and issues the PDG took into account when making the recommendations.

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				using accessible phrases such as Child Miles, School Travel Health Check can all help here. Children lacking skills to travel independently and walk/ride a bike safely. Families seeing car travel as higher status than walking or cycling The availability of options that would be attractive to children eg cycle clubs, cycle/walk tracks at school and availability of qualified dedicated staff. Availability/resourcing of cycle training at secondary schools	
Department for Children Schools & Families & Department for Transport		4	15	Recommendation 1 – Strongly support the value of a national campaign to promote physical activity among children and young people – including a campaign to increase active travel nationally (utilising a range of initiatives to suit local circumstances/school requirements).	Thank you for your support.
Department for Children Schools & Families & Department for Transport		4	16	Relevant reference to LTP and STPs.	Thank you for your comment.
Department for Children Schools & Families & Department for Transport			19	Who should take action? - plus Children Services Heads of Premises/Access Teams and those responsible for BSF/Primary Capital programmes	Directors of children's services have been added to the list of those who should take action in recommendation 4.
Department for Children Schools & Families & Department for Transport		4	20	Design of new schools to give due priority to those travelling by active means both to, through and around the site	Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983
Department for Children Schools & Families & Department for Transport		4	20	Recommendation 5 – This is already being undertaken, suggest that the wording is amended to state to continue with	The wording has been amended as suggested.
Department for		4	21	Yes - training for school travel advisers with other relevant partners	Thank you for your comment.

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Children Schools & Families & Department for Transport				would be productive	
Department for Children Schools & Families & Department for Transport		4	25	What action should they take - skills such as learning to ride a bike, walking safely to pre school settings and school (see key role for pedestrian training programmes)	Thank you for these comments. In the final guidance all examples have been removed as this recommendation focuses on the provision of facilities and equipment rather than on activities.
Department for Children Schools & Families & Department for Transport		4	26	Recommendation 11 – This is already being undertaken. As above suggest that the wording is amended to state to continue with... Also in section 'Who should take action' include Local Authority School Travel Advisors.	The wording has been amended as suggested.
Department for Children Schools & Families & Department for Transport		4	26	What action should they take? Not just develop a STP but review and monitor and support implementation of initiatives.	Thank you for your comment. The PDG are satisfied these concepts are captured in the existing wording.
Department for Children Schools & Families & Department for Transport		4	29	Recommendation 15 - Through the Education & Inspections Act 2006 there is a duty on local authorities to promote sustainable travel to schools and their communities, therefore include in 'Who should take action', Local Authority School Travel Advisors. (also role for cycle trainers, Bike It officers)	Thank you for your comment. These persons are included under local authority personnel.
Department for Children Schools & Families & Department for Transport		4	30	Recommendation 16 – This is already being undertaken through the duty on local authorities as a result of the Education & Inspections Act, therefore the wording just needs to be amended to ' To continue with ..'	Thank you for your comment. In the final version recommendation 16 has been integrated with recommendations 12 and 15.
Department for Children Schools & Families & Department for Transport		4	30	Who should take action? - Also involvement of school travel advisers and sustainable travel professionals	School travel advisers and other local authority personnel are included at the local authority level in recommendation 12 in which they are to work with schools, parents, carers and communities, thus linking to recommendation 15.

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Diabetes UK		2	4	It would be valuable to add other chronic conditions such as Type 2 diabetes and other vascular diseases to this statement. The risk of developing both of these conditions is increased through obesity. ¹ 1. http://www.diabetes.org.uk/About_us/Our_Views/Position_statements/Early_identification_of_people_with_Type_2_diabetes/	Thank you for this information. The guidance template limits the amount of information that can be included in this section.
Dept of Health		General		It would be helpful if the recommendations (10 to 13) could highlight how children will have different needs, and that this needs to be accounted and catered for.	Thank you for your comment. Children and young people's differing needs are outlined in the considerations section.
Dept of Health		General		We consider that more reference to 'play' throughout the guidance would be helpful.	Thank you for your comment. Play is encompassed within the definition of physical activity at the beginning of the recommendations. Play is therefore inferred each time the term physical activity is used.
Dept of Health		General		The guidance refers to 'children' in the title and in the text, interchangeably uses 'children' and 'children and young people'. Given the age range that the guidance refers to, could you please consider using the term 'children and young people' throughout.	Thank you for your comment. The term 'children and young people' has been inserted wherever appropriate.
Dept of Health		General		We are advised that most recommendations would have some implications for those delivering 'physical education and sport strategy for young people' (PESSYP), but they appear to be in tune with existing objectives.	Thank you for your comment.
Dept of Health		General		There appears to be no mention of the play strategy (Fair Play) in the guidance, which we feel are missed opportunities to link the recommendations (particularly those aimed at local authorities) with what has been said in them.	Thank you for your comment. Fair Play has been added to section 2.
Dept of Health		General		There appear to be only a couple of very general references to the benefits of play, and no links to how play can help with the achievement of PSA12 (improvement of child health and wellbeing), even though there is a reference to child obesity.	Thank you for your comment. Please see previous response about play.

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				<p>Equally, there are no definitions of physical activity, sport or play. We feel that this could lead to confusion as to whether children and young people are engaged in physical activity, for example, if they are playing.</p> <p>There also appears to be very little mention of play as an activity and where it is mentioned, it is seen in the context of structured activity. There appears to be no mention of play being something that children could 'lead', even if there were staff supervising their activities.</p>	Activities encompassed by the term physical activity are given at the beginning of the recommendations and active play and sport are defined in the glossary. Casperson's definition of physical activity has been added at the beginning of the recommendations in the final guidance document.
Dept of Health		General		<p>The guidance appears not to have any reference to sustainability issues. You may be aware that the Government's sustainable development strategy, <i>Securing the Future</i>,ⁱⁱⁱ requires the principles of sustainable development [annex A] to be the basis for policy in the UK. The <i>Children's Plan</i> (2007) - DCSF's ten year strategy to make England 'the best place in the world for children and young people to grow up' - states that 'sustainable development is non-negotiable for children's well-being'. HM Government (2005) <i>Securing the Future: delivering UK sustainable development strategy</i>. London: TSO</p> <p>The Sustainable Development Action Plan of the Department for Children, Schools & Families (DCSF) states that '<i>children cannot grow up into a stable and secure world unless we, as a country and as an international partner, find ways to improve our wellbeing while conserving our most precious resource, the planet.</i>'</p>	Thank you for your comment. References to Every Child's Future Matters and sustainable travel have been added to section 2.
Dept of Health		General		In our view, there is strong evidence that the environment makes an important contribution to the well-being of children and adults alike, as noted in <i>Promoting and Creating Built Or Natural Environments that Encourage And Support Physical Activity</i> , NICE Public Health Programme Guidance 4. We wish to emphasise the role of health services in ensuring that our communities live in environments, which promote health and well-being. We are eager that all children and families can access public space, particularly green and natural spaces which, in addition to encouraging physical activity and more	Health professionals are included within the target audience for the guidance and are either named specifically or included as part of public sector organisations. A list of recommendations by target audiences has been added to the beginning of the document. The guidance cross references to 'Promoting and Creating Built Or Natural Environments

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				vigorous play, have a positive impact on mental health.	that Encourage And Support Physical Activity; NICE Public Health Programme Guidance 4'.
Dept of Health		General		We would welcome reference to <i>Every Child's Future Matters SDC, (2007)</i> which highlights current research in this area. It would also be beneficial to refer to DCSF's Sustainable Schools Programme, which includes gateways on travel and transport promoting physical activity.	Thank you for your comment. Please refer to our earlier response.
Dept of Health		General		In our opinion, the guidance seems to focus on schools and services for children. We feel that it is important to mention vulnerable groups such as young offenders in community and custodial settings, looked after children, those not in education, employment and training and truants and excluders. These groups often have higher prevalence of health issues, and they would benefit from access to environments and services promoting physical activity.	Thank you for your comment. Unfortunately, no evidence was found that addressed the specific needs of these groups and as a result the PDG could not make specific recommendations. Please see consideration 3.19.
Dept of Health		General		There appears to be no reference to play partnerships, nor to the pathfinders/play-builders, thereby missing opportunities to work together to consult with their local communities on issues such as evaluating uptake of physical activities.	Thank you for your comment. The NICE Implementation team are working with key stakeholders to identify sources of support for those responsible for implementing the guidance.
Dept of Health		General		<p>Could you please clarify whether there is recognition of the work being done with the <i>Change4Life</i> social marketing work.</p> <p>We feel that there is a need for coherent and consistent communications messages going out to show that everyone involved – DH, DCSF, DCMS, Play England – are all conveying the same messages. In our opinion, any communications work that is undertaken must be underpinned by substantive understanding, and a public policy vision that addresses the real challenges and barriers to people undertaking physical activity.</p>	<p>Thank you for your comment. Change4Life is referred to in recommendation 1 and has been added to section 2 of the final guidance.</p> <p>Thank you for your comment.</p>
Dept of Health		General		There appears to be considerable overlap in the recommendations, between the same key people; for example, there are several aimed at parents/carers, and these could be linked together to make it easier to see what is expected of each.	Thank you for your comment. The PDG reviewed the organisation of the recommendations when finalising the guidance. To assist target audiences a schematic representation of the recommendations and listing of

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					recommendations by target audiences has been added to the beginning of the document.
Dept of Health		General		We believe that some of the recommendations contain actions that DCSF want to happen; for example, school play facilities should be made available to the wider community in out of school hours. We consider that there is a need to make links between what both DCSF and NICE are saying.	Thank you for your comment. Please see previous comments about restrictions of the guidance template.
Dept of Health		General		We see that there are two recommendations aimed specifically at girls and young women, recognising that there are particular barriers, which prevent them from engaging in physical activity.	Thank you for your comment.
Dept of Health		General		The guidance does not appear to acknowledge the direct health benefits of children's exposure to natural spaces (everything from parks and open countryside to gardens and other green spaces). In our view, such exposure has been found to have positive benefits for mental and physical health. Studies have found that people with access to nearby nature are generally healthier than those without. A dose-response relationship between the natural environment and health has also been suggested, such that the more green space there is in a person's residential neighbourhood, the healthier they are likely to be.	Thank you for your comment. Exposure to natural spaces was not part of the referral from the DH and so is beyond the remit of this piece of guidance.
Dept of Health		2	4	'Moderate Intensity Activity' is referred to. We feel that it would be useful to have a definition of this, either as a footnote or in the Glossary.	Thank you for your comment. Moderate intensity activity was defined on page 14 of the draft guidance.
Dept of Health		2	4	Could you please clarify whether physical activity tracks from childhood into adulthood. Evidence from <i>Young & Active (HEA, 1999)</i> , suggests not, but there may be more recent evidence on this.	Thank you for your comment. Please refer to the Epidemiology review.
Dept of Health		2	5	In our opinion, comparative data on the walking and cycling patterns of children and young people would be helpful.	Thank you for your comment. Please see previous comments about restrictions of the guidance template.
Dept of Health		2	5	We are advised that the 'Physical Education, School Sport and Club Links (PESSCL) strategy changed in April 2008, and now has a new name. Therefore, we feel that it would help if the document could reference that this is now PESSYP.	Thank you for your comment. Section 2 has been changed and now makes reference to PESSYP.

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Dept of Health		2	5	The wording in the section regarding 'PSA 22 in addition to.....' appears to trail off in mid-sentence. We would appreciate clarification of the full and correct wording.	Please accept our apologies for the technical problems with the pdf. version of the draft guidance.
Dept of Health		2	5	Can you please include <i>Every Child's Future Matters</i> , following on from the ECM listing. In our view, there is little or no point in getting children healthy, if the provision of opportunities destroys activities for future generations. Could you please also include <i>Sustainable Schools Programme</i> .	Thank you for your comment. Every Child's Future Matters has been added to section 2 of the final guidance.
Dept of Health		2	5	<p>We welcome reference to policies on active travel. Whilst it is positive that schools are expected to have School Travel Plans in place by 2010, we believe that the guidance should encourage a wider local authority approach to active travel.</p> <p>We very much welcome guidance for policy makers and local authorities on transport policies that promote walking and cycling, and we believe that such guidance should also be targeted at health partners.</p> <p>We feel that road traffic is a significant barrier to physical activity and play across the public realm, and we expect that the creation of safe and appealing footpaths and cycling routes, such that children and families can accomplish their desired journeys without the use of a car, will have a major positive effect on their level of physical activity.</p> <p>In our opinion, connectivity within and between neighbourhoods has been shown to be a decisive factor in reducing transport-related carbon emissions.</p>	<p>Thank you for your comments. A wider local authority approach to active travel is the focus of recommendation 5.</p> <p>Page 1 of the guidance lists the sectors the guidance is for. This includes the health sector.</p> <p>NICE has recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983 Please note also that other relevant interventions may be covered either in guidance currently under development (for example, 'Preventing unintentional road injuries among under 15s' _ and in response to other Department of Health referrals to NICE (for example, 'transport policies that prioritise walking and cycling').</p>
Dept of Health		2	5	We consider that easily accessible green spaces and 'playable' neighbourhoods have a crucial role in promoting children's physical activity. However, quality is a decisive factor both in terms of the quality of the social environment in play areas (e.g. prevalence of anti-social behaviour by young people or adults) and general feelings	Thank you for your comments. Perceptions of safety have been addressed in the final guidance.

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				<p>of reassurance and safety' in addition to the quality of the physical environment (for example, distance to travel, road danger, noise, pollution, and the quality of actual play facilities).</p> <p>We believe that the role of free play in keeping children physically active and healthy deserves greater attention in the guidance strategy, with a particular focus on the implications for the planning and design of public space.</p>	Please see previous comment about the definition of physical activity.
Dept of Health		2	5	We would welcome greater emphasis on the positive impact of active travel, playable public space and green and natural spaces and work to address road traffic as a barrier to physical activity, both on health and well-being and the environment.	Please see previous comment about the limitations imposed by the guidance template.
Dept of Health		2	5	Could you please consider the inclusion of EYFS (physical development) .	Please see previous comment.
Dept of Health		2	6	Regarding 'Healthy Weight, Healthy Lives', could you please consider re-wording the second sentence to read <i>'It aims to create a healthy society by bringing together all sectors to promote healthy food choices, including snacks and to help increase the opportunity for daily physical activity across all groups, focusing initially on children and young people'</i> .	Please see previous comment.
Dept of Health		2	6	<p>The bullet point 3 appears to be confusing. If it is listing a number of documents, we feel that they all need to be sourced.</p> <p>In our view, it would be helpful if all references to PESSYP/ PESSCL could be listed as 'joint DCMS and DCSF'.</p>	Thank you for your comment. This bullet referred to the documents mentioned in Choosing activity: a physical activity plan. The paragraph has been altered in the final version.
Dept of Health		2	7	Could you please consider including a reference to <i>'Fair Play and Fair Play 2'</i> .	Thank you for your comment. Section 2 of the final guidance refers to 'The Play Strategy', as this is the most recent DCMS publication on play.
Dept of Health		2	7	'Active Travel' refers to need to return levels of walking etc to that of the mid 1980's. We feel that it would be helpful to quantify that, by referring to the levels experienced at that time.	Thank you for your comment. Please see response to earlier comment about active travel targets.
Dept of Health		2	7	We consider that the need for all schools to have a STP in place by 2010 is also a commitment to Healthy Weight, Healthy Lives. Could	Thank you for your comment. Please see previous comment about the limitations

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				you please therefore consider inserting (after the DfES reference) <i>'this is also a commitment in 'Healthy Weight, Healthy Lives'.</i>	imposed by the guidance template.
Dept of Health		2	7	We feel that the second paragraph under 'Active Travel' may cause confusion. Could you please therefore clarify the key point that needs to be made.	Thank you for your comment. This section has been altered in the final version of the guidance and the factors influencing distance travelled removed.
Dept of Health		2	8	Bullet 2 on this page mentioned the Youth Sport Trust (YST). In our opinion, it is worth noting here that the YST is also a key PESSYP delivery partner.	Please see previous comment about the limitations imposed by the guidance template.
Dept of Health		2	8	The third bullet point, regarding the British Heart Foundation, states that the 'physical activity toolkit is linked to the National Healthy Schools Programme'. Could you please consider amending this to 'supports the National Healthy Schools Programme (NHSP)'..	Thank you for your comment. This has been amended as requested.
Dept of Health		3	9	Could you please consider the inclusion of the early years, i.e., gaining confidence, a positive sense of well-being and the benefits of being healthy and active.	Thank you for your comment. This section has been altered in the final version of the guidance.
Dept of Health		3	9, Para 3.1	Could you please consider the inclusion of benefits to children and young people, regarding emotional development and learning.	Thank you for your comment. Emotional development has been added to consideration 3.1.
Dept of Health		3	9, Para 3.2	Could you please consider taking out the reference to 120 minutes (as we feel that this may be confusing), and adhering to the CMO's recommendations of 60 minutes.	Thank you for your comment. The PDG have decided that this should remain in. Its specificity to reducing risk of cardiovascular disease has been inserted in the final guidance.
Dept of Health		3	9, Para 3.5	We feel that there is a need to recognise that younger children should be able to engage in the unstructured play that they are 'leading'.	Thank you for your comment. Please see the definition of active play in the glossary which encompasses this concept.
Dept of Health		3	10	Could you please consider adding another point under 'CYP needs', as follows: <i>'Children and young people need to be involved and consulted on what physical activity opportunities they would like to try'.</i> In our view, increasing the repertoire of activities is important to increase the likelihood that children and young people find an activity they enjoy, and therefore more likely to sustain.	Thank you for your comment. This is the focus of recommendations 3, 6 & 11 Thank you for your comment. This is the focus of recommendations 3, 6, 10, 11 & 13. A new consideration (3.11) about

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					range of activities has been added to the final version of the guidance.
Dept of Health		3	10	'Factors that encourage or hinder physical activity'- could you please consider splitting this into: (i) factors that encourage and; (ii) factors that hinder' and; (iii) with an age group breakdown.	Please see previous comment about the limitations imposed by the guidance template.
Dept of Health		3	10, Para 3.7	We consider that early Years' settings have a crucial role to play in encouraging physical activity.	Thank you for your comment.
Dept of Health		3	10, Para 3.9	We are concerned that this paragraph may suggest that all activities for children and young people should be structured (<i>"tailored to children and young people's developmental age"</i>).	Thank you for your comment. The PDG decided not to change this consideration.
Dept of Health		3	10, Para 3.10	Could you please consider the inclusion of the possibility of parents/carers encouraging/supporting their children to play on their own, without parental supervision.	Thank you for your comment. The PDG decided not to change this consideration, as the guidance makes clear that unstructured opportunities are included.
Dept of Health		3	10, Para 3.7	Could you please consider adding 'access to opportunities'.	Thank you for your comment. In the final guidance the parentheses have been removed to widen the concept of opportunities.
Dept of Health		3	10, Para 3.10	We feel that it may be useful to illustrate an example of what 'acting as a positive role model' means. A suggestion perhaps could be 'going for a swim while your children are in their swimming lessons'.	Thank you for your comment. The PDG decided not to change this consideration.
Dept of Health		3	10, Para 3.10	Could you please consider adding 'active travel'.	Thank you for your comment. Active travel has been added to this consideration.
Dept of Health		3	11, Paras 3.13 and 3.14	Whilst reference is made to risk aversion from a litigation point of view, we believe that there is also risk aversion from fear of crime, abduction etc.	Thank you for your comment. The PDG decided not to add these factors to this consideration.
Dept of Health		3	11, Para 3.15	In our view, there is a need for recognition that children and young people are also part of the local community, so their 'right' in respect of being able to play also needs to be recognised and accepted.	Thank you for your comment. This consideration has been altered to suggest the importance of balancing the interests of the community with those of

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					children and young people (now consideration 3.18).
Dept of Health		3	11, Para 3.15	With reference to outdoor play, could you please consider using 'outdoor activities, including play'.	Thank you for your comment. The PDG decided not to change this consideration.
Dept of Health		3	12, Para 3.16B	Bullet point 3 quotes 'play activities; could you please consider amending this to 'physical activity including play'.	Thank you for your comment. The PDG decided not to change this consideration.
Dept of Health		3	12, Para 3.17	This refers to transition time as one where younger people may have less access to physical activity opportunities. We feel however, that it could also be an important 'trigger point', where a change in behaviour may be more likely (for example, choosing to cycle to work).	Thank you for your comment. The PDG decided not to change this consideration.
Dept of Health		3	12, Para 3.18	In our view, it would be helpful to list the 'many successful interventions' mentioned.	Thank you for your comment. The PDG decided not to list the interventions. The consideration has been altered to increase the emphasis on supporting volunteers.
Dept of Health		4	14, Para 3	Could you please consider adding the following at the end of the paragraph; ' <i>.. and help build up a repertoire of activity, increasing the likelihood that children and young people find an activity they enjoy and continue with</i> '.	Thank you for your comment. The PDG decided not to make this insertion.
Dept of Health		4	14, Para 3	Could you please consider amending the text to state that the 60 minutes of moderate to vigorous activity could take place anywhere (for example, at home, school etc).	Thank you for your comment. The PDG decided not to make this insertion.
Dept of Health		4	14, Para 4	Could you please consider taking out the second sentence, referring to ' <i>sweating on hot and humid days</i> ', as we feel that there is potential for confusion.	Thank you for your comment. The PDG decided not to change this as it is the wording used in the CMO's recommendations.
Dept of Health		4	15	EYFS already encourages physical activity, but we feel that the recommendations need to reflect working with early years' settings and childcare organisations.	Thank you for your comment. Early years providers from all sectors are part of the target audience for the guidance
Dept of Health		4	15, Rec. 1	We are advised that the DCMS is happy to be involved, and suggest that any working group should reflect existing cross-Government structures, and Departmental responsibilities.	Thank you for your comment and welcome the support of DCMS.
Dept of Health		4	15, Rec. 1	We support this recommendation, and have a commitment to work on a national campaign as part of 'Healthy Weight, Healthy Lives'. In	Thank you for your comment. NICE has recently published guidance on

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				addition to this however, Government does have other roles to play. Therefore, we would welcome additional recommendations around issues, including the built environment and planning for physical activity; possibly a health planning policy statement, working with industry to minimise sedentary behaviour of children and young people, ensuring cross government policies, and joined up and integrated into policies of other organisations and agencies.	Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983
Dept of Health		4	15, Rec. 1	Could you please include the health benefits of exposure to green and natural spaces (both mental and physical health).	Thank you for your comment. The PDG decided not to make this insertion.
Dept of Health		4	16, Rec. 1	In our opinion, the example used 'help with housework' is age specific. Could you please consider taking out the reference to 'spending less time watching TV' and replacing this with a more positive example.	Thank you for your comment. The PDG decided not to change the first example but has deleted the one about watching TV.
Dept of Health		4	16, Rec. 2	Could you please consider including 'planners' in 'who should take action?'	Thank you for your comment. The PDG decided not to make this insertion as the responsibility lies with the Chair of the Local Strategic Partnership (LSP) to ensure the relevant parties are involved in developing the plans.
Dept of Health		4	16, Rec. 2	Regarding the identification of senior council member to be champion for physical activity, could you please clarify whether this includes play. We feel that it would be helpful to extend a mention of partners to early years' and children's centre's, sure start, CAMHS and secure facilities such as Youth Offending Institutions.	Please see previous comments about the definition of physical activity. The PDG decided not to make this insertion as the responsibility lies with the Director of children's services and Chairs of children's trusts and local strategic partnerships to ensure the relevant parties are involved in developing the plans.
Dept of Health		4	17, Rec. 2	In our view, action is also about ensuring 'access to opportunities'.	Thank you for your comment. Bullet 3 point 5 would cover access.
Dept of Health		4	17, Rec.	At bullet point 1, could you please consider including 'planning	Thank you for your comment. Planning

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			2	frameworks’.	frameworks has been added to this bullet.
Dept of Health		4	18, Rec. 3	‘Who should take action?’ – could you please consider taking into account ‘Health Improvement’.	Thank you for your comment. The PDG decided not to make this change.
Dept of Health		4	18, Rec. 3	‘What action?’ – 4 th bullet point: could you please consider using the following: ‘liaise with council members.. town planning teams’	Thank you for your comment. The PDG decided not to make this change.
Dept of Health		4	18, Rec. 3	We feel that it would be helpful to reference National Child Measurement Programme and data available through this to target.	Please see earlier comment about the limitations imposed by the guidance template.
Dept of Health		4	18, Rec. 3	We would welcome greater focus on identifying obesogenic environments, and improving opportunities and inspiration for physical activity.	Thank you for your comment. The PDG decided not to make these changes as they do not fit this recommendations focus on consultation.
Dept of Health		4	18, Rec. 3	We feel that there needs to be recognition of the play pathfinders/playbuilders, and the work they will be doing around evaluating the uptake of play provision.	Thank you for your comment. These groups are encompassed with in Local authority departments and members of local strategic partnerships.
Dept of Health		4	19	In our opinion, those to take action should include Providers of early learning and childcare, including nurseries, playgroups and childminders.	Thank you for your comment. Directors of children’s services have been added to the list of those who should take action, as they are responsible for the early years providers listed.
Dept of Health		4	19, Rec. 3	‘What action..?’ – could you please consider including ‘access to opportunities’.	Thank you for your comment. The PDG decided not to make this change as access is implicit within provision.
Dept of Health		4	19 – 20 , Recs. 4 & 5	In our opinion, the focus of the recommendations is on space and travel plans, but we believe that it would be helpful to make reference to other infrastructure around the built environment, for example, cycle paths/routes/ access.	Thank you for your comment. Please see previous comment about the focus of the referral from the department of health and recent NICE guidance on Physical Activity and the Environment.
Dept of Health		4	19, Rec. 4	Could you please consider adding ‘access to opportunities’ throughout this recommendation, including school facilities.	Thank you for your comment. Please see previous response about ‘access’.
Dept of Health		4	19, Rec. 4	There appears to be no mention of working with play partnerships in this and other recommendations relevant to wider local authority.	Thank you for your comment. The PDG decided not to make this change as this recommendation is about facilities not people.

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Dept of Health		4	19, Rec. 4	In our view, there is a need to take into account specific design guidance, (for example, Design for Play, Planning Guidance [that Play England is drafting]).	Thank you for your comment. The PDG decided not to make this change as the document suggested is currently being drafted.
Dept of Health		4	19, Rec. 4	In our opinion, this recommendation is also about planning, which should ensure that regeneration and new facilities are designed and built in line with sustainable design and construction principles.	Thank you for your comment.
Dept of Health		4	19, Rec. 4	We would like to see a reference to the provision of space for physical activity, including play in housing developments both public and private. In our view, this is particularly important for young children.	Thank you for your comment. This concept is encompassed in bullet 5 of this recommendation.
Dept of Health		4	19, Rec. 4	We would welcome mention of the benefits of green space for both mental and physical health.	Thank you for your comment. The PDG decided not to make this change as this was not the focus of the scope.
Dept of Health		4	20, Rec. 5	In our opinion, primary care trusts, the police and directors of transport should also have a role in this work.	Thank you for your comment. These groups have been added in the final version of the guidance.
Dept of Health		4	20, Rec. 5	We welcome the emphasis on authority wide transport plans, which promote walking and cycling. Young children in particular are influenced by parental behaviour, and are less likely to make use of active travel opportunities if parents are driving to work.	Thank you for your comment.
Dept of Health		4	20, Rec. 5	We feel that it would be helpful to acknowledge that the reduction of air and noise pollution, created by road traffic, is also beneficial to children's health.	Thank you for your comment. The PDG decided not to make this change.
Dept of Health		4	21, Rec. 5	Could you please consider the running of 'access' through this recommendation.	Thank you for your comment. The PDG decided not to make this change.
Dept of Health		4	21, Rec. 5	('What action') bullet point 3 - could you please consider using the following text: 'ensure local transport plans acknowledge the impact of planning on opportunities for physical activity and make specific reference to children and young people'.	Thank you for your comment. The draft recommendation contains these points. Some changes to the wording were made when finalising the guidance.
Dept of Health		4	21, Rec. 6	In our view, primary care trusts should also have a role to play here.	Thank you for your comment. PCTs are encompassed in the existing wording "Public, voluntary, community and private sector managers and decision-makers responsible for – or able to influence –

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					opportunities for children and young people to be physically active.” However, listing of recommendations by target audiences has been added to the beginning of the document and this includes PCTs.
Dept of Health		4	22, Rec. 6	‘What action ?’, bullet point 1: could you please consider using the following text: ‘through the consultation and involvement of children, young people, parents and carers, identify ...’	Thank you for your comment. Involvement in planning physical activities has been added to bullet 2 on recommendation 6.
Dept of Health		4	22, Rec. 6	We feel that reference should be made to active travel.	Thank you for your comment. This recommendation refers to all types of opportunities for physical activity. Active travel is encompassed within the definition of physical activity and in the examples given in the introduction to the guidance, so is not singled out.
Dept of Health		4	22	‘What action..’: could you please consider adding a bp on compulsory attendance on a child protection course, and the inclusion of an ‘enhanced CRB check’.	Thank you for your comment. The PDG decided not to make this change as it is implicit in the term relevant sector standards.
Dept of Health		4	22, Rec. 7	‘What action?’: could you please consider inserting an extra bullet point around ‘active travel to the site and ensure facilities are accessible’.	Thank you for your comment. The PDG decided not to make this change.
Dept of Health		4	22, Rec. 7	We are concerned that the emphasis here is only on the design of structured play activities. In our view, children and young people need to be able to engage in unstructured and unsupervised activities too. We believe that it would be helpful to refer to the importance of involving children, young people and families in development and implementation of programmes, spaces and activities.	Thank you for your comment. The PDG are satisfied that the recommendations adequately cover both structured and unstructured physical activity and the involvement of children and young people and their families in planning and delivery.
Dept of Health		4	23, Rec. 8	In our opinion, there seems to be no recognition of the work CWDC/SkillsActive are doing regarding up-skilling play and related workforce. Could you please clarify whether there are opportunities for working with them regarding the CPD, suggested for those people	Thank you for your comment. These organisations would be included in the training recommendations.

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				involved in organising and running physical activity programmes. It would be helpful to refer to the importance of involvement of children, young people and families in programme design and delivery.	Thank you for your comment. The involvement of children and young people in design and delivery of programmes is covered elsewhere in the guidance.
Dept of Health		4	24, Rec. 9	Could you please clarify what thought may have been given to ensuring that children who are 'home educated' have the opportunity to be involved in these activities	Thank you for your comment. The potential involvement of home educated children and young people would need to be considered on a local basis.
Dept of Health		4	24, Rec. 9	Rather than providing transport to locations where physical activity can take place, we would advocate prioritising the need for local public space where physical activity can take place.	Thank you for your comment. This example has been removed in the final version of the guidance.
Dept of Health		4	25	Could you please consider re-arranging recommendations 10 and 11 to go before recommendation 9.	Thank you for your comment. The PDG decided not to make this change. However in the final version of the guidance the order of the recommendations in this section has been altered.
Dept of Health		4	25, Rec. 10	'Who should?': could you please consider including parent/teacher associations and school councils.	Thank you for your comment. The PDG decided not to make this change. This does not preclude their involvement, rather that there involvement would be the responsibility of the school governors and head teachers.
Dept of Health		4	25, Rec. 10	'What action?' could you please consider including 'play' through this recommendation.	Thank you for your comment. Please see earlier response about the definition of physical activity and types of physical activity.
Dept of Health		4	25, Rec. 10	We would welcome mention of the benefits of green space for both mental and physical health.	Thank you for your comment. Please see earlier response about health benefits of green space.
Dept of Health		4	25	In our view, those to take action should include Providers of early learning and childcare, including nurseries, playgroups and childminders.	Thank you for your comment. The PDG consider these groups are clearly encompassed within the draft wording.

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Dept of Health		4	26, Rec. 11	Target population 18 and under; could you please consider adding 'travel to college/work'.	Thank you for your comment. Travel to college has been added to the final guidance. Work is encompassed in the term 'out of school activity'.
Dept of Health		4	26, Rec. 11	'Who should take action?' - could you please consider including college principles.	Thank you for your comment. College Principals have been added to the final guidance.
Dept of Health		4	26, Rec. 12	Could you please consider including 'active travel'.	Thank you for your comment. Please see earlier response about the definition of physical activity and types of physical activity.
Dept of Health		4	27	In our view, those to take action should include Providers of early learning and childcare, including nurseries, playgroups and childminders	Thank you for your comment. The PDG consider these groups are clearly encompassed with in the draft wording.
Dept of Health		4	27, Rec. 12	2nd last bullet; could you please consider mentioning that such facilities are provided locally, and that any travel takes into account the environmental impact (for example, train travel may be preferable to car travel). We would welcome mention of the benefits of green space for both mental and physical health.	Thank you for your comment. The PDG believe this issue is adequately covered in recommendations 5 and 12. Thank you for your comment. Please see earlier response about health benefits of green space.
Dept of Health		4	28, Rec. 12	We feel that sufficient space both indoors and outdoors should be allowed to provide time and opportunities for children with physical disabilities or motor impairments, to develop their physical skills whilst working in partnership with relevant specialists.	Thank you for your comment. The PDG acknowledge the importance of this and therefore recommendations 3, 4,6,10, and13 address the planning of activities and spaces to address the specific needs of children and young people.
Dept of Health		4	28, Rec. 13	(Last bullet point); in our opinion, this is about traffic, and needs to be seen from the sustainability angle.	Thank you for your comment. The PDG believe this issue is adequately covered in recommendations 5 and 12.
Dept of Health		4	28 - 29, Recs.13 & 14	It would be helpful if you could make these recommendations known to the Women's Sport and Fitness Foundation.	Thank you for your comment. The NICE Implementation team are working with key stakeholders to identify sources of

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					support for those responsible for implementing the guidance.
Dept of Health		4	30, Rec. 15	This refers to the 60 minutes message, but we feel that it would be helpful to add 'accumulated' as, for obese children or those who are very inactive, small bouts of activity are more realistic.	Thank you for your comment. The PDG believe that this is clearly stated on page 5 of the guidance.
Dept of Health		4	30, Rec. 16	'What action' – could you please consider using 'establish active travel, from an early age.'	Thank you for your comment. In the final guidance this recommendation has been incorporated into recommendation 12 and 15. The original wording has been retained.
Dept of Health		4	30, Rec. 16	We feel that there should be a key argument around the environmental and sustainable benefits of promoting active travel.	Thank you for your comment. The PDG believe this issue is adequately covered in recommendations 5 and 12.
Dept of Health		5	32	The last bullet point, regarding 'supporting schools in meeting their duty'; could you please consider adding 'National' to 'Healthy Schools Status'.	Thank you for your comment. This has been amended as requested.
Dept of Health		5	32	Could you please consider adding EY providers, supporting them to implement EYFS.	Thank you for this comment. The guidance template limits the amount of information that can be included in this section.
Dept of Health		10	36-38	Could you please consider adding EYFS to the references.	Thank you for your comment. Only publications referred to in the main body of the guidance are referenced.
Diabetes UK		3.1	9	It would be valuable to add a statement regarding the protective effect of physical activity in helping to prevent obesity and long term conditions such as diabetes.	Thank you for your comment. A new consideration has been added to this effect (3.2).
Diabetes UK		3.3	9	It is important to highlight explicitly that children with medical conditions such as diabetes should not be automatically excluded from opportunities for physical activity on the grounds that they have a medical condition. ¹ 1. www.medicalconditionsatschool.org.uk	Thank you for your comment. The PDG consider that it is clear that the guidance includes such children.
Diabetes UK		3.7	10	It would be valuable to include a statement here about taking all opportunities to encourage physical activity and movement.	Thank you for your comment. The PDG consider that this addition is not required.

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Diabetes UK		3.13	11	Please "include health related factors" in this statement, as these can also impact on opportunities to participate in physical activity.	Thank you for your comment. The PDG consider that this addition is not required.
Diabetes UK		3.14	11	It would also be valuable to refer to Type 2 diabetes. It is predicted that by 2025 there will be over four million people with diabetes in the UK. ¹ Rising levels of obesity are contributing to this predicted prevalence of diabetes. Furthermore the incidence of Type 2 diabetes amongst children and young people is on the increase. Diabetes is serious condition accompanied by significant complications including CVD, if it is not well managed. ² 1. http://www.diabetes.org.uk/Documents/Professionals/040908early_identification_positionand%20VRAM%202008%20FINAL.doc 2. http://www.diabetes.org.uk/Guide-to-diabetes/Complications/Long_term_complications/	Thank you for your comment. The PDG consider that this addition is not required.
Diabetes UK		4	15	Recommendation 1 - Drama/acting could be included as another example of physical activity and movement. Movement to music and songs and the emphasis on fun and laughter can all help encourage participation in physical activity.	Thank you for this comment. The PDG are satisfied that a sufficient range of activities are included in the examples.
Diabetes UK		4	17	Recommendation 2 - Please include partnership working with health bodies and networks so that systems are in place to ensure children with medical conditions are supported to participate in physical activity as appropriate and are not unfairly excluded.	Thank you for your comment. Chief Executives of Primary Care Trusts have been added to the list of those who should take action.
Diabetes UK		4	22	Recommendation 6 - The ready availability of suitable outdoor wear, for example at school, could be included as part of this recommendation, supporting opportunities for outdoor activities.	Thank you for this comment. The PDG consider that sufficient examples have been given.
Diabetes UK		4	23 and 24	Recommendations 7 and 8 - As part of the knowledge and skills required, it is important that there is a recommendation as follows: Systems are in place to ensure that where a child with a particular medical condition is identified, training and support is provided to those delivering physical activity sessions to ensure they can support that child. www.medicalconditionsatschool.org.uk	Thank you for this comment. Medical conditions have been added to bullet 1 of recommendation 8.

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Diabetes UK		4	24	Recommendation 9 - it would be valuable to include the participation of school staff in physical activity and activities involving movement, as part of providing a supportive environment that encourages physical activity.	Thank you for this comment. The PDG consider that sufficient examples have been given.
Diabetes UK		4 and general	27	Recommendation 12 – it may be of further benefit to specify developmental age differences and activities in more detail, rather than stating “up to 11”.	Thank you for this comment. For children without developmental delay this information is available from standard texts.
Diabetes UK		4	28	Recommendation 12 – it would be valuable to add the following to the recommendation, as previously: Systems are in place to ensure that where a child with a particular medical condition is identified, training and support is provided to those delivering physical activity sessions to ensure they can support that child. www.medicalconditionsatschool.org.uk	Thank you for your comment. Please see earlier response to recommendation 9.
East of England Public Health Group		Recommendation 10	25	Under who should take action, another bullet point should include OFSTED as they inspect early years setting. OFSTED should ensure their inspectors realise the importance of “free play” or “unstructured” play.	Thank you for your comment. The recommendations in this section are for local organisations. OFSTED (a national body) should be aware of all the recommendations relating to the groups within their remit.
English Outdoor Council		General		We applaud the draft guidance as a whole and simply have a small number of suggestions on emphasis.	Thank you for your comment.
English Outdoor Council		General		You have rightly suggested that children will only be motivated to participate on an ongoing basis if they enjoy what they are doing. Many children do not enjoy team sports but are motivated by individual pursuits such as orienteering, canoeing, mountain walking etc. We suggest it is worth including in the recommendations the	Thank you for this comment. The PDG are satisfied that a sufficient range of activities are included in the examples.

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				desirability of including the opportunity to participate in activities of this sort.	
English Outdoor Council		General		You have, in 3.8 quite rightly pointed out that children need to take risks and challenge themselves. However, this does not seem to carry through as clearly to the recommendations.	Thank you for your comment. The wording of recommendation 6, bullet 4 and recommendation 10, bullet 2 have been revised.
English Outdoor Council		General		It is good to see you arguing against unnecessary risk aversion in 3.14. Again, a clearer link with one of the recommendations would be helpful. (For evidence on this from our sector, see http://www.aals.org.uk/guidance_details.php/pArticleHeadingID=144)	Thank you for your comment. Please see previous response.
English Outdoor Council		General		You discuss the desirability of lifetime physical activity. To a greater extent than team sports, partly because people are able to pursue them at their own level, individual outdoor pursuits started in childhood very often carry through to a lifetime's activity. It would be good if this were reflected in the recommendations.	Thank you for your comment. Recommendations 10 and 13 in the final guidance refer to identifying activities that children and young people can enjoy doing by themselves.
Fields in Trust		General		<p>Many of the recommendations – 2, 3 and 4 in particular – emphasise the importance of co-ordinated local strategies to ensure there is reasonable provision of space for physical activity within neighbourhoods. In relation to these aims it is important to note the relevance of the Fields in Trust publication <i>Planning and Design for Outdoor Sport and Play</i> (formerly <i>The Six Acre Standard</i>). First published in the 1930s, it provides practical advice on the minimum level of provision of outdoor recreational space – 6 acres per 1000 population – and is widely acknowledged as the industry best practice document. <i>Planning and Design for Outdoor Sport and Play</i> is comprehensive and includes technical descriptions of LAPS (Local Areas for Play), LEAPS (Local Equipped Areas for Play), NEAPS (Neighbourhood Equipped Areas for Play) and gives advice regarding the advised level of provision of each.</p> <p>The guidelines represent an opportunity to emphasise the close relationship that should exist between different departments in local authorities. Increasing physical activity and addressing obesity will often fall under the remit of the health professionals but without sustained input from planning departments effecting the change to</p>	Thank you for this comment. The guidance template limits the amount of supporting information that can be included.

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				infrastructure that is necessary to increase physical activity and promote active travel will be impossible.	
Fitness4Kids Ltd		General		<p>I understand you are setting up a consultation on promoting physical activity for children? The issue of childhood obesity is a subject very close to our business operation. Fitness4kids was formed to encourage younger children to enjoy healthy play. This is achieved via a range of products and services that children really enjoy using. Although primarily set up as a commercial enterprise, we have become heavily involved in research in order to achieve maximum benefits from what we do.</p> <p>As part of our own research, we visit nurseries and primary schools and facilitate `free play` opportunities for the children. In return we ask for an appraisal of how the children interacted with the products and any consequential benefits. This research has been useful in establishing the most effective way of creating play facilities that genuinely encourage children to expend their naturally high levels of energy.</p> <p>We love to share our experiences with appropriate organisations. Should you feel our research maybe of benefit please feel free to contact us.</p>	Thank you for your response. The evidence reviews were completed in May 2008. The evaluations you refer to may be used to inform future updates of the guidance, if they are in the public domain.
Liverpool Hope University		3.2	9	Is there a strong rationale for highlighting one specific piece of research that recommends 120/90 minutes of PA?	Thank you for your comment. This large study was part of an international research collaboration - The European Youth Heart Study – collecting data from large random samples in different countries and using objective and validated measures of cardiovascular risk and physical activity.
Liverpool Hope		4	14	A greater distinction between the wording of the physical descriptors	Thank you for your comment. The PDG

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University				for MPA and VPA may be worthwhile.	are satisfied that the descriptors make a clear distinction between moderate and vigorous physical activity.
Liverpool Hope University		4	15	National policy makers and planners: What action should they take. Under the section header 'Ensure the campaign is consistent and sustained. It should convey that physical activity ' - could a point be added that conveys the message that PA has 'health benefits' to reinforce why small lifestyle changes are worthwhile?	Thank you for your comment the PDG considers the wording to be sufficient.
Liverpool Hope University		4	23	Could it be made explicit that any CPD programme for people involved in running physical activity sessions will ensure that individuals maintain up-to-date knowledge on recommendations/initiatives/targets? The list of expectations appears static as oppose to developmental and progressive as it stands.	Thank you for your comment. The focus of recommendation 8 is on the skills required for planning and delivery. This does not mean that knowledge of recommendations/initiatives/targets would not be part of a comprehensive educational programme.
Living Streets		General		Rather than encourage duplication of existing walking promotion schemes, the NICE recommendations should build upon current good practice in the field, such as the <i>Walk to School</i> campaign.	Thank you for your comment.
Living Streets		General		Parents should be more explicitly targeted: their school journey decisions have a massive potential impact upon the everyday physical activity of their children.	Thank you for your comment. the PDG believe this issue is adequately addressed by recommendations 1,5,12&15.
Living Streets		General		Local streets and routes to school need to be as physically attractive to walk and safe as possible if real and sustained school run behaviour change is to be maintained.	Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment. http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983
Living Streets		General			
Living Streets		General		This response from Living Streets focuses on <i>encouraging</i> and <i>enabling</i> more everyday physical activity in children – mostly in the form of walking to and from school.	

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				The response draws both on our extensive experience as coordinators of the National Walk to School campaign, and our knowledge and experience of campaigning for people-friendly (and hence walkable) streets since 1929.	
Living Streets				Living Streets welcomes and supports the draft recommendations. Our interest in promoting more everyday walking means that we have a particular interest in recommendations 1, 2, 3, 4, 5, 11, and 16 (referenced above). We are encouraged to note that there are already many references to walking to school as an ideal way to achieve more physical activity in children.	Thank you for your comment.
Living Streets				Nevertheless, we feel that it is not ambitious enough to encourage walking to school among children living merely within 1 mile from school: 2 miles would be more appropriate in the context of achieving real health benefits. At 3 miles an hour, a 2 mile round trip is a daily walk of 1 hour 20 minutes. This exceeds the current 1 hour of physical activity recommended by government. Naturally, walking pace is a less strenuous form of exercise than that implied in the current “1 hour” guidelines. However, promoting this kind of intervention is likely to be more palatable to those children currently unmotivated by other, more organised physical activity at school. In addition, research has shown that walking to school increases total physical activity by around 9% and the calories expended in walking to and from school exceed those from 2 hours of PE. ⁵ 1 Mackett et al, 2003, for Sustrans	Thank you for your comment. Recommendation 12 now refers to a 2 mile radius.
Living Streets				While recommendation 5 mentions walking buses and walk-to-school days as examples of positive action, these are somewhat generic. We feel that it would be better to encourage wider implementation of existing successful schemes, such as <i>Walk to School</i> and <i>WoW</i> ,	Thank you for your comment. While there is anecdotal evidence about such schemes there is

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				which have a proven track record of success over 13 years, rather than risk individual schools wasting time and money devising their own individual programmes. Additionally, <i>Park and Stride</i> schemes (whereby the parents of children living beyond walking distance are encouraged to park at a designated spot remote from the school gates and walk the final leg of the journey) should be promoted. In this way all families have the option to build walking into the school run. Living Streets provides resources, advice, support and inspiration for all schools interested in becoming involved in these schemes.	limited evaluation in the public domain to indicate that any one scheme is more effective than others. The schemes mentioned are therefore examples of the type of promotional activity that might be undertaken. The recommendations do not preclude schools from using existing schemes. We would welcome your submission of any evaluation reports on your schemes when this guidance is reviewed in the future.
Living Streets				Despite limited funding, the Walk to School campaign is very effective at prompting behavioural change, with a very positive benefit to cost ratio. For example, the “WoW” (Walk Once a Week / Walk on Wednesdays) initiative, which rewards primary school children with special badges for walking to school once a week, has led to modal shift of between 25% and 30% ⁶ . Children themselves are enthused by the scheme, which means that good habits are being formed early in life. 2 Living Streets figures from WoW scheme in Cumbria 2006	Please see previous response.
Living Streets				Moreover it is very good value for money: it costs just £2 per pupil per year. With roughly 4,409,600 primary school age children in England and Wales, it would cost just £8,819,200 to extend WoW to all of England and Wales ⁷ . Therefore, for the average cost of one hospital bed, 45,500 pupils could take part in WoW for one year ⁸ .	Thank you for your comment. We welcome your example of demonstrating value for money. Your example shares many of the problems usually found with trying to apply a monetary cost and putative value to a project where the

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				<p>3Mid-2006 population estimate of children aged 5-11 from www.statistics.gov.uk</p> <p>⁴ Average cost of hospital bed is £91,000 per year. Source: http://www.abpi.org.uk/press/media_briefings_07/health&med_07.pdf</p>	effectiveness remains unknown. However NICE uses standard methods to evaluation the economic case for public health guidance based on the cost per Quality Adjusted Life Year (QALY) gained directly as a result of the intervention. We would welcome your input to future updates of this guidance.
Living Streets				<p>As a first step, subsidising half the cost of WoW for all primary school children <i>in the ten Primary Care Trust areas where childhood obesity rates are highest</i> (and where WoW is not currently operating) would cost a mere £200,000⁹.</p> <p>⁵ Based on mid-2006 population estimates of 197,446 children aged 5-9 in the following local authorities: Newcastle, Sunderland, Halton, St Helens, Manchester, Dudley, Birmingham, Portsmouth, Hartlepool, Wolverhampton, Salford. Source: National Statistics www.statistics.gov.uk</p>	Please see previous response.
Living Streets				<p>Recent research has shown that parents substantially underestimate the amount of physical activity their children take (on average they claimed their offspring took more than two hours exercise a day - while the truth was less than 30 minutes for both boys and girls).¹⁰ Therefore it is essential that parents are both informed and willing to take action to increase their children's exercise levels. The NICE recommendations (particularly recommendation 16) should include guidance for parents – for example in the form of doctor's surgery leaflets, and official correspondence from schools – that explains their responsibilities in achieving sufficient exercise levels in their children. Walking primary school age children to school, and resisting teenage pleas to drive secondary school age children to school, are</p>	Thank you for your comment. The national campaign in recommendation 1 would achieve your suggested targeting of parents, with information being made available though different agencies and media. Please refer to recommendation 1 bullet 2.

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				<p>both key responsibilities in this respect.</p> <p>⁶ Research from the Universities of Glasgow and Newcastle, reported by the BBC in September 2008: http://news.bbc.co.uk/1/hi/health/7603610.stm</p>	
				<p>However, it is not enough merely to encourage more walking. Everyday walking, for the improvement of public health, needs to be <i>enabled</i> with local walking environment as well. We welcome that the draft NICE recommendations recognise this, but believe they can go further.</p> <p>For example, recommendation 2 states that “local transport and school plans are coordinated so that all local journeys can be carried out using of physical activity”. Meanwhile recommendation 4 refers to the role urban planners have to play. Safe and attractive streets help to make walking a natural choice for local journeys, particularly the journey to and from school and for this reason Living Streets suggests an additional bullet point in recommendation 4, as follows:</p> <p>“Liaise with local strategic partnerships to ensure...</p> <p>that, in order to make walking as attractive as possible for the journey to school, local urban planning follows the recommendations of the <i>Manual Streets</i> by maintaining a user hierarchy of pedestrians, cyclists, public transport users, and car drivers, in that order. “</p> <p>For more information on safe routes to schools, see http://www.sustrans.org.uk/default.asp?sID=1094226578046.</p> <p>We would be very happy to discuss further any of the points raised in the response.</p>	<p>Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983</p>
London Regional Public Health Group		2	4	<p>In the 4 years since DH identified 60 minutes of activity a day for children there has been a growing evidence base that children actually need to undertake at least 90 minutes of activity on a daily</p>	<p>Thank you for your comment. Determining the optimal amount of physical activity was not the focus of the</p>

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				basis. The guidance needs recognise this growing evidence base although the existing recommendation is only 60 minutes.	referral from DH. The PDG were aware of a large multinational study suggesting that the minimum amount may need to be increased to reduce cardiovascular risk factors; hence this is covered in consideration 3.3 in the final guidance.
London Regional Public Health Group		3	General	Availability of appropriate information also informs a child or young persons ability to choose to be more active. This included non-contact information such as magazines and the internet, particularly in teenagers	Thank you for your comment. The national campaign in recommendation one would achieve your suggested targeting children and young people with information being available through different agencies and media. Please refer to recommendation 1 bullet 2.
London Regional Public Health Group		Rec 1	15	To complement this work it would be really useful to have a website targeting children / young people which enables them to access more information on the benefits, how to get active, the media campaign and where to get active. Having the opportunity for older children, particularly teenagers as they start to explore their independence to access information directly is really important. Currently there do not seem to be any websites in England which target children and young people and provide information on becoming more active. All information sites tend to focus on the parent, carer, or health care professionals.	Please see above response.
London Regional Public Health Group		Rec 3	18	Across the country many areas now have youth parliaments, rather than just “consulting” with children and young people professionals should be engaging with youth parliaments to lead on identifying need and scoping opportunities. There is a real opportunity here for local services to engage the youth community to inform service development.	Thank you for your comment. In the final guidance it is recommended that Children and young people are involved in the design, planning and delivery of physical activity opportunities.
London Regional Public Health Group		General		We would support a move to include OFSTED as an organisation “who needs to take action”. Schools provide a readily available structure to engage children over the age of 5. Making recommendations applicable to other organisations such as creche’s and family centres is best done through OFSTEAD and therefore it would be helpful to recognise them as an agency that needs to take	Thank you. It is not possible to name all agencies individually, rather the relevant sectors are identified. OFSTED would be included in the groups early years providers and schools and colleges.

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				action in implementing some of this guidance.	
London Regional Public Health Group			5	Target is not complete at end of page	Please accept our apologies for the technical problems with the pdf. version of the draft guidance.
London Regional Public Health Group			6	New National Play Strategy	Thank you for bringing this to our attention. This document was not available at the time of consultation of the draft guidance. it is included in Section 2 of the final guidance.
London Regional Public Health Group			6	Every child matters refer to Be Healthy Framework	Thank you for this comment. The guidance template limits the amount of information that can be included in this section.
London Regional Public Health Group		3.16	11	Children with a learning and physical disability should also be targeted due to low PA levels within these groups.	Thank you for your comment. Children and young people with disabilities have been added to this consideration (3.19 in the final guidance).
London Regional Public Health Group		General		Use of Community Sport and Physical Activity Networks and Sport Englands County Sport Partnerships and the Delivery System for Sport and Physical Activity to act on recommendations	Thank you. It is not possible to name all agencies individually, rather the relevant sectors are identified.
London Regional Public Health Group			20	Town and travel planners to work together when creating areas for play to ensure safe/active travel to and from the area.	Thank you for your comment. In the final guidance bullet 1 of this recommendation includes local play strategies.
London Regional Public Health Group			25	Training of yearly and crèche workers in the delivery of physical activity.	The training recommendations are applicable to all deliverers of physical activity. It is not feasible to mention them all individually.
London Regional Public Health Group		Rec13 and 14	28,29	Inclusion of arts based physical activity e.g. dance	Thank you for your comment. Dance is already included in the first of the recommendations for adolescent girls. Please see bullet 1.
London Regional Public Health Group		Local policy makers	16	Inclusion of public health directors?	Thank you for your comment. Directors of public health have been added to recommendation 2 but are also included in the phrase "Policy makers and planners working in the public,

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					voluntary, community and private sectors.” in recommendation 3.
London Regional Public Health Group		Identification of inactive CYP	18	Recommendation; Development of PA care pathway for CYP. Work with School Nurse Teams/HCPs involved in returns of NCMP data.	Thank you for your comment. No evidence was found about the effect of care pathways and so these are not included in the guidance.
London Regional Public Health Group		Recommendation 9		The word “counselling” to professionals working outside of the health sector does have psychiatric connotations so it may be more appropriate to reference brief interventions on behaviour change rather than counselling	Thank you for your comment. The term ‘counselling’ has been changed to ‘advice’.
London Regional Public Health Group		Recommendation 2		We feel that there should be some reference to the Joint Strategic Needs assessments that are being undertaken by LAs and PCTs to inform the development of services and the commissioning programme.	Thank you for your comment. Joint strategic needs assessments have been added to bullet 1.
London Regional Public Health Group		Recommendation 3		We feel that the recommendation should focus more on community engagement rather than ongoing consultation. Particularly as community engagement supports the sustainability of local programmes and interventions.	Thank you for your comment. The wording has been changed to reflect the process of engagement (‘active involvement’).
Mend Central		General		Considering that this guidance is for NHS and other professionals there appears to be very few recommendations aimed at the NHS	Thank you for your comment. Primary care trusts are part of the target audience for recommendations 2 to 4, 6, 9, and 15 of the final guidance. Page 8 of the final guidance details which recommendations are specific to organisations and groups. They are included were the phrase “public, voluntary, community and private sectors.” occurs e.g. recommendations 3&4. In addition, a listing of recommendations by target audiences has been added to the beginning of the document.
Mend Central		General		There is insufficient focus on the under 5’s where the increase in active play should be aimed at through training parents on how to play with their children.	Thank you for your comment. Early years providers are part of the target audience for recommendations 4, 10, 12, 13, 15 of

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					the final guidance. The involvement of children’s families is referred to in these recommendations.
Mend Central		Recommendation 2	P 17	‘Ensure physical activity initiatives for children and young people are <u>regularly</u> evaluated....’ . What is considered as regularly?	The PDG consider that practitioners should use their professional judgement to decide the frequency of evaluation that is appropriate to their initiative and target population.
Mend Central		Recommendation 3	P 18	‘Identify groups of local children and young people who are likely to be doing less than one hour of moderate-to-vigorous physical activity a day.’ Some guidance on how the Local Authority et al are to identify these children would be very useful.	In the final guidance partners who are likely to have local information are identified.
Mend Central		Recommendation 4	P 19	This recommendation is aimed at Directors of leisure and cultural services, but we should be looking to engage local sports clubs as well.	Local sports clubs are encompassed in bullet 4 of who should take action where the phrase “public, voluntary, community and private sectors.” occurs.
Mend Central		Recommendation 4	P 20	‘The use of non-traditional settings for physical activity is encouraged for example office car parks outside office hours.’ We have concern for health & safety with this particular point. We also feel that this action could encourage anti-social behaviour.	The PDG consider that there is potential for such spaces to be used in a positive manner for a range of activities.
Mend Central		Recommendation 5	P 21	‘Identify any aspect of transport policies which discourages children and young people from using active travel.....’ Whilst there are many good reasons for giving children under 16 a free bus pass, many parents have indicated to us that the free bus pass has encouraged children to take the bus even for one stop as opposed to walk.	Thank you for your comment. This type of concern led to the PDG making this recommendation.
Mend Central		Recommendation 10	P 25	Target population is children aged up to age 11 – the children in this group are of different key stage groups and should be split accordingly as the requirements and methodology would be different for each key stage group.	We acknowledge that key stages 1 and 2 will be different. Practitioners should use their professional judgement to ensure that the facilities, equipment and activities

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					are appropriate to the children's needs.
Mend Central		Recommendation 10	P25	<p>'Ensure children have the opportunity to explore a range of physical activities to help them identify those they can enjoy by themselves and those they can do with friends and family.'</p> <p>We feel it's ok for 5 year olds to explore physical activities and enjoy them by themselves as we want to encourage them to play (which would be a form of physical activity).</p>	Thank you for your comment.
Mend Central		Recommendation 12	P 27	We feel this should be split into the key stages and which should include assistance and guidance on parental involvement.	Please see earlier response re: key stages.
Mend Central		Recommendation 14	P 29	<p>'Encourage those who initially chose not to participate in physical activities to watch.'</p> <p>As this is aimed at practitioners who lead physical activities including teachers we feel that particularly teachers should be encouraging participation in some shape or form even if it is to perhaps create the rules of the game.</p>	Thank you for your comment. This was the intention of the PDG in the phrase "Help them move from gradually from observation to full participation". Practitioners will need to find ways of achieving this that are relevant to the individual.
Mend Central		Recommendation 15	P 29	There is no mention in the recommendation that 2 sessions of physical activity a week should include impact exercise for strengthening bones and muscles.	Thank you for your comment. This has been added to the recommendation.
Mend Central		Recommendation 15	P 30	<p>'Act as a role model by incorporating physical activity</p> <p>This point is more appropriate for older children they do still need to act as a role model for all age groups. However, we feel that parents need to be given guidance on how to act as a role model.</p> <p>Again, parental guidance is needed on how to play with their children.</p>	Thank you for your comment. While we agree that older children can act as role models for younger children, the recommendation arose from evidence about the potential impact of parental physical activity and support for children's physical activity.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		General		It is really good to see that the guidance includes so many references to School Travel Plans and walking and cycling as modes & means of active travel. Very good!	Thank you for your comment.
Merseyside Councils - Local		Public Health Need	7	2010 School Travel Plan target mentioned. However it is a statutory requirement of Local Transport Plans to set a target for mode share	Thank you for your comment. We acknowledge that mode share is a target

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Transport Plan Support Unit/TravelWise Merseyside		and Practice. Active Travel		on journey to school. This outcome based approach is both a more effective measure and a more long term indicator, with current LTPs running to 2011.	for Local Transport Plans, but mode share can occur without an increase in physical activity and so is not the most relevant outcome for this guidance.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Considerations 3.13	11	Economic factors also affect opportunities to be physically active.	Economic factors have been added to this consideration in the final guidance (3.15).
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Considerations 3.17	12	Transition is an ideal 'life change' moment for an active travel intervention.	Thank you for your comment. This consideration has been amended in the final guidance (3.21) and using active travel throughout the school career has been added to recommendation 12 bullet 2.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Section 4 Recommendation 1	16	Convey that physical activity also contributes to independence and choice.	Thank you for your comment. The promotion of independence has been added to the campaign message.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 2	17	Good, mention of STPs and LTPs	Thank you for your comment.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise		Recommendation 3	18	3 rd bullet point of identifying council members, should include Education.	Thank you for your comment. Bullet 3 of recommendation 2 has not been changed in the final guidance, as these were examples and not an exhaustive list.

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Merseyside					
Merseyside Council s- Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 4	20	Planners should ensure cycle storage in new planning applications.	Thank you for your comment. The potential importance of providing of cycle shelters was covered in the considerations section of the recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 5	21	STPs should be mainstreamed into LA activity as they contribute to LAA targets on travel and health.	Thank you for your comment. The PDG are satisfied that this concept is clearly included in bullet one of this recommendation.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 5	21	No reference to LTP target on mode share on journey to school. This is one of the core targets for all LTPs.	Thank you for your comment. This information is more appropriate to Section 2 Public health need and practice; national policy. However, the guidance template limits the amount of information that can be included in this section.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 5	21	Training courses for STAs – specifically???	Thank you for your comment. The PDG are satisfied with the wording of this recommendation.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 5	21	Make reference to Education & Inspections Act – duty to provide information to parents about active travel to school.	Thank you for your comment. The PDG are satisfied with the wording of this recommendation.
Merseyside		Recommendation	25	For both age groups, schools & organisations should encourage	Thank you for your comment. The PDG

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Councils - Local Transport Plan Support Unit/TravelWise Merseyside		ation (9 & 10		active travel to attend school and other physical activity opportunities.	consider that this would be unnecessary repetition and that it is adequately captured in recommendation 12 in the final guidance.
rMerseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 11	26	School Travel Plans should be first on list. They apply to age groups in recommendations 9 and 10 also so need reference there.	Please see above response.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 12	27	Parents and carers should get involved in STPs.	Thank you for your comment. The PDG consider parent and carer involvement is captured in bullet 2 of the final guidance (it is part of the existing guidance referred to) and also in bullet 6 for their involvement in the implementation of the school travel plan.
Merseyside Councils- Local Transport Plan Support Unit/TravelWise Merseyside		Recommendation 13	29	Include cycle training as school based intervention.	Thank you for your comment. Cycle training is included for all children in recommendations 5 and 12 in the final guidance.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Section 5	32	Stated that guidance can help Healthy Schools but no reference to it support to schools and their implementation of STPs.	Thank you for your comment. The guidance template limits the amount of information that can be included in this section.
Merseyside Councils - Local Transport Plan Support Unit/TravelWise		Evidence statement 5.2	60	This section needs to be a bit clearer, it seems to contradict itself. 1 st paragraph says STPs and STAs don't increase walking and cycling but next paragraph refers to specific STP measures and their promotion (which are both supported by STAs) increasing walking and cycling. Local experience in Merseyside shows that STAs are	Thank you for your comment. The evidence cited refers to different lengths of follow-up, although it is acknowledged that the findings appear to be mixed.

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Merseyside				vital to a school's long term STP implementation.	
Merseyside Councils - Local Transport Plan Support Unit/TravelWise Merseyside		Appendix 4, point 4.	68	The Merseyside LTP partnership has conducted extensive market research on travel behaviour, attitudes and motivations which includes work with young people on active travel modes and public transport. Contact us if interested in this or any other aspect of our work and/or for case examples! www.LetsTravelWise.org	Thank you for your response. The evidence reviews were completed in May 2008. The case studies you refer to may be used to inform future updates of the guidance, if they are in the public domain.
National Association of Public Health Observatories/South East Public Health Observatory		General		The document focuses on increasing physically active behaviour but ignores efforts to reduce sedentary activities. There is evidence that 'screen time' is related to obesity and other health indicators. Parents (and others) should be encouraged to reduce time spent sitting, and manufacturers of video games etc encouraged to produce more active alternatives.	The epidemiology review investigated the relationship of sedentary behaviours with activity and health outcomes and did not find a clear link. Please refer to p16/17 of Review 1. Epidemiology review.
National Association of Public Health Observatories/South East Public Health Observatory		General		Also more might be made of the research that shows a strong relationship between time spent outdoors and physical activity among children. Parents should be advised to maximise outdoor time (especially after school) and teachers and others advised to make the most of outdoor space, including not keeping children in during poor weather.	Thank you for your comment. The PDG are satisfied that the recommendations encourage outdoor activity. Perceptions about poor weather are addressed.
National Association of Public Health Observatories/South East Public Health Observatory		Rec 1	15	While it is very encouraging to see a recommendation aimed at central government departments, it is disappointing that this only covers the issue of a campaign. It would be better if this was prefaced by a recommendation for Dept of Health to take strategic leadership for physical activity promotion, including the production of a detailed strategy linking action by all government departments.	Thank you for your comment. In the final guidance the 3 main government departments (DH, DCSF and DCMS) covering children and young people's physical activity are given the lead role.
National Association of Public Health Observatories/South East Public Health Observatory		Rec 1	15	It is positive that the recommendation calls for a campaign to be at least 5 years. Evidence from overseas shows that campaigns need to be long term to have an impact on attitudes and behaviour. But the recommendation does not give any guidance on the scale of the campaign. The VERB campaign in the US (on which this recommendation is based) was a multi-million dollar communications campaign that was at a large enough scale to influence young people and lead to behaviour change. The recommendation as drafted could be said to be achieved if DH focuses on young people and physical	Thank you for your comment. The campaign message as outlined in bullets 3 and 4, bullets 5 and 6 about regional and local dissemination and initiatives indicate the scale of the campaign.

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				activity for one year of the forthcoming <i>for life</i> campaign; any campaign needs to be much larger than that to make a difference.	
National Association of Public Health Observatories/South East Public Health Observatory		Rec 11	26	The phrase 'to use active travel' should be replaced with 'to walk or cycle'.	Thank you for your comment. This wording was chosen as there are other forms of active travel e.g. rollerblading and wheelchair use, that we would not want to exclude.
National Dance Teachers Association		3.5	p.9	Without 'mastery' of fundamental movement skills the opportunities for children to ever be involved in lifetime physical activity will be reduced. Much research points to this in Western Australia http://www.stepspd.com/ Fundamental movement skills should be nurtured in play situations all through the day and the optimum age for mastering these is by the age of 8 years (development of these should be from 4-8 years). The guidance scope p. 3 emphasises this (3 b).	Thank you for your comment.
National Dance Teachers Association		3.14	p.11	See research by JABADAO http://www.jabadao.org/ (Kirklees project etc) regarding parents' and carers' prevention of children's play, their risk-taking, etc. JABADAO emphasise the need for child-led movement play, with 'full bodied' experiences in order to help them develop their brains and nervous systems.	Thank you for your response. The evidence reviews were completed in May 2008. The evidence you refer to may be used to inform future updates of the guidance, if it is in the public domain.
National Dance Teachers Association		Rec. 1, Who should take action?	p. 15	This section could become a good springboard to encourage government to analyse the dominance of core subjects in the primary school. Physical Education and the arts have been marginalised since the National Curriculum was put into place. As children spend a large percentage of their day in school, a review of the current dominance of core subjects should be undertaken. Core subjects should also be taught in a more active and interactive way. The scope indicates that children are more active in the summer. This is not only due to the weather and their inclination to play more outdoors, but it is also because they are not being deactivated in the classroom since they have a long summer holiday where they can	Thank you for your comment. The core curriculum was excluded from this programme of work at the scoping stage.

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				satisfy their spontaneous desire to move.	
National Dance Teachers Association		Rec. 1, line 6	p. 16	'helps develop children's motor skills' – it might be better to rephrase this and say 'can help develop motor skills'. Motor skills do not naturally develop with practice, there should be focused intervention.	Thank you for your comment. The PDG are satisfied with the wording of this recommendation.
National Dance Teachers Association		Rec. 6, What action should they take?	p.22	There is a need to find out their interests, strengths and needs, not merely what they enjoy.	Thank you for your comment. The PDG are satisfied with the wording of this recommendation.
National Dance Teachers Association		Rec. 7, lines 6-7	p.23	'personal development' might need further qualification here: emotional, psychological, physical, social...?	Thank you for your comment. The PDG are satisfied 'personal development' does not require clarification.
National Dance Teachers Association		Rec. 10, What action should they take?, line 5	p.25	'more complex skills' – what are these? They are not stipulated in the National Curriculum activity-based primary PE curriculum.	Thank you for your comment. This has been removed from this recommendation in the final guidance.
National Dance Teachers Association		Rec. 12, lines 1-5	p. 28	This sentence is conceptually confused and needs rewriting. At present it implies that children's motor skills are cycling, playing football and dancing. The whole could be restructured to state: 'they should develop children's motor skills (such as crawling, running, skipping, hopping, climbing or throwing, catching and kicking a ball), and children should also experience more advanced activities such as cycling, playing football and dancing.	Thank you for your comment. The wording in the final guidance has been amended as suggested.
National Dance Teachers Association		Rec. 16, line 7	p. 31	See the website for a good link that might be added: http://www.walktoschool.org.uk/index.php	Thank you, we will pass this information on to our Implementation team for use in the implementation tools that will be published to support the guidance.
National Osteoporosis Society		2	4	Included osteoporosis as an example of chronic conditions.	The PDG reviewed this section and decided to leave this unchanged. However, in the final guidance this paragraph refers to the importance of activities to improve bone health.
National		2	5	PSA 22 appears unfinished	Please accept our apologies for the

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Osteoporosis Society					technical problems with the pdf. version of the draft guidance.
National Osteoporosis Society		3.14	11	Include osteoporosis as an example of conditions associated with lack of activity	The PDG reviewed this section and decided to make this addition.
National Osteoporosis Society		4	14	Include weight bearing exercises e.g. running, skipping, jumping and dancing.	Thank you for you comment. The focus of this recommendation is removing the barriers to and encouraging adolescent girls' participation in physical activity rather than recommending specific activities.
National Union of Teachers				<p>Promoting physical activity, active play and sport for pre-school and school age children in family, pre-school, school and community settings</p> <p>The above consultation which NICE is currently undertaking has been brought to the attention of the National Union of Teachers, which is the largest teachers' organisation in England and Wales.</p> <p>The NUT has long been concerned about the issues raised in the NICE consultation, particularly the importance of healthy lifestyles for young people and their impact on teaching and learning in schools, and also the importance of physical activity and learning through play. Because of the tight deadline of the consultation, I am enclosing Union policy documents which contain the Union's views, which I hope will be helpful in NICE's consideration of these important issues.</p> <p>Please do not hesitate to contact me if you need further clarification on any of the matters raised in our documents. We would, of course, be interested in being kept informed of the outcomes of NICE's deliberations so that we are in a position of informing and advising our members working in schools and pre-school settings across the country.</p> <p>Hard copies received of Time to Play – NUT Play Policy Time to Play – Putting play into practice Healthy Schools- A resource for teachers Growing up in a material world – Charter on Commercialisation</p>	Thank you for sending these documents. NICE welcomes evidence from stakeholders. The timeline for each project, included consultation dates, are determined at the start and posted on the NICE website. In addition, registered stakeholders are given advance notice of upcoming consultations.

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Play England				Play England welcomes the chance to respond to Promoting physical activity, active play and sport for pre-school and school-age children in family, pre-school, school and community settings.	Thank you.
Play England			General comment	It is crucial that play is specifically mentioned as all children and young people play. It is not about ability, or child or parent interest or ability to pay. Play is intrinsic to all children's development.	Thank you for your comment. Play is included in our definition of physical activity on page 6 of the final guidance and is included whenever the term 'physical activity' is used.
Play England			6-7	Under the section on national policy it would be advantageous to mention <i>Fair Play: A consultation on the play strategy</i> . ¹¹ <i>Fair Play</i> outlines government's vision for improving play provision across England. DCSF (2008) <i>Fair Play: A consultation on the play strategy</i> . London: Department for Children, Schools and Families and Department for Culture, Media and Sport.	This document has been added to section 2 of the final guidance.
Play England			8	Page 8 mentions Play England however the explanation is not correct. We would like to see the wording changed to, 'Play England provides advice and support to promote good practice, and works to ensure that the importance of play is recognised by policy makers, planners and the public. Resources include briefing papers, research reports and a Neighbourhood Play Toolkit CD-ROM. Play England also has a contact with Department for Children Schools and Families and Department for Culture Media and Sport to support the governments play pathfinder and playbuilder programmes.'	The wording in the final guidance has been changed as requested.
Play England			10 - 3.8	It would be helpful if it were made explicit (as a separate point) that children require a variety of play provision to meet their physical activity needs, abilities and interests. In some areas, staffed adventure playgrounds are open all year round, free of charge to local children. Elsewhere, outreach playworkers or play rangers ensure that children can play safely in local open spaces. Parks, street corners, playgrounds, football pitches, pavements and open	Thank you for your comment. The PDG have reviewed the wording of their considerations and have decided this should remain unchanged.

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				spaces can also provide room for children to meet and be physically active through play, to establish a world for themselves independent of their parents and to explore the natural and built environment.	
Play England			20 – bullet point one	<p>Bullet point one on page 20 should be extended to state:</p> <p>School facilities are available to children and young people before, during and after the school day, at weekends and during school holidays. These facilities should also be available to public, voluntary and private-sector groups and organisations offering physical activity programmes opportunities for physical active play.</p> <p>Although play is increasingly recognised as an important form of physical activity for children, it is not usually offered through ‘programmes’ but through creating opportunities where children can choose freely what they do. If play is not explicitly mentioned we are concerned it will not be recognised as important by service providers.</p>	Opportunities for physically active play have been added in the final version of the guidance.
Play England			20	<p>On page 20, it would be encouraging if there was two bullet points outlining councils’ responsibilities to improve the environment around where children and young people live and go to schools through ensuring there is sufficient use and informal adult supervision to make it feel safe for children to play outside. Therefore bullet points stating the following should be included:</p> <ul style="list-style-type: none"> • Councils need to support applications for Home Zones and similar concepts, and greater investment in cycling and walking schemes. All new residential developments and regeneration projects should consider children, young people and other residents’ needs for playing, walking and cycling and ensuring public spaces are popular and well used. • Local authorities should be encouraged to implement ‘twenty mph zones’ as one way to help ensure local residential streets and areas feel safer. However, the 20mph must be the maximum speed in residential areas and any 	<p>Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983 which addressed environmental changes to encourage cycling and walking, including speed restrictions and traffic calming. Please note also that other relevant interventions may be covered either in guidance currently under development - Preventing unintentional road injuries among under 15s - and in response to</p>

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				evaluation of 20mph zones must look specifically at the impact these have on the time children and young people spend outside in their local streets and neighbourhoods.	other referrals - transport policies that prioritise walking and cycling.
Play England			20–bullet point four	<p>Bullet point four states that, ‘Spaces and facilities used for physical activity meet or exceed recommended safety standards for design, installation and maintenance. For example, outdoor playgrounds should have areas of shade from the sun and sheltered areas where children can play to reduce the impact of adverse weather.’</p> <p>However, this sends out a contradictory message to current government thinking which suggest that we need to strike the right balance between providing safety and risk. <i>Fair Play</i> states that, ‘Through taking risks whilst playing, children and young people learn how to manage risk – helping them to stay safe.’</p> <p>The bullet point should therefore state, ‘Spaces and facilities used for physical activity meet certain recommended safety standards for design, installation and maintenance. However, when providing spaces for children and young peoples play and leisure we need to strike the right balance between allowing children risk and challenge and ensuring they stay safe. Children and young people need to assess some risks as through taking risks they learn how to manage risk – helping them to stay safe. In addition, outdoor playgrounds should have areas of shade from the sun and sheltered areas where children can play in all weather conditions.’</p>	Thank you for your comment. The PDG consider the wording of the recommendations and decided that this should remain unchanged.
Play England			21 – bullet point one	<p>The follow paragraph should be amended to state:</p> <p>Liaise with the local strategic partnership to ensure local transport, school travel plans and local area play strategies are fully aligned with other local authority plans, which may impact on children and young people’s physical activity. This includes local area agreements.</p>	Local area play strategies have been added to bullet 1 of recommendation 5 in the final guidance.
Play England			21 – bullet point	<p>The follow paragraph should be amended to state:</p> <p>Work with schools to develop, implement and promote school travel</p>	Thank you for your comment. The PDG consider the wording of the recommendations and decided that this

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			four	plans. This may, for example, include mapping safe routes to school, play areas and organising walk- and bike-to-school days, walking buses and cycle training.	should remain unchanged.
Play England			24 – bullet point two	The following paragraph should be amended to state: Develop multi-component activity programmes. These should include: Good quality play space on or near to school site that can be used before, during and after the school day. <i>Fair Play</i> states that the government want, ‘School sites to offer good play opportunities for children in the form of good school playgrounds, playing fields and other facilities to support active and constructive play.’	Thank you for your comment. The PDG consider the wording of the recommendations and decided that this should remain unchanged.
Play England			27	The follow paragraph should be amended to state: Provide a range of indoor and outdoor physical activities for children on a daily basis, which should include free play. In early years setting all activities should be play based as outlined in the Early Years Foundation Stage.	Thank you for your comment. ‘Opportunities for unstructured, spontaneous play’ has been added to recommendation 13, bullet 1 in the final version of the guidance.
Play England			30	This section would be strengthened if it included a bullet point stating the following: <ul style="list-style-type: none"> Ensure that parents and carers are aware of the health benefits of children’s free play and how this can contribute to children achieving a minimum of 60 minutes moderate-to-vigorous physical activity in a day. 	Thank you for your comment. The PDG consider the wording of the recommendations and decided that this should remain unchanged.
Royal College of Nursing		General		The Royal College of Nursing welcomes this document.	

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					Thank you for your comment.
Royal College of Nursing		General		The guidance is comprehensive and seems sensible.	Thank you for your comment.
Royal College of Paediatrics and Child Health		General		This appears to be a good summary, highlighting the lack of evidence in many areas but making sensible, pragmatic recommendations. We believe some of the review documents commissioned during the process are valuable summaries of the available evidence e.g. summaries of the health benefits of physical activity.	Thank you for your comment.
Serco Leisure		General		Suggest the use of smart cards to capture activity levels across boundaries (i.e. school activity and extra curricular) and rewards issued on progress that encourage and reward whole family participation.	Thank you for your comment. No evidence was found that evaluated such an intervention.
Serco Leisure		General		Support clubs to start up more junior sections with funding for coaching courses and rewards for doing so	Thank you for your comment. No evidence was found that evaluated such an intervention.
Serco Leisure		General		Fund NGB coaching officers to go into schools more	Thank you for your comment. No evidence was found that evaluated such an intervention.
Serco Leisure		General		Provide a framework for PCT's to work with leisure centres in a partnership on kids health (such as the MEND programme but fund the facility hire and fitness staff element properly)	Thank you for your comment. Partnership working is a key element of the recommendations.
Serco Leisure		General		Consider capital funding for equipment such as dance mats, community gyms, and then revenue funding to remove the barrier of cost	Thank you for your comment. It is not NICE's remit to address funding issues.
Serco Leisure		3.14	11	Agree that fun is often reduced due to fear of litigation and / or parents fears. Can legislation assist to remove the fear?	Thank you for your comment. The time and financial constraints of guidance production do not allow evaluation of

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					interventions this far back in the causal chain. The evidence reviews were limited to evaluations of interventions reporting physical activity outcomes.
Serco Leisure		Recommendation 2	17	Measures should also include psychological aspects	Thank you for your comment. Psychological aspects are health outcomes.
Serco Leisure		Recommendation 2	18	Agree that it is essential that a senior council member is made champion for children and young people's physical activity.	Thank you for your comment.
Serco Leisure		Recommendation 6	22	'provide well trained staff, well maintained facilities'. Many old leisure facilities are clean and well maintained but are not 'fit for purpose' if the truth is told. A capital programme is required and the BSF [Building Schools for the Future] programme should include provision for enhancing sporting facilities.	Thank you for your comment. The focus of this recommendation is the removal of barriers to children and young people's physical activity.
Serco Leisure		Recommendation 14	30	Publish the current school sport hours being achieved by schools so parents know what their child gets at school and make extra-curricular sessions mandatory (and funded)	Thank you for your comment. The PDG consider the wording of the recommendations and decided that this should remain unchanged. It is not NICE's remit to address funding issues.
Skills Active		General		<p>It is extremely gratifying that the importance of play has been recognised as an essential component of children's physical activity. Play is important in its own right as well as being a precursor to participation in more formal sporting and other physical activities.</p> <p>Although, as the document states, the issue of acceptable risk is outside its remit, physical activities often increase the level of risk, and while in sports this is accepted, in play-based activities it is not. As part of the communications and media work the point needs to be made that adventurous and 'risky' play, such as tree climbing, has great long-term benefits for child development and that it is hypocritical to accept a level of risk and injury in sports but not when children are playing. The benefit to children through the ability of staffed provision such as open access adventure playgrounds and</p>	<p>Thank you for your comment.</p> <p>The PDG consider these points to be made in the considerations section.</p>

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				community play ranger schemes to offer more challenging physical activities could also be highlighted in the media. The overall emphasis on participation and tailoring and offering activities that children and young people want to do is to be commended	Thank you for your comment.
Skills Active		Recommendation 2	21	When children and young people are asked what kind of activities they enjoy, their answers generally focus on play-based and challenging activities, and organisations who provide these services need to be included in the planning process.	Thank you for your comment. The guidance focuses on the need to engage with children in the planning and provision of physical activity opportunities.
Skills Active		Recommendation 7	22	We support the statements regarding the need for sector endorsed skills, and that sessions should be 'inspiring and enjoyable'.	Thank you for your comment.
Skills Active		Recommendation 12	27	In the 'who should take action' section, it would be beneficial to include 'out of school providers', who run settings, including adventure playgrounds, for children not in the early years. 'Early years' covers children up to Aug 5 following their 5 th birthday, so there is a whole 6 years gap in the existing coverage of out-of-school activities who are not primarily 'deliverers of physical activity opportunities'.	Thank you for your comment. These are providers are covered by the phrase "Those providing local opportunities for physical activity in the voluntary, community and private sectors" in the final version of the guidance.
Sportstada		General		As a private sector company we have spent over two researching how we could get young children more active, motivated about and to become involved in Sports. From this extensive research we have designed the world's first portable multi-sports stadium for children. Targeting a mixed gender approach of boys and girls we designed the product around a three-a-side game for Football, Hockey, Basketball, Netball and Cricket. It has already been a huge success and every Primary School in the country should have one. More information is available by visiting us at www.sportstada.com	Thank you for bringing this to our attention. Technical problems were experienced when visiting your website.
Staffordshire County Council		General		We have found a majority of the statements and ideas link directly with the government's initiative on Play which is the Playbuilder and Play pathfinder funding initiatives. These links are namely relating to volunteers, sustainability, consulting with young people to design play spaces.	Thank you for your comment.

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Staffordshire County Council		2.	4.	The statistics are in line with the government's initiative for play. Therefore it can be directly used to link in with the Playbuilder and Pathfinder projects.	Thank you for your comment.
Staffordshire County Council			6.	There needs to be more cycling training and cycling routes offered to schools with funding. Links with Bike It and Sustrans??	Cycle training is recommended in recommendations 5 and 12 in the final guidance.
Staffordshire County Council			6/7	Comment in Every Child Matters paragraph links directly to Play. Playbuilder / Play Pathfinder can be linked into here.	Thank you for your comment. The guidance template limits the amount of information that can be included in this section.
Staffordshire County Council		3.2	9	How is moderate to vigorous measured? Include a table of example activities for each bracket.	The definitions used in the introduction to the recommendations are "Moderate intensity activity increases breathing and heart rates to a level where the pulse can be felt and the person feels warmer. It might make someone sweat on a hot or humid day (or when indoors). Vigorous activity results in being out of breath or sweating."
Staffordshire County Council		3.8	10	Risk and challenge is another direct link to the governments initiative on Play.	Thank you for your comment.
Staffordshire County Council		3.11	10	Direct link into Play concerning the consultation with children and young people to design their own play spaces.	Thank you for your comment.
Staffordshire County Council		3.13	11.	The weather comment is a good point to take and use when designing play spaces. This highlights the need for sheltered areas in play spaces.	Thank you for your comment.
Staffordshire County Council		3.14 / 3.15	11	Comments on parents perceptions of risk are accurate. Training for parents and communities on what acceptable levels of risk are is needed. Possibly need to use the word challenging play rather than risk as it has been stated in previous consultation that some parents are confusing risk taking with experimental risky activities ie drug use. (See Children and Young People now website).	Thank you for your comment. The PDG consider the wording and decided that this should remain unchanged.
Staffordshire County Council		3.16	12	Idea to engage with looked after children in homes etc could be to use play rangers and send them into these places of accommodation	Thank you for your comment.

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				to interact with the youth. They could take them around the area to show them what is available as they may not know. Again, this links in with the ideas of Play.	
Staffordshire County Council		3.20	13	Consultation with young people can give limited responses as they will only answer with what they know eg asking what play equipment they want may result in an answer of swings and slides as this is all they are aware of and not an innovative idea.	Thank you for your comment. Bullet 2 of recommendation 7 in the final guidance mentions practitioners' abilities to raise children's aspirations about the types of activity they can participate in and the level of ability they can achieve.
Staffordshire County Council		Recommendation 2	17	Partnership working with Play Partnerships should be included as well as this feeds into the Children's Trust Board.	The recommendation gives examples of services and organisations that might be included. We would expect pay partnerships to be involved.
Staffordshire County Council			19	"Local authorities should coordinate availability of these spaces and facilities". This comment again already relates to authorities who have been allocated funding to deliver the playbuilder and play pathfinder projects. They are delivering up to 25 play spaces in their areas.	Thank you for your comment.
Staffordshire County Council		Rec. 4	20	Using school facilities outside the school day links into Building Schools for the future agenda, extended schools and Community & Learning Partnerships.	Thank you for your comment.
Staffordshire County Council		Rec. 4	20	Use of non traditional settings for play directly links with the play agenda i.e. citing play spaces around areas of need. This includes, shopping centres, street corners rather than designated "playground areas".	Thank you for your comment.
Staffordshire County Council		Rec. 4	20	Space and facilities paragraph should link directly to Design for Play, DCSF guidance.	Thank you for your comment.
Staffordshire County Council		Rec. 5	21	Transport issues can link in with local Play Partnerships.	Thank you for your comment.
Staffordshire County Council		Rec. 7	23	Mention local colleges, and local authorities for support with Play Training. Could also use Children's centres etc for family learning sessions or confidence building sessions. (Helpful for volunteers).	Thank you for your comment. The PDG consider the wording of this recommendation and decided that this should remain unchanged.
Staffordshire County Council		Rec. 10	25	Provide daily opportunities for.....? What? Sentence incomplete.	Please accept our apologies for the technical problems with the pdf. version

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					of the draft guidance.
Staffordshire County Council		Rec. 11	26	Has safe storage of bikes been thought about in schools and leisure centres etc? More bike sheds may be needed.	Thank you for your comment. NICE has recently published guidance on Physical Activity and the Environment http://www.nice.org.uk/guidance/index.jsp?action=download&o=38983 Appendix D Point 9 identified the lack of evidence about the effect of bike sheds.
Staffordshire County Council		Rec. 15	30	Encourage parents to get active with their children by organising family activity days. Parents can then act as role models.	Organisation of family activity days are covered in recommendation 9 bullet 2. The organisation of such events would occur at the local organisation level not at the practitioner level (recommendations 13 onwards).
Staffordshire County Council		1.	68.	Strongly agree that the document focuses on sport. Evidence on play and how it relates should be collated and included as this is equally important.	Thank you for your comment. We are aware of the importance of play. The evidence on play is much smaller and of lesser quality than that for sport.
Staffordshire County Council		7	69	More consideration should be applied to rural areas instead of focusing on urban areas. Walking buses will be far less achievable in small rural communities due to the spread out nature of housing.	Thank you for your comment. We acknowledge that one initiative will not suit all circumstances. However, some of the schools in the studies that informed this analysis had rural catchment areas.
Sustrans		General		In all recommendations directed at strategic partners such as local authorities, please reiterate that activity based projects operate best in locations where infrastructure changes are also being made to create an environment which promotes physical activity, for example safe routes to schools. We appreciate that separate guidance covers environmental interventions but it is critical that this is considered in parallel.	Thank you for your comment. The PDG consider the wording of these recommendations and decided that they should remain unchanged.
Sustrans		Children and Young People Activity Levels	4	41% of primary school journeys are made by car, and 59% of all journeys to school made by car are under 2 miles. Including these facts reiterates the potential for improving physical activity levels on school journeys (Travel to School – Personal Travel Factsheet, DfT, March 2008 using data from National Travel Survey, 2006)	In the final guidance recommendation 12 bullet 4 of the final guidance the radius for encouraging active travel has been changed to 2 miles.

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Sustrans		Recommendation 2	17	See first comment. Please include reference to the latest Education and Inspections Act which requires local authorities to promote sustainable travel to school (including walking and cycling).	Thank you for your comment. The PDG consider the wording of these recommendations and decided that they should remain unchanged.
Sustrans		Recommendation 4	19	Reference should be made to the importance of locating local play facilities at locations well served by walking and cycling routes.	Thank you for this comment. It has been added to recommendation 4, bullet 5 in the final guidance.
Sustrans		Recommendation 11	26	The document refers to active travel being promoted for journeys under 1 mile. This figure is too low. 86% of journeys to school under 1 mile are already made by active travel modes whereas this figure falls to 49% for journeys between 1 and 2 miles (National Travel Survey, DfT, 2006) Nelson et al report that that walking and cycling journeys are easily achievable for school journeys of up to 2.5 miles for young adolescents (Active Commuting to School – How far is too far?, International Journal of behavioural nutrition and physical activity, Jan 2008)	Please see earlier response.
Sustrans		Recommendation 13	28	It would be helpful to refer to the importance of female role models in promoting physical activity – teachers, outside agencies, sportswomen, etc.	Thank you for your comment. The PDG consider the wording of this recommendation and decided that this should remain unchanged.
The British Dietetic Association		General		The BDA welcomes the public health guidance document to encourage more young people to engage in some kind of physical activity.	Thank you for your comment.
The British Dietetic Association		Recommendation 1	15&16	The BDA welcomes a 5 year national campaign to promote physical activity among children and young people. We would strongly recommend that this campaign focuses on parents and carers as their role is crucial. The issue of sedentary activities such as play stations, computers, TVs etc needs to be addressed. Also in line with or complement the campaign to ensure that local opportunities for participating in physical activity are available and well promoted.	Thank you for your comment. The epidemiology review investigated the relationship of sedentary behaviours with physical activity and health outcomes and did not find a clear link. Please refer to p16/17 of Review 1. Epidemiology review.
The British Dietetic Association		Recommendation		As health care professional, Dietitians will be able to contribute to the	Thank you for your comment.

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Association		ation 15		recommendation 15 - providing an opportunity to provide physical activity advice alongside health eating advice to children and their families	
The British Dietetic Association		Recommendation 13	28 & 29	A lot more local research needed on the barriers to physical activity for young girls. As well as non traditional school based activities, more community based activities need to be provided and promoted. Increase the use of /tap into the media e.g. TV dance programmes to encourage activities among this target group.	Thank you for your comment.
The British Dietetic Association		Recommendation 3 and 4	18,19 and 20	The BDA fully support these two recommendations. A wide range of opportunities and facilities must be available and easily accessible so that young people can participate in physical activities. These two recommendations need to be fully implemented and sufficiently resourced to make an impact.	Thank you for your comment. It is not NICE's remit to address funding issues.
The British Dietetic Association		General		The BDA welcomes this guidance document. Overall we agree with all the key priorities and recommendations. It is very comprehensive and outlines the evidence on why we should be making this issue a top priority. It also recognises that there is evidence lacking so we d reinforce the message that more research or local consultation needs to be carried out.	Thank you for your comment.
The British Dietetic Association			p.17	Please add waist circumference to the health outcome measurements.	Thank you for this comment. In the final version of the guidance no examples are given.
The British Psychological Society		3.1	9	The Society fully endorses this statement.	Thank you for your support.
The British Psychological Society		3	9-12	This highlights the need for psychologists to be involved in the development and delivery of initiatives. For instance, the need for psychological factors and models to be considered in reducing barriers, changing attitudes and ensuring a favourable motivational climate (for example) to increase the efficacy of promotion initiatives.	Thank you for your comment.
The British Psychological Society		3.12	10	Should there be a distinction made between peer pressure and peer support?	Thank you for your comment. This has been changed to 'influence of peers'.

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Stakeholder Organisation	Evidence submitted	Section	Page Number	Comments Please insert each new comment in a new row.	Response Please respond to each comment
Society					
The British Psychological Society		3.21	13	This does not seem like a reasonable excuse, as for instance, recent research has examined Dance Mats and so on, and it would seem that practitioners working in the field should be sufficiently aware of children and young people's current interests to be able to work effectively with them.	Thank you for your comment.
The British Psychological Society		4	15	In addition to the national policy makers and planners, Chartered Sport and Exercise Psychologists and other applied psychologists of the British Psychological Society can make a real impact in terms of research and applied work, especially with regard to long term work examining families and children of different ages and circumstances and their participation in exercise and physical activity. Funding for such longitudinal work would be sought. It may also be worth identifying that physical activity can be done by all, regardless of age, disability, skill level, race, gender etc.	Thank you for your comment. We believe that the guidance makes this clear by referring to the involvement of children and young people from different back grounds, of different ages, with different needs and different levels of ability at various stages through out the document.
The British Psychological Society		4	17	Would it also be worth including monitoring of academic and psychosocial outcomes in these evaluations?	Thank you for your comment. The PDG consider the wording of this consideration and decided that this should remain unchanged.
The British Psychological Society		4	17	Co-ordinating local transport and school travel plans to ensure local journeys involve physical activity may be difficult in rural communities.	Thank you for your comment. We acknowledge that one initiative will need to be adapted suit local circumstances.
The British Psychological Society		4	18	Applied Psychologists can examine the psychological factors involved in exercise and physical activity levels as well as the more sociological aspects of participation.	Thank you for your comment.
The British Psychological Society		4	20	It may also be worth considering including transport provision for children in rural communities to prevent over reliance on parents who may work long hours in farming related jobs.	Pease see previous response about rural areas.
The British Psychological Society		4	28 & 29	In addition to the physical activity preferences of girls and young women, the psychological impact of exercise participation in girls and young women requires in-depth investigation, including what impact	Thank you for your comment.

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				dress regulations for participation have in a climate of 'body beautiful'.	
The British Psychological Society		4	31	Would it be worth including a statement identifying that physical activity could be achieved through active hobbies (e.g., gardening) to encourage those individuals who will never enjoy exercise to increase their physical activity levels?	Thank you for your comment. The PDG consider the wording of this consideration and decided that this should remain unchanged.
The British Psychological Society		Appendix D	68 & 69	Specifically, preventions and encourages to children and young people in physical activity; families and balancing competing issues to physical activity; and long term follow up are all concepts that lend themselves to longitudinal work, since all these aspects are likely to differ throughout changing development and life circumstances. Members of the Society's Division of Sport and Exercise Psychology are keen lead a large project in this domain.	Thank you for your comment.
The Chartered Society of Physiotherapy		General		The CSP welcomes the guidance and it's recommendations and looks forward to seeing the proposed tools to help organisations implement the guidance.	Thank you for your comment.
The Chartered Society of Physiotherapy		General		The document was very readable but it is felt that its impact would be stronger in a different presentation format, perhaps with fewer recommendations presented differently. At the moment and whilst not wishing to criticise the content, 16 recommendations, most with several dimensions and all targeted at different populations becomes a long read rather than a high impact, motivating document.	Thank you for your comment. The PDG reviewed the organisation of the recommendations when finalising the guidance. Recommendation 16 has been incorporated into recommendations 12 and 15, and the order of some recommendations changed. To assist target audiences a schematic representation of the recommendations and listing of recommendations by target audiences has been added to the beginning of the document.
The Chartered Society of		General		It was felt there was a lack of overall reference and/or consideration to children with disabilities (physical and/or learning). It is this section	Thank you for your comment. While there is much evidence about therapeutic

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Physiotherapy				of the young population that experience inequalities in access to physical activity. If it is outside the scope of this guidance to address children with physical and/or learning disabilities, this should be clearly stated in the introduction	interventions for children with disabilities, no evidence was found which fit the scope of this programme; as a result the PDG could not make specific recommendations.
The Chartered Society of Physiotherapy		General		Physiotherapists, as experts in physical activity, should be included in any local decision-making regarding the design and implementation of physical activity programmes.	Thank you for your comment. We would expect this to be achieved through the involvement of children's and primary care trusts.
The Chartered Society of Physiotherapy		2	4	The best way to encourage children to be physically active may differ according to their age, developmental stage, CULTURAL BACKGROUND and gender.	Thank you for your comment. Culture has been added to this section in the final guidance.
The Chartered Society of Physiotherapy		3	11	Point 3.16 does not include reference to children with disabilities (physical and/or learning) and their carers	Thank you for your comment. Disability has been added to this section in the final guidance.
The Chartered Society of Physiotherapy		4	17	Partnerships should be established between local physiotherapists and schools, colleges etc as physiotherapists are able to provide expert advice and support in delivering physical activity interventions.	Thank you for your comment. We would expect this to be achieved through the involvement of children's and primary care trusts.
The Chartered Society of Physiotherapy		16	31	Does not go far enough as it does not include integration of children living with a physical disability into activities. It would be good to see encouragement of education staff inviting health and social care to engage in activity planning for inclusion of disadvantaged children.	In the final version of the guidance recommendation 16 has been incorporated into recommendations 12 and 15.
UCL Institute of Child Health		General		We agree with the broad thrust of the guidance and feel that the recommendations contain clear and practical suggestions useful for policy makers and planners, local organisations and local practitioners for which they have been established. The comments are also clearly reflective of the evidence-base.	Thank you for your comment.
UCL Institute of Child Health		General		We feel that greater emphasis could be placed on 1) incorporating physical activity into everyday life, and 2) reducing opportunities for sedentary activity and helping parents to develop skills to do this.	Thank you for your comment.
UCL Institute of Child Health		General		There is little evidence on tracking of physical activity from childhood to adult life. This should be investigated as it has profound implications for cost effectiveness.	Thank you for your comment. Please see research recommendations in section 5 of the final guidance.
UCL Institute of		Recommend		The importance of consultation with children and young people	In the final guidance bullet 2 of

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Child Health		ation 1		should be emphasised here.	recommendation 1 states “Use research, consult and actively involve children and young people and their parents to determine the best media to use, the most effective messages and the most appropriate language for different groups.”
Yorkshire Play		2	7	The DCSF document “Fair Play” (2008) should be added to the list of current govt policy documents promoting active outdoor play	Thank you for your comment. This document has been added to section 2 of the final guidance.
Yorkshire Play		2	8	Home Zones are not an initiative of the Children’s Play Council / Play England (although they strongly support them), rather they are an initiative of the govt. Department of Transport	Thank you for your comment. This has been corrected in the final version of the guidance.
Yorkshire Play		3	9	We very strongly support para. 3.5, “the focus should be on fun, enjoyment and active participation rather than on mastering rules and complex skills”	Thank you for your comment.
Yorkshire Play		3	11	Para 3.15 – Here and at a number of other points in the guidance, the new publication “Design for Play” (DCSF / DCMS 2008) should be cited as a key reference for design of spaces to promote active play	Thank you for bringing this publication to our attention. The guidance template only allows the inclusion of a selection of the documents available. The NICE Implementation team are working with key stakeholders to identify sources of support for those responsible for implementing the guidance.
Yorkshire Play		3	13	Para 3.21 - Part of the task of practitioners is to extend children’s horizons rather than just responding to expressed wants. Children who have never experienced adventure play are unlikely to ask for it, but all the evidence shows that they grasp it avidly when it is offered to them.	Thank you for your comment. An extra sentence has been added to this consideration (3. 26) and to recommendation 7 to express this.
Yorkshire Play		Recommendation 1	15	The proposed public awareness campaign by government, about the benefits of active play, must address parents’ fears about children’s safety in the public realm if it is to be effective. Exaggerated parental anxiety is one of the major reasons stopping children from playing	Thank you for your comment. An extra bullet has been added to this recommendation 1 to express this.

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				out.	
Yorkshire Play		Rec 1	16	Yorkshire Play would be keen to help in promoting the campaign locally.	Thank you for your comment. The Implementation team will work with key organisations to disseminate and assist with implementation of the guidance.
Yorkshire Play		Recommendation 2	17	Local partnerships must include traffic, highways and planning departments, whose work is crucial to children's ability to play out.	Thank you for your comment. The involvement of the chairs of local strategic partnerships should include these local authority departments.
Yorkshire Play			17	While it's desirable for the effectiveness of physical activity initiatives to be evaluated, it will not be easy to isolate the effects of specific programmes, especially when these involve opportunities for free play – despite the evidence from Prof. Roger Mackett at UCL that play is one of the most effective ways to boost children's physical activity. Measurement has a significant resource cost – who will do the measuring and how will it be funded?	Thank you for your comment. We acknowledge the difficulties involved in measurement.
Yorkshire Play		Recommendation 4	20	An additional action should be identified for parks and open spaces officers: to address the safety concerns that discourage families and children from using parks and open spaces for physical recreation.	Thank you for your comment. Safety has been added to bullet 2 of this recommendation.
Yorkshire Play			20	"Design for Play" (DCSF 2008) should be cited again here in connection with recommended design, installation and maintenance standards for playgrounds.	Please see previous response about this publication.
Yorkshire Play		Recommendation 7	23	Specific qualifications for programme staff should be listed including, where appropriate, professional qualifications in Playwork	Thank you for your comment. Determining the level of qualifications and training is beyond the scope of this guidance.
Yorkshire Play		Recommendation 10	25	Actions for school governors and head teachers should include ensuring that playground supervisory staff receive training in Playwork.	Please see recommendation 7 & 8 which cover training for all persons involved in the planning and delivery of physical activity.
Yorkshire Play		Recommendation 12	28	Actions for practitioners should include taking up opportunities for relevant training including, where appropriate, in Playwork.	Please see above response.
Yorkshire Play		6) Recommendation	33	When this section is written, it should include a recommendation for funding of research into the impact of free play opportunities on	Thank you for your comment.

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		ations for research		children's physical activity. Quantitative evidence in this field is very scanty at present.	
Youth Sport Trust		General		NICE as an organisation is recognised and given credence within the health profession. This is not the case within local authorities, planning, leisure, recreation and schools where NICE is regarded as the drugs sanctioning authority only and of little relevance to their own agendas. The strategy once complete will need to be communicated and sanctioned by other professional bodies to give it authority in other non health areas of work. For example, support and sanction from OFSTED would carry weight within the education sector while the audit commission would have a similar effect with local authorities.	Thank you for your comment. The Implementation team will work with key organisations to disseminate and assist with implementation of the guidance.
Youth Sport Trust		General		Throughout the document there is a lack of reference to the specific needs and therefore guidance needed for young disabled people and the people providing activities and facilities for them.	Thank you for your comment. While there is much evidence about therapeutic interventions for children with disabilities, no evidence was found which fit the scope of this programme; as a result the PDG could not make specific recommendations.
Youth Sport Trust		General		A large number of the recommendations reflect good practice that is already happening in some areas and with some organisations such as schools. While it is worthwhile using the document to try and make good practice standard practice, there needs to be explicit recognition within the recommendations of the work that is already being done in order to avoid alienating the organisations or establishments who are currently doing it.	Thank you for your comment. NICE are aware that the recommendations reflect current best practice but that this practice is not universal.
Youth Sport Trust		General		Need greater consideration of the physical activity needs for support and resources for young disabled people for whom integrated activity session are not necessarily always the most appropriate kind of provision.	Please see above response about disability.
Youth Sport Trust		National Policy	5	Reference to the PESSCL strategy is inappropriate as the most recent government strategy on PE and school sport is the PE, School Sport Strategy for Young People (PESSYP). It is important here to reference the 5 hour offer whereby through the national PSA target young people aged 5-16 are entitled to access 2 hours of high quality	The reference to PESSCL on page 5 of the draft guidance was a historic one in relation to the content of the CMO's 2004 report. It has been removed in the final guidance.

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				PE and 3 hours of school or community sport and 17 to 19 year olds are entitled to 3 hours of PE and sport. PE and school sport can be regarded as physical activity in its broadest sense and as such contribute to the health agenda. However, for activity to contribute towards the PE and sport '5 hour offer' it must be structured, organised and fundamentally active and therefore traditional and popular forms of physical activity such as recreational cycling, cycling for transport or walking cannot count towards the 5 hours. It is recognised however that physical activity does provide a stepping stone into sport and PE for many young people and as such is to be encouraged in schools.	Please accept our apologies for the technical problems with the pdf. version of the draft guidance, which resulted in incomplete quotation of PSA 22 in the consultation document.
Youth Sport Trust		National Policy	6	There should be reference here to the extended services, extended schools agenda which encourages and supports schools to provide childcare, adult education, parenting support programmes, community-based health and social care services, multi-agency behaviour support teams and after-school activities all of which can be used to increase levels of physical activity.	Thank you for these comments. The guidance template limits the amount of information that can be included in this section.
Youth Sport Trust		Non Government Initiatives	8	Youth Sport Trust aims and impact are now far further reaching than the TOPs programmes which while still valuable are a relatively small part of the organisations work. Relevant to this strategy is the work of the Trust in developing and supporting the network of 450 school sport partnerships to increase the quality and quantity of participation in PE and school sport, and to engage under represented groups through innovative programmes such as Girls in Sport, Living for Sport, YoUR Activity, TOP Activity and the Playground to Podium framework for young disabled people.	Thank you for your comment. This section has been amended in the final guidance to include these initiatives.
Youth Sport Trust		3.5	9	Need reference to Older children as well as younger children. Older young people will be encouraged by choice and the opportunity to take on leadership responsibilities and decision making about what activities they undertake, where how and when. The empowerment of young people as volunteers will ensure the most appropriate activities are delivered and increase uptake.	Thank you for your comment. The PDG have reviewed the wording of their considerations and have decided this should remain unchanged.
Youth Sport Trust		3.10	11	Need more explicit reference to the physical activity needs and	Thank you for your comment.

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		onwards		provision of appropriate resources for young disabled people	Consideration 19 has been amended and a new consideration (20) added to address these issues.
Youth Sport Trust		3.19	12	Replacing old physical activities with new ones is not necessarily a limitation as it is important that children and young people are able to try a variety of activities in order to develop good fundamental motor skills and so increase their likelihood of lifelong participation in sport an physical activity.	Thank you for your comment.
Youth Sport Trust		4	14	The definition of physical activity given at the bottom of page 14 needs to come earlier in the document.	Thank you for your comment. In the final guidance the definitions precede the recommendations.
Youth Sport Trust		Recommendation 1	15	The national campaign also needs to convey to parents why they need to support their children in increasing their physical activity levels, i.e it needs to be made relevant to them for example through personalised letters indicating weight issues found through the national child measurement programme.	Thank you for your comment. The campaign message outlined in bullet 3 includes the benefits of physical activity. Bullet 2 states that the most effective messages for different subgroups should be used.
Youth Sport Trust		R 2	17	Should physical activity initiatives be assessed on the basis of BMI? This is an intrusive measurement and may deter some of the most in need of physical activity from taking part.	Thank you for your comment. The final guidance no longer gives examples of methods of evaluation.
Youth Sport Trust		R3	18	What action should they take? The identification of children who are least likely to be doing adequate amounts of physical activity could be supported by the DH stratification data which groups families according to their likelihood to engage in PA and healthy eating as well as addressing the most effective messages to use with them to change behaviour.	Thank you for your comment. This is the type of data it is envisaged should be used. the final guidance suggest organisations that could be involved to assist with identifying this information.
Youth Sport Trust		R5	20	Link School Travel Plans to Healthy School Plans and monitor walking/cycling to school through the Healthy school improvement work.	Thank you for your comment. The Healthy School Programme is referred to in section 2 of the final guidance.
Youth Sport Trust		R6	22	Consultation with young people needs to be regular and on-going with young people being made responsible and accountable for determining and providing some of their own activities eg. Through school or local young peoples councils.	Thank you for your comment. This recommendation states that consultation should be on a regular basis.
Youth Sport Trust		R6	22	Activities should be fun and part of an identified pathway of	Thank you for your comment.

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				opportunities with all promoted exit routes.	
Youth Sport Trust		R6	22	Appropriate facilities with suitable local public transport need to be provided to enable maximum access.	Thank you for your comment. Recommendation 4 focuses on the provision of local opportunities. in the final guidance bullet 5 states that these should be located close to walking and cycling routes.
Youth Sport Trust		R7	22	Who should take action? – Needs to include qualifications and training providers such as Sports Coach UK , Youth Sport Trust, FIA, Dance UK and National Governing Bodies of Sport	Thank you for your comment. Thank you for your comment. The target audience for recommendation 7 is the employers. The potential providers you outline are the target audience for recommendation 8.
Youth Sport Trust		R8	23	Provide physical activity opportunities for young people that can be continued locally in the community into adulthood such as aerobics, step classes, powerwalking, yoga.	Thank you for your comment. We acknowledge the importance of activities that cross settings and can be life long, but this is not applicable to recommendation 8.
Youth Sport Trust		R8	23	Develop specific tailored programmes for young disabled people for whom integrated activity is not always appropriate.	Thank you for your comment. We acknowledge the importance of the ability to develop programmes specifically for those with disabilities. In the final guidance bullet 1 of this recommendation has been reworded to make more explicit the need for training to cover provision for people with special needs.
Youth Sport Trust		R9	24	Develop multi component programmes to include education and coaching to increase awareness of the benefits of physical activity through curriculum delivery	Thank you for your comment. This would be covered in the first point of bullet 1.
Youth Sport Trust		R9	24	Needs the support of DCSF and local authority planners if the environment is to be made more appropriate and supportive of increased physical activity.	Thank you for your comment. The term environment is used here in the context of its wider definition to include social environment as well as physical environment.
Youth Sport Trust		R9	24	If education institutions are to provide this then there needs to be a	Thank you for your comment. Community

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				learning outcome and greater resources to promote and provide physical activity for the wider community. This could be in the form of Community physical activity Development officers	Physical Activity Development Officers would be well placed to be part of these initiatives.
Youth Sport Trust		R10	25	Using fundamental movement skills as well as the foundation curriculum	Thank you for your comment.
Youth Sport Trust		R10	26	Provide opportunities for parents to get involved in supporting and role modelling active lifestyles	Thank you for your comment. The focus of the guidance is children and young people. The evidence reviews did not investigate provision for parents.
Youth Sport Trust		R12	28	Activities should not necessarily be inclusive if targeted activities are more appropriate and would encourage greater participation	Thank you for your comment. We acknowledge there may be instances where targeted provision is required.
Youth Sport Trust		R15	30	Parents also need to be made aware of the health implications for their children of a sedentary lifestyle	Thank you for your comment. It is envisaged that the implications of sedentary lifestyle would be part of the education about the benefits of physical activity.
Youth Sport Trust		R16	30	Need to ensure that those listed in the 'who should take action' category are aware of the opportunities for physical activity available locally.	Thank you for your comment. Recommendation 16 has been subsumed within recommendations 12 and 15 in the final guidance.

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