







# Table of contents

Foreword2
Introduction       3         Background       3         Objectives       3         Definition of children/child       3
How to use these guidelines
The Guidelines       5         Overview of the guidelines       5         Structure of the guidelines       5         (1) Risk management       6         (2) Legal and contractual issues       7         (3) Pre-screening       8         (4) Qualifications of staff       9         (5) Activities, age and staff supervision rates       11
Appendices





# **Foreword**

Physical activity is well recognised as an important element in the development of children, not only in helping them to develop the physical skills and habits used into adulthood, but also in helping their social development. Additionally, obesity in children is becoming more prevalent, and physical activity is a simple and cost effective way to help overcome such health issues.

Unfortunately, many exercise facilities that could provide programmes and activities suitable for children, do not. Others may provide activities that are not aligned to children's development needs. One of the most significant barriers to the provision of programmes and/or access for children, is that prior to the development of these guidelines there was little easily available information regarding the type of activities children should undertake, nor any guidance as to other factors such as supervision ratios or staff training. In attempting to ensure the safety of participants, many exercise facilities have set up policies that simply prohibit children. While this may provide safety for participants, it nevertheless limits children's access to exercise facilities and also results in facilities that would otherwise be suitable for children going un-utilised.

In 2006 Fitness New Zealand approached a number of organisations with an interest in this area (including ACC, SPARC and the Office of the Children's Commissioner) with a view to developing a set of guidelines for exercise facilities that wish persons 6 to 16 years of age to use their facilities or programmes. Dr Robbie Parker (from the Children's Hospital Institute of Sports Medicine (CHISM), Sydney) who has expertise in the area of exercise for children and was also the lead person in developing similar guidelines for use in Australia, chaired the NZ steering group.

The purpose of the process was to develop a clear set of guidelines, for use by exercise facilities offering access to children, that cover both the type of activities children should undertake, as well as other factors unique to having children within a facility (including supervision ratios, privacy policies etc).

The guidelines are intended to apply to structured group use (such as by schools visiting an off site exercise facility), ongoing membership/programmes, or a single facility visit by a child. While schools may find some elements of the guidelines useful when developing physical activity programmes within school premises, they are not intended for this purpose, as this area is rightfully the domain of the school/Ministry of Education.

As with all guidelines, they should be viewed as a living document open to review so as to meet changing needs within the operating environment. Periodic reviews will ensure they continue to meet the needs of children while also reflecting the environment in which exercise professionals and facilities operate.

Perhaps most importantly, and something that at times can get lost in any message, is that physical activity and exercise for children should be strongly encouraged, since it is a natural and highly enjoyable part of most children's development. Whatever it is called – exercise, sport or just "play", enjoyment is crucial in helping children to form positive habits and to view physical activity as normal and desirable. The more we can all help children to form a positive relationship with physical activity, the more likely we will have a more physically active nation, of all ages.

# Introduction



# Background and other related documents

This document, the *Guidelines for Children in Exercise Facilities* is designed to be used by exercise professionals and exercise facilities when developing and implementing physical activity programmes for children within exercise facilities.

In addition to these guidelines there are two other related documents:

- Children in Exercise Facilities Documentation of the Development of the Guidelines (or the Development Document) which outlines in detail how the guidelines were developed.
- 2. **Children in Exercise Facilities A parents' guide**, is a one page guide summarising the key elements of the guidelines from a parent's perspective. A sample copy is included in appendix 4.

Both these documents are available from FitnessNZ, details of which can be found on the back page of these guidelines.

# **Objectives**

The objective of this document is to communicate the recommended Guidelines for Children in Exercise Facilities. This document is intended to be read by a person with an understanding of general exercise terms and the principles of exercise.

#### Definition of children/child

For the purposes of these guidelines, the term *children* or *child* applies to individuals aged 6 to 16 years of age, inclusive. There are also additional notes for those 17 and 18 years of age where this is relevant.

Children under 6 years of age are not covered at all by these guidelines, and instead are covered by the Ministry of Education guidelines related to early childhood education and care.

Exercise facilities and/or individuals dealing with 17 and 18 year olds who also possess a physical development age of 17+, only require the same training as they would for dealing with adults (i.e. they do not need additional specialised training to deal with this age range).

# How to use these guidelines

# **Best practice guidelines**

This document outlines best practice guidelines for dealing with children in exercise facilities. These guidelines take into account that the nature of exercise is unique to each individual, and it is expected that individuals and facilities using these guidelines will apply this approach also. Because certain activities may not be suitable for everyone, there is the ability to, and the requirement of, personalisation of physical activities for individual children within these guidelines.

It is recommended these guidelines be used whenever an exercise facility has any children using its facilities, whether on a casual basis, as a member, or as a visiting school group.

These guidelines have been written in conjunction with experts in their applicable fields, and have industry support. If there is a complaint or accident about safety issues, Occupational Safety & Health (OSH) may choose to consider this document as *Industry Best Practice* and may enquire if it was being followed if an incident occurs.

While it is intended that these guidelines are read by a person with general exercise knowledge, a glossary of terms outlining how they are used in this document is contained on pages 19 and 20.

# Scope of guidelines

The guidelines are designed specifically for children visiting fitness and exercise facilities. They exclude outdoor recreation, sports or pool related activities, and exercise facilities that are provided on school grounds and only open to students.

While these guidelines may be useful for schools in developing physical activity programmes, they are not specifically designed for this purpose. They are relevant however, where schools take their students to external exercise facilities which are following these guidelines.



# The guidelines

# Overview of the guidelines

The following pages detail the guidelines for children in exercise facilities in New Zealand.

These guidelines were developed to ensure children are safe when exercising, and to give some guidance as to the type of recommended activities children of various ages should undertake, along with supervision ratios.

Qualifications and ongoing checks of all persons involved in prescribing/demonstrating or otherwise supervising children in exercise facilities is crucial. It is strongly recommended that all individuals doing so should be registered with the New Zealand Register of Exercise Professionals (REPs). REPs will develop a special registration sub-category for this purpose, one which will include an annual police check.

While intended to assist facilities and individuals when developing exercise programmes for children, these guidelines are not intended to be prescriptive. The intention is to outline all of the key areas, and provide guidance on items to be considered.

# Structure of the guidelines

The Guidelines for Children in Exercise Facilities have been broken down into five main areas:

- 1. Risk Management
- 2. Legal and Contractual issues
- 3. Pre-Screening
- 4. Qualifications of staff
- 5 Activities, age and supervision ratios

Sections 1 to 3 primarily focus on exercise facilities and their policies. Section 4 focuses on the staff involved in the delivery of any exercise programme, while section 5 focuses on suitable activities children should undertake, as well as applicable supervision levels.

# (1) Risk management

# The care and protection of children while at an exercise facility

Any facility that allows children access to exercise facilities should have adequate systems for facility risk management, as well as robust systems to ensure staff are trained in relevant areas.

Specifically, the following policies and practices should be in place:

- A documented health & safety policy that considers areas children may be able to access, along with any unique risks these areas may pose. The Occupational Health and Safety section of the Department of Labour has many resources to help develop such policies (www.osh.dol.govt.nz). An adequate level of first aid cover must be on site at all times. As an absolute minimum, at least one person trained in comprehensive first aid must be on site at all times
- A policy on how to report suspected child abuse, and to whom this abuse should be reported.
   Such reports must be documented.
- Consideration of all factors related to having children on the premises, including signage (of both access rules, and the rights/obligations of visitors to the facility) as well as how to restrict children's access to certain areas of the facility where necessary.
- A log of any special conditions (medical, psychological or developmental) of any children on the premises should be kept. This log should be provided to any persons involved in delivering exercise to these children.
- A documented and thorough privacy policy that respects the right of children to the privacy
  of their information while also ensuring parents/guardians have access to information on their
  child's development.
- A robust audit process to ensure these guidelines are followed, specifically, but not limited to:
  - REPs registration of exercise professionals at the correct level (including a police check)
  - Staff training for identification and reporting of suspected child abuse.

This is not a comprehensive list of all risk management practices that a facility should have, rather it identifies additional areas that should be considered as a result of having children on site.

Each facility should develop its own practices and policies that include the above points, taking the unique situation at each facility into consideration. For example, if there is a pool on site<sup>1</sup>, the facility must consider whether there are any extra requirements to ensure children cannot access this area without supervision (note these requirements may be above and beyond the normal practises for adults). Facilities should also be very mindful of areas or practices that may be regarded as low risk for adults, but high risk for children, for example electrical power points.

<sup>&</sup>lt;sup>1</sup> For more information on pools, please refer to the Water Safety Council (www.watersaftey.org.nz) and The New Zealand Recreation Association (www.nzrecreation.org.nz). Specifically, the **Pool Alone Policy** and Water Safety Council's resources page **Pool Safe** and **Under 5 WaterWise** sections.

# (2) Legal and contractual issues

# Membership agreements and privacy issues for children

# Membership contract issues

Facilities must be mindful of all relevant consumer law, as well as laws specific to minors (those under the age of 18 years). The fitness industry has best practice guidelines covering membership agreements with minors, which have been developed by FitnessNZ. It is recommended that these industry guidelines be followed. Specifically:

### Persons under the age of 16

- No person under the age of 16 years of age may join on any membership agreement that involves payment over time, nor may they agree to any payment for services in the future via an agreement unless written permission is obtained by the persons parent or quardian.
- A person under the age of 16 years must have a person over the age of 18 guarantee any payments.

# Persons aged 16 or 17 years

- Persons aged16 or 17 years of age may enter into a written membership agreement, including
  payment over time, as long as additional steps have been taken to ensure the minor fully
  understands the nature of the agreement AND the payments required are affordable to the
  minor. Specifically the facility should:
  - Ensure the minor has the financial means to make payments under the agreement, and is likely to have for the foreseeable future.
  - Ask a series of written questions that the minor must answer in full (i.e. not tick boxes)
    whereby they show their full understanding of what they are agreeing to, especially any
    minimum non cancellable term, and payments/frequency.
  - Document the above processes and ensure they are completed and signed by the minor.
  - Be given the opportunity to obtain parental consent before proceeding with any membership contract. This step should be recorded in writing.
- It is advisable to set the maximum length of term a minor may enter into a payment agreement at 12 months.

# **Privacy**

New Zealand privacy law is very clear that in normal events, any personal information held must not be disclosed to third parties without permission. Any forms used in the collection of data must state what their purpose is, who the information will be used by, and under what circumstances it will be passed on to third parties (e.g. medical emergencies/promotion etc).

As a person under the age of 16 years cannot have a written agreement enforced against them (except in exceptional circumstances), having a child "sign" their privacy rights away is unenforceable.

There is no provision within NZ privacy law for parents to sign on behalf of a child to give away any of the child's privacy rights. In all cases, full privacy law applies to children, including protecting their information and the right of a person to view and correct any information held about them.

Parents and legal guardians do NOT have an automatic right to obtain information on their children if this would breach the Privacy Act (unfortunately the act makes no distinction between parents and adults). However common sense must be applied as to what information can be reasonably given to a parent/quardian.

The facility also should have a verification process that ensures only parents/guardians are given information on children's whereabouts. This avoids situations where by the facility may inadvertently put the child at risk by disclosing this to an inappropriate person.

# (3) Pre-screening

# Ensuring there is adequate knowledge of any children's special needs

Pre-screening is compulsory for any person under 16 years of age taking part in physical activity programmes. In addition:

- An appointed school representative can bring children to a facility; however **in all cases the parents must have completed a pre-screening form.**
- Any pre-screening form should:
  - include the standard Physical Activity Readiness Questionnaire (PAR-Q) questions, plus emergency contact details (e.g. parent/quardians)
  - be no more than two A4 pages in length (the shorter version for single visits should be no more than one A4 page in length).
  - include consent for obtaining medical help in emergencies
  - be completed and signed by the parent/guardian of the child

Reviewing pre-screening forms

- (1) If no issues are identified on the pre-screening forms then the child may enter the facility.
- (2) If there are ANY issues on the pre-screening form, the form must be reviewed by an appropriately qualified person (see item 4 on Qualifications) to determine the individual's suitability to exercise, along with/or any restrictions on their activities and/or to obtain medical clearance from a relevant medical professional before proceeding further.

There are sample pre-screening forms in appendices two and three.

### (4) Qualifications of staff

# Ensuring only qualified and suitable persons deal with children

Any person working with children in an exercise capacity should meet the existing industry standards plus have completed a module specifically dealing with the unique needs of children.

Note: The industry standard for exercise professionals is registration with the NZ Register of Exercise Professionals (REPs). There are two distinct groups affected by this: group exercise instructors and gym instructors (referred to as "Exercise Consultant Level II" by REPs).

Specific competencies/requirements to work with children in an exercise capacity are:

- 1. The ability to identify common medical and behavioural conditions that children may have and their effects on exercise needs / restrictions.
- 2. Completed training that includes an understanding of:
  - Physiology and Growth
    - Physiological changes of Growth
    - Development and Maturation (inc Chronological vs. Biological Age)
    - Physiological responses of children to exercise (acute and chronic).
  - · Application of Training Principles
    - Appropriate training activities
    - Programming principles
    - Emphasis on long-term abilities, benefits, and adherence to an active lifestyle.
  - Assessment/Exercise Testing
    - Appropriate assessment types.
    - Application of results to training activities and programming.
  - Coaching and communicating with specific reference to children
  - Influences on Physical Activity
    - May include environment, family, peers, motivation, competence, prior experience, access to grounds/facilities...
  - · Common Medical Conditions
    - Understanding of common conditions
    - Effects of those on exercise recommendations/restrictions.
  - Behaviour Management
    - Prevention of common behaviour issues (may include establishing expectations and facility etiquette, set-up and structure of session, rapport with instructor & communication skills
    - Managing common behavioural issues (may include confidence, motivation, peer influence).
    - Understanding common behavioural disorders (e.g. ADHD) and strategies for managing them.
  - Child Protection
    - Identification of children at risk, and process for reporting

- 3. The ability to apply one's knowledge of items 1 and 2 and suitable activities for children, to recognise children's limitations and to develop lesson plans for groups and team activities, all with a long term benefits focus.
- 4. In addition, the ability to recognise potential signs of child abuse and take appropriate action if suspected. All exercise professionals operating at the Exercise Consultant Level II capacity must also be able to:
- 5. Use gym equipment as applied to 1-2 and have the ability to personally prescribe exercise to individual children.

A person who meets the above criteria can register with REPs as Registered to work with Children (this is to differentiate those that have undertaken additional training from those that have not).

Note: Any person wishing to register with REPs in the capacity of working with children must also agree to REPs obtaining a Police vetting report, and successfully pass any such vetting. Such vetting with be repeated annually as a part of registration with REPs for those that wish to work with children

# Distinction between group exercise instructor and gym instructor

It is important to understand the key distinction between the role of a Group Exercise Instructor and that of a Gym Instructor, and for each to stay within their normal scope of practice.

**Group Exercise:** This role covers all group based physical activity programmes, and may involve the use of light hand weights, skipping ropes, medicine balls etc. Any activities that involve fixed machine weights equipment, or reviewing pre-screening forms, should be undertaken by a Gym Instructor.

**Gym Instructor:** This role covers use of exercise equipment including machine weights, in either a circuit or one on one setting. A gym instructor is also able to review pre-screening forms.

In all cases the individuals should be registered with REPs at the appropriate level, being either **Registered for Children at the Group Exercise Level** (For Group Exercise Instructors), or Registered for **Children at the Exercise Consultant Level** (for Gym Instructors).

# (5) Activities, age and staff supervision rates

# Activities, supervision ratios and restrictions for various age groups

Activities must be appropriate to the age of participants, with regard to the individual's chronological and physical developmental age. Consideration should also be given to whether specific equipment, designed for children or not, is included in this determination.

In addition to chronological age, the following factors should also be taken into account when determining appropriate activities:

- · height
- weight/size
- prior experience / current physical activity level
- physical development age
- · readiness and motivational state of the child

### Age restricted activities

Please see the following page for a chart of restrictions when dealing with those under 16.

# 17 and 18 year olds

People dealing with children in this age range do not need additional training, as this age range can be treated as adults for the purpose of prescribing exercise, although still bearing in mind their physical development age. If the identified physical development age is significantly lower (for any reason, be it disability, immaturity, physical immaturity) these factors should also be taken into account before engaging in any activities.



	Specific guidelines for
	Children aged 6-8 years
Recommended activities for all children	<ul> <li>Group games, team challenges, partner activities.</li> <li>All-round development including running, jumping, throwing, passing, catching, agility, balance, rotation, and climbing.</li> </ul>
Age specific recommended activities	Those listed above recommended for all children
Restricted activities	<b>No weight training machines.</b> No <b>free weights</b> with the intent to increase loading. No <b>cardio-vascular machines</b> of an <b>adult design</b> .
Supervision ratio for multi station/ gym based	Not applicable (not a recommended activity)
Supervision ratios for group exercise	One Instructor to 15 – 30 children
Notes for supervision ratios	In all cases the lower number (e.g. 1 instructor for 5 children for multi station/gym based) is suitable for: Younger and/or less experienced children, where no other adults are present, with multiple activities at the same time
Membership eligibility	Only with parental consent and guarantee for any future payment.
Pre-screening requirements	Compulsory for all children under 16
Supervision person registered with REPs	Compulsory for all children under 16

# children based on age

Children aged 9-12 years	Children aged 13-16 years
9-12 years	13-16 years

- Cardiovascular and coordination based activities.
- Body weight strength training and training equipment (e.g. medicine balls, balance boards) with variety and emphasis on technique.

All activities suitable for 6-8 year olds and in addition		
can include strength training using light free weights.		
Should involve multi-joint activities and use of major		
muscle groups, with emphasis		
on technique.		

All activities for 9-12 year olds, and in addition, depending on individual's size, can use equipment of an *adult design* as long as the equipment size is suitable for the individual(s). Can progressively increase loads when technique is mastered.

No weight training machines. Weight of any free weights must not increase over time.

No cardio-vascular machines of an adult design.

No *weight training* machines designed for adults. No *cardio-vascular machines of an adult design* if machines are too large or complex.

One instructor to 5–15 children

One Instructor to 15 – 30 children

(the more activities the lower the ratio) . The higher number (e.g. 1 instructor for 15 children for multi station/gym based) is suitable for children at the older end of the age range, experienced in the activities, with other adults present, instructor led activities (i.e. do as I do) or a limited number of activities undertaken in small groups.

Only with parental consent and guarantee for any future payment.

Those aged up to 15 require parental consent (and guarantee for any payment). 16 year olds may join without parental consent.

Compulsory for all children under 16

Compulsory for all children under 16

# **Appendices**

# Appendix 1: Check list

Key areas to review before implementing any programme for children in exercise facilities are:

- (1) Risk Management system in place
- (2) Review and revise membership rules in relation to age/consent etc
- (3) Usage policy any age restriction clauses Set hours of use, other restrictions. Special memberships for children?
- (4) Staff trained and registered as per the requirements in section 4
- (5) Suitable staff member on duty at all times children can/are allowed to visit the facility
- (6) Review recommended activities list
- (7) Train reception staff regarding the facility's "Children in the Facility" policy

#### Need assistance?

FitnessNZ members may contact FitnessNZ for assistance regarding the above list, including:

- Membership Contracts for 16/17 year olds
- · Minors Forms
- Payment Guarantee forms for Children.
- · Advice on where to find information about Risk Management

These forms may either be free or at a minimal cost depending on your membership type.

If you are not a member of Fitness New Zealand and would like information on how to become a member please call us on 0800 66 88 11 or email fnz@fitnessnz.co.nz



# Appendix 2: Sample pre-screening form (short one page version)

For most children physical activity provides a basis for good health and an enhanced quality of life for the future. However there are a small number of children who may be at risk when exercising and for this reason we ask that you complete this form so that we may give your child the highest level of care possible. All information you give us remains confidential.

Name:	DOB:	Age in Yrs: Months:	
Names of parents or guardians:			
Home address:	Home ph:		
E-mail address:			
In case of emergency ( Parents' mobiles and one ot	her contact if poss	ible)	
ICE 1 Name	Name Numbers:		
ICE 2 Name	Numbers:		
Please note that in the case of a medical emergency, your child may be transported to the nearest medical treatment service.			
In the last 12 months has your child had any musc	ular, joint or bone	pain while exercising? (please give details)	
	No/Yes	Details	
Muscular, joint or bone pain or injury?			
Has your child had surgery or been hospitalised in the last 12 months?			
Does your child suffer from or take any medicati	ons for the follow	ving? (please give details)	
	No/Yes	Details	
A heart condition			
Diabetes - Type I or II			
Asthma			
Epilepsy			
Other			
Is there any reason preventing or affecting your child's participation in exercise?  O Yes  O No			
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 participate in (name of organisation) fitness activities  Disclaimer I acknowledge that participating in physical activity for my child carries a risk and I accept all responsibility for that risk.			
Parent/Guardian signature:		////	

# Appendix 3: Sample pre-screening form (two page version)

For most children physical activity provides a basis for good health and an enhanced quality of life for the future. However there are a small number of children who may be at risk when exercising and for this reason we ask that you complete this form so that we may give your child the highest level of care possible. All information you give us remains confidential.

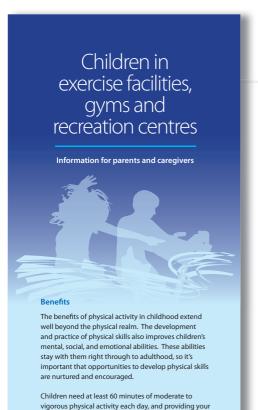
Name:	DOB:	Age in Yrs: Months:
Names of parents or guardians:		
Home address:	Home ph:	
E-mail address:		
In case of emergency ( Parents' mobiles and one other	her contact if possi	ible)
ICE 1 Name	Numbers:	
ICE 2 Name	Numbers:	
ICE 3 Name	Numbers:	
Please note that in the case of a medical emergency, treatment service.	your child may be	transported to the nearest medical
Does your child currently have, or has had in the p	ast, any of the follo	owing (please give details if applicable)
	No/Yes	Details
A heart condition		
Diabetes Type I		
Diabetes Type II		
High cholesterol		
Asthma or breathing difficulties		
Fainting or dizzy spells		
Increased bleeding or haemophilia		
Cystic Fibrosis		
High blood pressure		
Unexplained coughing during exercise		
Epilepsy or seizures		
In the last 6 months has your child had any musc	ular, joint or bon	e pain while exercising? (give details)
	No/Yes	Details
Muscular, joint or bone pain or injury?		
If you answered yes to the above question:		
Has this been treated by anyone?		
Has your child broken any bones or injured bones in the last 12 months?		
Has your child had surgery in the last 12 months?		
Has your child ever experienced brain or spinal injury?		

Does your child take any medications for the following (please give details)			
	No/Yes	Details	
A heart condition			
Diabetes - Type I or II			
ADD or ADHD			
Asthma			
Epilepsy			
Allergies			
Other			
Does your child have, or has had, difficulty with	any of the followi	<b>ng</b> (please give details)	
	No/Yes	Details	
Vision			
Motor skills			
Hearing			
Balance			
Speech/comprehension			
Other learning difficulties or special needs			
Current exercise and nutrition profile (please give	e details)		
	No/Yes	Details	
Does your child currently participate in sport or physical activity at school or within a club?			
Does your child currently have an eating disorder, or has had one in the past?			
Is there any reason preventing or affecting your child's participation in an exercise programme?  O Yes O No Has your child been recommended by a health professional to participate in physical activity? O Yes O No If yes please give details			
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 participate in (name of organisation) fitness activities  Disclaimer I acknowledge that participating in physical activity for my child carries a risk and I accept all responsibility for that risk.			
Parent/Guardian cignature		Date: / /	

# Appendix 4: Children in exercise facilities – a parents' guide

Below is a sample of the **Children in exercise facilities – a parent's guide** 

Copies of this document may be obtained from Fitness New Zealand. Please visit www.fitnessnz.co.nz or call 0800-66-88-11.



child with a variety of activities to learn and extend

Facilities such as gyms and recreation centres are an

excellent environment for kids, providing wonderful opportunities to develop their skills in a fun and

themselves helps to keep their interest up.

safe environment

#### Having fun and keeping children safe

We know that children are more motivated to learn through play, games and having fun so it's really important that the experience is fun as well as safe.

FitnessNZ have developed. Guidelines for Children in Exercise Facilities to ensure your child has fun in a safe environment when they use gyms or recreation centres. Only REPs. Registered Exercise Facilities are required to follow these guidelines, so it is important to choose a REPs Registered Exercise Facility.

The guidelines recommended that all facilities that provide exercise programmes to children have systems and processes in place to ensure they are safe and supervised at all times. Supervision ratios vary depending on the age and activities of the children.

Everybody involved in the delivery of exercise programmes to children should be qualified and registered with the New Zealand Register of Exercise Professionals (REPs). Registration requires staff to be trained to understand children's exercise needs and includes a range of other requirements, such as an annual police check.

#### What do I need to do?

As a parent or caregiver of a child attending a gym or exercise facility you may be asked to sign a form before your child visits the facility. The information collected on these forms helps ensure staff gain an understanding of your child's needs so they are able to provide safe and developmentally appropriate activities.

#### For further information

If you have any questions, please feel free to to speak to a REPs Registered Exercise Professional at the facility – they will be able to give you more information on activities or discuss your individual questions in more detail.

To obtain a full copy of the *Guidelines for Children in Exercise Facilities*, please contact Fitness New Zealand.



Fitness New Zealand PO Box 22-114 Christchurch 8142 fnz@fitnessnz.co.nz www.fitnessnz.co.nz 0800-66-88-11

For a list of REPs Registered Exercise Facilities



# Glossary

# This glossary defines the major terms used within this document.

Where a definition refers to another term that is also defined in this list, it is **shown in italics** 

### **Adult Design:**

Designed for adults to use, and specifically requires full sized adult capabilities and/or size to use correctly.

### **Bodyweight:**

Refers to *resistance training* that uses the weight of a person's own body as the means of adding resistance to an exercise. Examples include push-ups and lunges.

# Cardio(vascular) Machine:

Exercise equipment that has relatively low *resistance*, but results in increased demand on the individual's cardio-vascular system (e.g. elevated heart rate and respiration rate).

#### Child/Children:

For the purposes of these guidelines, the term *children* or *child* applies to individuals aged 6 to 16 years of age, inclusive.

# **Chronological Age:**

A person's actual age.

### **Circuit Training:**

Involves a series of stations, each with a different exercise, where participants move from one station to the next after a short period of time (normally less than a few minutes). Each station may have one or more individuals performing the same task at any time. Activities may include use of light *free weights*. Usually involves rotation of sets of exercises in quick succession, with *sub maximal weight*.

#### **Exercise Facility:**

A Gym, Health Club, Fitness Centre or other place where a member of the public may go to obtain exercise advice and/or access exercise equipment. For the purpose of this document it does not include pools or outdoor recreation settings.

# Free Weights:

Any weight that is not attached to anything and that can be freely moved through any range of motion. More common examples include barbells and dumbbells, but this can include everyday objects when used in an exercise setting for *resistance training*.

### **Group Exercise:**

Exercise where by an instructor leads others in a series of exercise activities by demonstration. Group exercise is based on every person participating doing the same activity at the same time. Group exercise may involve **bodyweight** exercises and simple equipment (including stationery non electronic cycles) but not **machine weights** or **cardio machines**.

### **Machine Weights:**

**Resistance training** that uses a machine/equipment with weights either in a stack or an equivalent resistance method such as resistance bands. Most machine weights use one or more pulleys to enable the exercise to result in the movement of the weights stack.

**Minor:** A person 18 years of age or less

**MOE:** Ministry of Education **MOH:** Ministry of Health

**NZOA:** The New Zealand Oualifications Authority

**OSH:** Occupational Safety & Health, a division of the New Zealand Department of Labour

### **Physical Development Age:**

A measure of a child's development (in body size or motor skill or psychological function) expressed in terms of an age at which their development would have normally occurred. So a child who physically develops quicker than other children of the same chronological age will have a higher physical development age than their *chronological age*.

**REPs:** The New Zealand Register of Exercise Professionals.

#### Resistance (Training/Exercise):

Any exercise that uses any method to slow or otherwise hinder the normal movement of the human body as it performs an activity/exercise through its normal range of motion. i.e. it places "resistance" on the movement. The resistance can be a *free weight, machine weight, body weight*, water, bands etc.

#### Skills Active Aotearoa:

The industry training organisation for the sport, fitness and recreation industries. Known as Sfrito prior to late 2008.

### Sub Maximal Weight:

Any weight used in *resistance training* that is below the maximum weight where an individual could safely perform an exercise. Sub maximal weights are referenced to a particular repetition range, so for example a sub maximal weight for "12 repetitions of exercise ABC" is any weight less than the maximum weight an individual could safety perform exercise ABC for 12 repetitions.

# Special thanks

# FitnessNZ would like to thank the following people for their support, time and assistance in the development of these guidelines:

### **Expert panel**

Jo Clark, YMCA Kris Tynan, Freelance Consultant
Kevin Sheehy, AUT (Auckland University of Technology)
Leslie Tuliaepa, Manukau Leisure Services
Kris Tynan, Freelance Consultant
Jeremy Browne, Auckland University
Leigh Stacey, Millennium Institute

Dr Tony Edwards

Dr Robert Parker, Children's Hospital Institute of Sports Medicine (CHISM), Sydney, Australia

### Steering group

Facilitator: Dr Robert Parker, Children's Hospital Institute of Sports Medicine (CHISM), Sydney

Jo Clark, YMCA Deb Hurdle, SPARC

Sarah Anderson, SPARC Fiona Joyce, Skills Active Aotearoa Richard Beddie, FitnessNZ Shona Ballinger, YMCA Debbie

Campbell, University of Auckland, Representative of the Ministry of Education.

Nic Johnstone, Office of the Children's Commissioner

### **Funding**

The following organisations contributed financially to the development of these guidelines.

- Accident Compensation Corporation (ACC)
- SPARC
- Fitness New Zealand

#### Industry

Thank you to all of the clubs/individuals who gave feedback on the draft versions of these Guidelines.

#### Special acknowledgement

Special thanks to Dr Robert Parker for his assistance and the wealth of knowledge and expertise he contributed when leading the development of these guidelines.

# Published by

FitnessNZ, PO Box 22114, Christchurch 8142.

Additional copies of this document can be obtained from Fitness New Zealand.

**Website:** www.fitnessnz.co.nz **Email:** fnz@fitnessnz.co.nz **Free phone:** 0800-66-88-11

Electronic: copies: Free Printed copies \$5.00

© This document is copyright to FitnessNZ. It may be physically reproduced in full, as long as this copyright and all acknowledgments remain in place.



