

Kids in gyms



Guidelines for running physical activity programs for young people in fitness and leisure centres in NSW



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Minister's foreword



A message from the Minister for Tourism and Sport and Recreation

Over the past decade there has been an increasing body of evidence supporting active lifestyles as one of the best investments for individual and community health.

The NSW Department of Tourism, Sport and Recreation aims to get more people, more active, more often – because the research tells us this brings enormous benefits to individuals and to communities in general.

In light of the high and increasing prevalence of childhood obesity, these guidelines for the fitness industry will embrace children participating in gyms in a safe and supervised environment.

Developed by Fitness NSW and the Children's Hospital Institute of Sports Medicine they are a great achievement for the fitness industry and one that opens opportunities for fitness centres and gyms to offer children an environment in which to be physically active that has been traditionally dominated by adults.

Effectively addressing the complex issue of childhood obesity requires a coordinated approach and these guidelines are a great example of the collaboration between industry partners moving towards a common goal.

I support the implementation of these guidelines and believe they are an important step in improving the health of the young people of NSW.

Sandra Nori MP
Minister for Tourism and Sport and Recreation

A message from the Chief Executive, The Children's Hospital at Westmead

The Children's Hospital at Westmead has four roles: caring for sick children; education about child health; research into children's diseases and an advocacy role to promote the health and well being of children and young people. This is why we produced a Charter for Physical Activity and Sport for Children and Youth, a charter which has been adopted extensively throughout Australia. This current publication, written by Dr Robert Parker, Head of Education at The Children's Hospital Institute of Sports Medicine, is a further extension of our advocacy role.



Physical inactivity is a major problem for Australian children. It is one of the main factors leading to the current epidemic of obesity. Physical activity should be fun. It should be safe. It should help children in the development of their social relationships, as well as their physical fitness and it should help establish a pattern of physical activity which continues throughout adult life.

I commend these guidelines. I believe they are an important step in improving the health of our young people, as they will ensure that community fitness and leisure centres will be able to give children and young people, safe, age-appropriate, high quality physical activity programs.

**Professor Kim Oates, AM, MD, MHP, FRCP, FRACP, FRACMA, FAFPHM, DCH
Chief Executive The Children's Hospital at Westmead**



A message from the Chief Executive Officer, Fitness NSW/Fitness Australia

Once again the Australian fitness industry leads the rest of the world!

Health and fitness centre operators have long struggled with the question of access and exercise for young people – and often the simple answer was just “don’t let them in” – no access, no problem. But at the same time we have known that fitness centres in Australia are a unique resource to assist the battle against childhood obesity and to establish healthy and enduring exercise habits, with the resulting reduction in community health care costs and vast improvement in quality of life.

So Fitness NSW was most excited to have the opportunity to partner with CHISM and work closely with an old friend, Dr Robbie Parker and formulate guidelines that could be embraced by fitness centre owners and operators across the state and ultimately across Australia.

Our sincere thanks go to the NSW Department of Tourism, Sport and Recreation and the Active Australia program for their assistance with the grant monies that got this project underway and most importantly to the driving force and motivator, Dr Robbie, for making it happen.

I look forward to the day when young people can access safe and enjoyable programs within most fitness facilities in this state and across Australia and can commence a lifelong addiction to a balanced healthy lifestyle built on a foundation of appropriate exercise.

Ian Grainger
CEO – Fitness NSW/Fitness Australia

Overview of guidelines



These guidelines aim to:

- assist commercial community fitness and leisure centres to provide a wide range of safe and high-quality physical activity programs for healthy children and young adolescents aged five to 16 years
- increase opportunities for children and young adolescents to participate in physical activity programs
- increase the participation rate of children and young adolescents in a wide range of physical activities in safe environments
- enhance business opportunities
- support the *Charter of Physical Activity and Sport for Children and Youth*.

In order to achieve these aims, these guidelines address issues associated with:

- the vulnerability of children and young adolescents
- providing safe environments for conducting physical activities for children and young adolescents
- conducting supervised and unsupervised age-appropriate physical activity programs for children and young adolescents
- providing a wide range of safe and effective physical activity programs for children and young adolescents
- providing appropriate staff supervision of different physical activity programs and centre facilities
- providing appropriate pre-exercise screening procedures for children and young adolescents
- providing centre and staff insurance protection
- providing suitably qualified centre staff to conduct physical activity programs for children and young adolescents.

Introduction

Regular participation in physical activity by children and young adolescents is essential for their optimum growth, development and ongoing health and well being.

Physical activity provides multiple health benefits to children and young adolescents, including psychological well being, reduced symptoms of depression and anxiety and enhanced self-esteem.

When combined with appropriate dietary modifications, physical activity is effective in modifying factors associated with the metabolic syndrome (hypertension, obesity, insulin resistance and impaired blood fat profiles). Weight bearing and strength training activities also promote the skeletal health of young people.

Physical inactivity is the second largest cause of illness in our country and contributes to a wide range of serious diseases including cardiovascular disease, diabetes, overweight and obesity.

These diseases are beginning to appear among children, with childhood overweight and obesity affecting one in four Australian children. In the 10-year period from 1985 to 1995 the level of combined overweight/obesity in Australian children more than doubled, while the level of obesity tripled in all age groups for both boys and girls. The rate of increase in overweight and obesity in Australia appears to be accelerating sharply accompanied by a similar increase in sedentary leisure-time pursuits.

Three major factors are thought to have contributed to the epidemic of childhood overweight and obesity. These are:

- an increase in sedentary behaviours
- a decline in spontaneous and organised physical activity, and
- an increase in the consumption of energy-dense foods and sugary drinks.

Increasing participation in physical activity among children and young adolescents is one strategy that may help curb the predicted increase in childhood overweight and obesity.

Commercial fitness providers are well placed to offer children and young adolescents safe and enjoyable physical activity opportunities. However, because of the vulnerability of young people, specific guidelines are required to maximise their safety and wellbeing while they are attending physical activity programs.

Purpose

These guidelines are to help commercial and community fitness and leisure centres provide a range of safe and high-quality physical activity programs for healthy children and young adolescents aged between five and 16 years. Implicit in this is the intention that centres will increase opportunities for children and young adolescents to participate in physical activity programs, and that more children and young adolescents will participate in such programs as a result.

These guidelines outline the minimum requirements for commercial providers of physical activity programs for children and young adolescents, and are designed to supplement the existing *Fitness NSW Code of Practice for Fitness Centres* and support the *Fitness NSW initiative of One-Million-Members-by-2010*.

The guidelines also support the *Charter of Physical Activity and Sport for Children and Youth*, an initiative developed by The Children's Hospital at Westmead in consultation with over 60 parent and community groups, sporting, fitness and recreational clubs and organisations, professional associations, schools, local and state government organisations and national sporting bodies.

A number of specialised activities for children and young adolescents currently conducted in some fitness and leisure centres are not covered in these guidelines. These include boxing, martial arts, abseiling, climbing, wrestling, ballet and dance classes, yoga and pilates.



Background

An initial draft of the guidelines was developed following a systematic review of the electronic databases, data made available to Fitness NSW and results from a survey of all Fitness NSW members.

Of those who responded to the survey, 74 per cent confirmed that they conducted physical activity programs for children or young adolescents. These programs included general fitness activities; group fitness classes, including circuit weights-based classes; resistance training; dance classes and swim classes. There are currently no industry guidelines about the establishment of such programs.

The survey identified several areas of concern, including the need to:

- establish the minimum age of membership and entry requirements
- define appropriate qualifications for staff involved in physical activity programs for children and young adolescents
- provide a pre-exercise health screening questionnaire for children and young adolescents
- establish safety criteria for the use of equipment by children and young adolescents
- establish appropriate staff to student supervision ratios for different types of exercise programs for children and young adolescents.

The draft guidelines were refined with additional consultation and advice provided by the following groups and organisations: Fitness NSW, the NSW Department of Tourism, Sport and Recreation, NSW Department of Health, Central Coast Health, NSW Department of Education and Training, The Commission for Children and Young People, the Children's Hospital Institute of Sports Medicine, The Children's Hospital at Westmead, Police and Citizens Youth Clubs, NSW Heart Foundation, NSW fitness and leisure centres, training course providers and Recognised Training Organisations, and independent NSW fitness industry representatives.

The guidelines

Risk management plan

All community fitness and leisure centres (hereafter called centres) should have a risk management plan in place that encompasses the safe provision of programs involving children and young adolescents. In adopting these guidelines, those centres that currently have risk management plans should review and update them.

Fitness NSW members can obtain a copy of the Fitness NSW risk management plan from the website at www.fitnessnsw.com.au. Alternatively, centres may find useful information in the manual *It's Your Business: a Guide for Directors of Sport and Recreation Organisations*, produced by the NSW Department of Tourism, Sport and Recreation, which is available at the website at www.dsr.nsw.gov.au.

All members of staff should be aware of the centre's risk management plan and the procedures for implementing the plan. All staff must have read and signed a statement to show that they understand the risk management plan. This statement should then be kept in their personnel folder.

In addition to what is contained in the Fitness NSW risk management plan, a centre's risk management plan for children and young adolescents should include additional sections related to:

- duty of care
- the Working with Children check
- the centre's facility environment
- fitness equipment and children.

Duty of care

Centres have a duty of care to any child or young adolescent who participates in a physical activity program **within that centre**.

Where a centre conducts physical activity programs for children or young adolescents, it is the responsibility of that centre to provide:

- safe and well-maintained facilities and equipment
- qualified fitness professionals to conduct physical activity classes
- supervision in all areas of the centre
- protection against physical, sexual and emotional abuse and neglect from other centre members, participants and staff
- a policy of safe supervision for change rooms for children and adolescents under the age of 18 years.

The centre must have a written policy outlining its duty of care responsibilities. All staff must have read this policy and signed a statement showing that they understand this duty of care. This statement must be kept in their personnel folder.

Centres engaging people in child-related employment have a range of legal responsibilities which are outlined below.



Working with Children check

In centres where child-related activities or services are provided, employers have a range of responsibilities under the Working with Children check. The check helps to reduce the likelihood that unsuitable people will be engaged to work in paid or unpaid roles with children or young adolescents.

Under NSW legislation, it is an offence for a person convicted of particular kinds of offences to apply for, remain in, or undertake paid or unpaid child-related employment. All people entering paid child-related employment must also undergo a series of background checks before they begin their employment.

NSW Department of Tourism, Sport and Recreation administers the Working with Children check on behalf of the NSW fitness industry. All centres and child-related employees (paid, unpaid and volunteers) must meet the relevant requirements of the Working with Children check.

These requirements can be found in Attachment one.

The centre's facility environment

All centres must meet minimum quality standards to ensure the safety of their users. By law, every centre in NSW must comply with the *Occupational Health and Safety Act 2000* (NSW). It is also recommended that all centres comply with the voluntary *NSW Fitness Industry Code of Practice* (NSW Department of Fair Trading, 1998). Clause 39 of the code requires that centres ensure that all exercise areas contain safe working spaces, and that the number of people using any given space does not hinder the safe and effective use of the training equipment used in that space.

Where classes are conducted for children or young adolescents, the exercise environment should be inviting and appropriate, which might be achieved by the use of colour and other appropriate visual stimuli.

Fitness equipment and children

Most resistance training equipment used in centres is designed for adults. Because children's limbs and bodies are substantially shorter than those of adults, the lever systems of such equipment often do not suit children. In addition, machines designed for adults, while offering some level of adjustment, simply do not offer the level of adjustment required to accommodate a child or an adolescent. Children and young adolescents should not use equipment that cannot be suitably adjusted for them, as this could lead to injury.

The use of free weights may also lead to injury in children and young adolescents through improper lifting techniques and lack of adult supervision. Close adult supervision by appropriately qualified staff (see Role of the fitness professional, page 13) is therefore essential when free weights are used by children and/or young adolescents.

Some resistance training equipment specifically designed for use by children may be recommended. Centres that offer physical activity classes for children and young adolescents using resistance weight training or electronic cardiovascular equipment should ensure that all equipment can accommodate the physiological and biomechanical differences between children, adolescents and adults.



Pre-exercise screening and consent procedures

Parents or guardians of children or adolescents under the age of 16 years must complete a pre-exercise questionnaire if their children want to participate in a centre's physical activity program. (Clause 24 of the NSW Fitness Industry Code of Practice indicates that it is compulsory for all consumers who participate in any physical activity program within a centre to complete a pre-exercise screening questionnaire.) All questionnaires completed by parents or guardians on behalf of children and young adolescents must be assessed by a qualified fitness professional (see Role of the fitness professional, page 13) before any type of physical activity program begins at the centre.

The pre-exercise screening questionnaire for children and adolescents under the age of 16 years must include:

- emergency contact details
- medical/health history – if any serious risk factors are identified there must be provision for a medical practitioner to authorise further participation in the relevant activity
- physical activity history – listing type of activity, frequency and intensity
- a disclaimer
- a parent or guardian signature giving authorisation and consent
- a countersignature by the fitness professional or centre official indicating approval.

Attachment two is an example of an Exercise and Physical Activity Readiness Assessment (ExPARA) questionnaire developed by the Children's Hospital Institute of Sports Medicine (CHISM) in association with Fitness NSW.

Privacy

In December 2001, the *National Privacy Act 2001* was introduced in Australia. Under the act, centres are included in the definition of a 'health service provider'. In respect of health service providers and through its 10 national privacy principles, the legislation promotes greater openness between health service providers and consumers regarding the collection, handling and storage of health information.

This includes a general right of access for consumers to their own health records. The act requires health service providers to have documentation available that clearly sets out their policies for the management of personal information. All centres and outsourced contractors must conform to these national privacy principles.

Age of entry and centre membership

The ages at which children and young adolescents may enter or become members of centres will depend on the type of classes or programs available at each centre. Classes or programs are divided into the following categories:

- non-weights-based group fitness classes and use of cardiovascular equipment
- weights-based group fitness classes
- unsupervised resistance training
- other structured or supervised programs.



Non-weights-based group fitness classes and use of cardiovascular equipment

For the purposes of centre membership and the use of centre facilities and services as a centre member, it is recommended that the minimum age of entry to centres be 14 years of age for participation in general non-weights-based group fitness exercise classes, including water-based activities and use of cardiovascular equipment. A pre-exercise screen should be assessed by a qualified member of staff (see Role of the fitness professional, page 13) before the individual concerned begins any exercise program.

Weights-based group fitness classes

For the purposes of centre membership and the use of centre facilities and services as a centre member, it is recommended that the minimum age of entry be 16 years of age for participation in weights-based group fitness classes, including weights-based circuit classes and classes that incorporate boxing type exercises. A pre-exercise screen should be assessed by a qualified member of staff (see Role of the fitness professional, page 13) before the individual concerned begins any exercise program.

Unsupervised resistance training

For the purposes of centre membership and the use of centre facilities and services as a centre member, it is recommended that the minimum age of entry be 16 years of age for participation in unsupervised resistance training. An unsupervised resistance training program should only occur after a pre-exercise screen has been assessed by a qualified member of staff (see Role of the fitness professional, page 13), and an initial resistance training program has been developed and supervised by a suitably qualified member of staff.

Where a centre staff member is placed in a position of one-on-one supervision, or supervises a group fitness class behind closed doors with children or young adolescents, that person is subject to all laws and requirements under the *Child Protection (Prohibited Employment) Act 1998* (NSW) and the *Child Protection (Offenders Registration) Act 2000* (NSW).

Other structured or supervised programs

For participation in other structured or supervised physical activity programs by groups such as those of schools, sports teams, swim classes or junior elite athlete training squads, or other special physical activity programs conducted by a centre and instructed by qualified centre staff or other outsourced qualified fitness professionals (see Role of the fitness professional, page 13), the minimum age of entry to a centre should be at the discretion of the centre. All children and young adolescents under the age of 18 years and participating in other structured or supervised programs (including all school groups) should have a pre-exercise screen assessed by a qualified member of staff before beginning the exercise program.

Restrictions that apply to the minimum age of entry to a centre when a person wishes to participate in other structured or supervised physical activity programs may be influenced by such factors as:

- staff qualifications and availability
- the type and range of physical activity programs that can be offered (such as programs for sporting teams, junior athlete squads, school groups, water-based activities and swim classes)
- space and equipment availability.

Centres must clearly define and display the minimum age of entry for children. Once the minimum age of entry requirement has been defined, the centre must follow these limits strictly for legal liability reasons.



Membership contracts

Normally, it is recommended that parents or guardians sign centre membership contracts entered into by children or young adolescents under the age of 18 years. However, centres may, at their discretion, sign a membership contract directly with an adolescent between 16 and 18 years old. Membership contracts entered into by a child or young adolescent under the age of 16 years must be signed by a parent or guardian.

Casual use of facilities by children and young adolescents

No children or adolescents under the age of 14 years should be admitted into a centre unless they are part of a scheduled program or are participants in:

- a sporting team
- a junior athletic squad
- a school group
- a special physical activity program conducted by the centre
- a water-based or swim class
- other supervised or structured activities.

See Table 1 in Attachment three for a summary of this information.

Staff supervision ratio

Staff to child/adolescent ratios will depend on the type of classes or programs available at each centre and whether centres provide structured programs for outside groups (see Casual use of facilities by children and young adolescents, above). In such cases, staff supervision is categorised as either:

- supervised or structured group fitness classes or
- supervised or structured resistance training programs.

Supervised or structured group fitness classes

For supervised or structured group fitness classes, including weights-based group fitness and circuit weight training classes, it is recommended that the staff to child/adolescent ratio is no more than one centre staff member to 25 students (1:25).

Where supervised or structured group fitness classes are conducted for school-aged groups, a teacher from the school must also be present at all times during the class. The staff to child/adolescent ratio may exceed 1:25 on the proviso that, for each increment of between 1 and 25 school students over the initial class size of 25 students, there is an additional supervising teacher present.



Supervised or structured resistance training programs

For supervised or structured resistance training programs, it is recommended that the staff to child/adolescent ratio not exceed 1:8. Where supervised or structured resistance training is being supervised as part of a school group's activities, a teacher from the school must also be present at all times during the training program.

During supervised or structured physical activity programs for school-aged groups, the role of the fitness professional is to conduct safe exercise programs and the role of the teacher is to maintain general class discipline and control. See Table 2 in Attachment three for a summary of this information.

Insurance

Where a centre is to conduct physical activity programs for children or young adolescents, it must have an insurance package that provides coverage for this special population. Major considerations should be the level of the centre's public liability and professional indemnity insurance cover.

Children and young adolescents who attend a centre as part of a school-based organised activity are covered under the Supplementary Sporting Injuries Benefits Scheme (1984) on the proviso that there is a teacher present at all times during the physical activity session. This scheme covers accidents or injuries that occur during any official school sporting activity or Department of Tourism, Sport and Recreation organised program. This cover includes transportation to and from the centre.

It is recommended that all centres confirm in writing with their respective insurance companies that their public liability and professional indemnity insurance includes cover for physical activity programs for children and young adolescents.

Role of the fitness professional

Fitness professionals who are responsible for conducting physical activity programs for children and young adolescents must:

- obtain the skills and qualifications necessary to lead children's physical activity programs (see below)
- hold current cardiopulmonary resuscitation (CPR) and first aid qualifications
- have had a Working with Children check
- have appropriate insurance.

Staff requirements

Fitness professionals providing a fitness service for children and young adolescents under the age of 16 years in a centre are required to meet the minimum requirements of the NSW fitness industry. These include all of the following:

- a current Fitness Australia registration
- a current CPR and first aid certificate
- successful completion of a relevant Fitness NSW/Fitness Australia-approved course or Unit of Competence at Certificate IV level or its equivalent, and specialising in the area of exercise prescription for special populations – children and young adolescents.



Outsourced contractor organisations

Outsourced contractor organisations that conduct physical activity programs for children and young adolescents in centres should conform to all aspects of these guidelines, particularly in relation to:

- insurance
- pre-exercise screening and consent procedures
- staff supervision
- staff qualifications
- the *National Privacy Act*
- their duty of care, including child protection legislation
- knowledge of the centre's risk management policy and plan.

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Websites

Children's Hospital Institute of Sports Medicine (CHISM)
www.chism.chw.edu.au

Fitness NSW
www.fitnessnsw.com.au

NSW Commission for Children and Young People
www.kids.nsw.gov.au/check

NSW Department of Tourism, Sport and Recreation
www.dsr.nsw.gov.au

Play by the Rules (a South Australian government initiative)
www.playbytherules.net.au

The Office of the Federal Privacy Commissioner
www.privacy.gov.au

Attachment one

Working with Children check requirements

(Commission for Children and Young People 2000)

All centres and child-related employees (paid, unpaid and volunteers) must meet the relevant requirements of the Working with Children check. The Working with Children check *Guidelines for Employers* are available on the Commission for Children and Young People's website at www.kids.nsw.gov.au/check or on NSW Sport and Recreation's website at www.dsr.nsw.gov.au.

The following is a brief summary of the requirements of the Working with Children check. Centres are encouraged to read the guidelines when establishing their responsibilities.

1. It is an offence under the *Child Protection (Prohibited Employment) Act 1998* for a person who has been convicted of a serious sex offence or a registrable offence under the *Child Protection (Offenders Registration) Act 2000*, to apply for, undertake or remain in child-related employment. It is also an offence for a centre or employer to employ a person without first asking him or her to declare whether or not they are a prohibited person. Making a false declaration is also an offence.

All existing employees and preferred applicants for paid and unpaid employment (including volunteers) who are working in or seeking child-related employment must sign a prohibited employment declaration to declare their status. This requirement includes employees and volunteers from interstate while they are involved in child-related employment in New South Wales. Centres must securely file declarations.

If an applicant discloses that he or she is a prohibited person, that person cannot be employed in child-related employment. If an existing employee discloses that she or he is a prohibited person, that person must be removed from child-related employment. Centres are encouraged to find alternative employment for these people where possible.

2. It is mandatory for preferred applicants for paid child-related employment to have background checks conducted on them before they commence employment. These background checks, or employment screening, include checking relevant criminal records, and records of apprehended violence orders and disciplinary proceedings. The checks are conducted through the Working with Children check. This process involves:

- the centre registering with NSW Sport and Recreation to obtain an employer ID number by completing a registration form
- the preferred applicant signing a Working with Children check consent form to enable the screening process. Preferred applicants' records cannot be checked without their consent. Centres must retain signed consent forms and file them securely.
- the centre completing the Working with Children check request form and forwarding this to NSW Sport and Recreation, the approved screening agency for fitness and leisure centres in NSW
- the centre informing the Commission for Children and Young People if it decides not to employ someone as a result of the findings of the Working with Children check by completing a standard form available on the commission's website.

Note: All Working with Children Check forms are available on the websites of the Commission for Children and Young People at www.kids.nsw.gov.au/check and NSW Department of Tourism, Sport and Recreation at www.dsr.nsw.gov.au.

3. The centre must undertake probity checks (for example, by contacting referees) for all applicants. The Working with Children check *Guidelines for Employers* provide information which will assist organisations conducting referee checks.

Attachment two

Exercise and Physical Activity Readiness Assessment of Children and Young Adolescents (ExPARA)*

Important information for parents/guardians

The purpose of this form is to ensure we provide every child and/or adolescent with the highest level of care.

For most children, physical activity provides an opportunity for children and adolescents to have fun and promotes the basis for good health and an enhanced quality of life for the future.

However, there are a small number of children or adolescents who may be at risk when participating in an exercise/physical activity program. We ask therefore that you read and complete this questionnaire carefully and return it to the appropriate staff member in charge. The information contained in this form is confidential and is subject to the laws and regulations contained in the privacy laws enacted in December 2001.

Personal details

Name: _____ DOB: _____ M/F: _____

Height (cm): _____ Weight (kg): _____ BMI: _____

How old was your child as at 1 January this year? _____

Name/s of parent/s or guardian/s: _____

Home Address: _____

Private home contact ph: _____ Work ph: _____ Mobile: _____

Has a GP or specialist referred your child? _____

Doctor's name: _____ Contact ph: _____

If there is an emergency, specify the person who should be contacted and their emergency phone number:

Name: _____ Contact ph: _____

After hours emergency contact ph: _____

Please note: In case of a medical emergency, an ambulance may be used to transport your child to the nearest medical treatment service.



Heart-Lung-Other systems

1. Does your child have, or has your child had:

- a heart condition (please specify) _____
- Cystic Fibrosis _____
- Diabetes (Type I or Type II – please specify) _____
- High blood pressure (specify when last taken) _____
- High cholesterol _____
- Unexplained coughing during or after exercise _____
- Breathing problems or shortness of breath (for example, asthma, emphysema) _____

2. Does your child experience or has your child ever experienced:

- epilepsy or seizures/convulsions _____

If yes, is it at rest or during exercise?

- fainting
- dizzy spells
- heat stroke/heat-related illness
- increased bleeding tendency/haemophilia
- other (please specify) _____

3. Does your child have, or has your child had, an eating disorder?

- Yes No

4. Does your child take any medications for (please name):

- heart problem _____ epilepsy _____
- diabetes _____ Attention Deficit Disorder (ADD) _____
- asthma, breathing problems _____ allergies _____
- blood pressure _____
- other (please specify) _____

4.1 If your child is taking any medication, please state if there are any side effects experienced as a result of taking this medication: _____



Muscle-Bone system

1. In the last six months, has your child had any muscular pain while exercising?

- Yes No

If yes, please explain and indicate where the pain has occurred (eg. 'pain in the back of the right heel' or 'pain on the inside of the right elbow'): _____

1.1 Has a doctor treated this pain?

- Yes No

2. In the last six months, has your child experienced joint pain, or pain in the bones?

- Yes No

If yes, please explain and indicate where the pain has occurred (eg. 'front of right leg' or 'behind my knee bone'): _____

2.1 Has this joint pain, or pain in the bone been treated by a doctor?

- Yes No

2.2 Has your child broken any bones or suffered injury to their bones in the last 12 months?

- Yes No

If yes, please explain where and how the break/injury occurred. _____

Brain-Muscle system

1. Does your child have, or has your child had difficulty/problems with any of the following?

- | | |
|--|---|
| <input type="checkbox"/> vision | <input type="checkbox"/> motor sensory skills |
| <input type="checkbox"/> hearing | <input type="checkbox"/> poor balance/instability |
| <input type="checkbox"/> speech/language | <input type="checkbox"/> sleep apnoea |

2. Has your child ever experienced a brain or spinal injury?

- Yes No

3. Does your child experience difficulty in the skill of:

- climbing up stairs walking down stairs none of the above



Special conditions

1. Does your child use a 'puffer' or 'ventilator' for asthma?

Yes No Not applicable

2. Does your child self-administer insulin for Diabetes?

Yes No Not applicable

3. Does your child have any chronic disability or chronic illness?

Yes No

If yes, please indicate the condition:

Cerebral Palsy Hypermobility
 ADHD Obesity
 Downs Syndrome Intellectual impairment
 Other (please specify): _____

4. Is your child allergic to food, medications, pollens or other allergens or specific environments?

Yes No

If yes, please explain what causes have been identified with this/these allergy/ies: _____

5. Does your child follow a special diet?

Yes No

6. Has your child ever been diagnosed with a nutritional deficiency (such as non-iron deficiency)?

Yes No

If yes, please specify the nutritional deficiency : _____



General health

1. Has your child had surgery in the previous 12 months?

Yes No

2. Are you aware of any medical reason/condition which might prevent your child from participating in an exercise program?

Yes No

If yes, please explain: _____

3. What are your child's favourite hobbies and interests? _____

Informed consent

I hereby acknowledge that:

- The information provided above regarding my child's health is, to the best of my knowledge, correct.
- I will inform you immediately if there are any changes to the information provided above.
- I give permission for my child to commence your physical activity program.

Parent/Guardian signature: _____ Date: _____

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Administration only: Referral to Medical Practitioner

- Child/adolescent has no risk factors >> cleared to participate in physical activity program
- Child/adolescent has one or more Heart-Lung-Other risks >> refer to Medical Practitioner
- Child/adolescent has one or more risks from Muscle-Bone and/or Brain-Muscle systems or Special conditions and General health sections. >> Possibly refer to a Medical Practitioner or appropriate allied health professional**

**Name and title of allied health professional child/adolescent is referred to: _____

Signatures

Parent/Guardian: _____ Fitness professional: _____
Date: _____ Date: _____

Attachment three

Summary of eligibility requirements and staff:child/adolescent ratios

Table 1 Eligibility requirements by age

Age of child/young adolescent	Eligibility requirements
16–17 years	<ul style="list-style-type: none">■ Eligible for centre membership■ Normally parent/guardian signature on membership contract required but may be left to discretion of centre■ Must complete pre-exercise screen questionnaire prior to commencement of any program■ Parent/guardian signature on questionnaire left to discretion of centre■ Can use centre facilities as casual member (where appropriate)■ Eligible to participate in:<ul style="list-style-type: none">– non-weights-based group fitness classes– water-based classes– weights-based group fitness classes (including circuits and boxing type exercises)■ Eligible to participate in unsupervised resistance training on provisos that:<ul style="list-style-type: none">– pre-exercise screen has been assessed by qualified staff member– an initial resistance training program has been written and is to be supervised by a qualified member of staff.■ Eligible to use cardiovascular equipment unsupervised
14–15 years	<ul style="list-style-type: none">■ Eligible for centre membership■ Parent/guardian must sign membership contract■ Must complete pre-exercise screen questionnaire prior to commencement of any program■ Parent/guardian must sign questionnaire on behalf of young adolescent■ Can use centre facilities as casual member (where appropriate) without parent/guardian supervision■ Eligible to participate in:<ul style="list-style-type: none">– non-weights-based group fitness classes– water-based classes■ Eligible to use cardiovascular equipment unsupervised■ May participate in structured or supervised group activities determined at discretion of centre■ Not eligible to participate in unsupervised resistance training or weights-based group fitness classes (including circuits and boxing type exercises)



12–13 years

- Not eligible for centre membership
- Must complete pre-exercise screen questionnaire prior to commencement of any program
- Parent/guardian must sign questionnaire on behalf of child/young adolescent
- May participate in structured or supervised group activities determined at discretion of centre
- Not eligible to participate in unsupervised resistance training or weights-based group fitness classes (including circuits and boxing type exercises)
- Not eligible to use cardiovascular equipment unsupervised

Under 12 years

- Not eligible for centre membership
- Must complete pre-exercise screen questionnaire prior to commencement of any program
- Parent/guardian must sign questionnaire on behalf of child/young adolescent
- May participate in structured or supervised group activities determined at discretion of centre
- Not eligible to participate in unsupervised resistance training or weights-based group fitness classes (including circuits and boxing type exercises)
- Not eligible to use cardiovascular equipment unsupervised

Table 2 Recommended staff/child ratios for structured or supervised programs conducted in centres

Staff/child ratio	Structured/supervised programs
1:25*†	Conducting structured or supervised group fitness classes (including non-weights-based and weights-based group fitness classes and circuit weight training classes).
1:8*	Conducting supervised or structured resistance training.

*For school groups, a teacher must be present at all times in addition to the instructor.

†Ratio may exceed 1:25 on proviso that for each increment of between 1 and 25 students, there must be one (1) additional class teacher present.