



the national governing body for group exercise

Safe Delivery of Group Exercise Classes

with Infants and young people (0-5 years)





We are currently witnessing an exciting surge in demand and delivery of Group Exercise (Group Ex) classes that include babies and children under five.

This growth demonstrates that fitness for new parents is an activity in demand. By allowing parents to bring their children to classes, we eliminate a major barrier to participation, fostering greater access to the vital mental and physical health benefits of group exercise.

However, this increase in delivery also requires a corresponding increase in our focus on safeguarding and safety standards. Babies and young children are present in our dynamic fitness environments, requiring every instructor, operator, and brand to have robust, clear protocols in place.

This document serves as your essential guide to navigating this area successfully. It outlines the specific steps required to manage the delivery, support the mental health of parents, and ensure the absolute safety and safeguarding of the most vulnerable participants: the children in our care.

Qualifications

Instructor Professional Standards

To align with professional standards and maintain the highest level of competence within group exercise provision, instructors must hold appropriate specialist qualifications relative to the participants.



Specifically, for classes involving mothers in the postnatal period, (usually 6 – 8 weeks/12 weeks if C Section and only when signed off to take part in physical activity by their healthcare provider), a **Level 3 Pre and Post Natal qualification** is a mandatory prerequisite, confirming the instructor's ability to safely adapt exercise for this population.



Furthermore, where a class incorporates children under the age of five (Early Years), instructors must possess a recognised qualification or evidence of equivalent, relevant Working with Children 0 – 5 years (Qualification) or Continuing Professional Development (CPD) that maps to the professional standard for working with this age group. This ensures the instructor's expertise in:

- **Developmental Safeguarding:** Applying best practice in child protection and wellbeing.
- **Early Years Guidelines:** Understanding and delivering physical activity in line with the UK Chief Medical Officers' 0-5 years guidelines.

These mandatory qualifications and specialist CPDs ensure the instructor is operating within their **professional scope of practice**, maintaining the safety and developmental appropriateness of the physical activity provided.

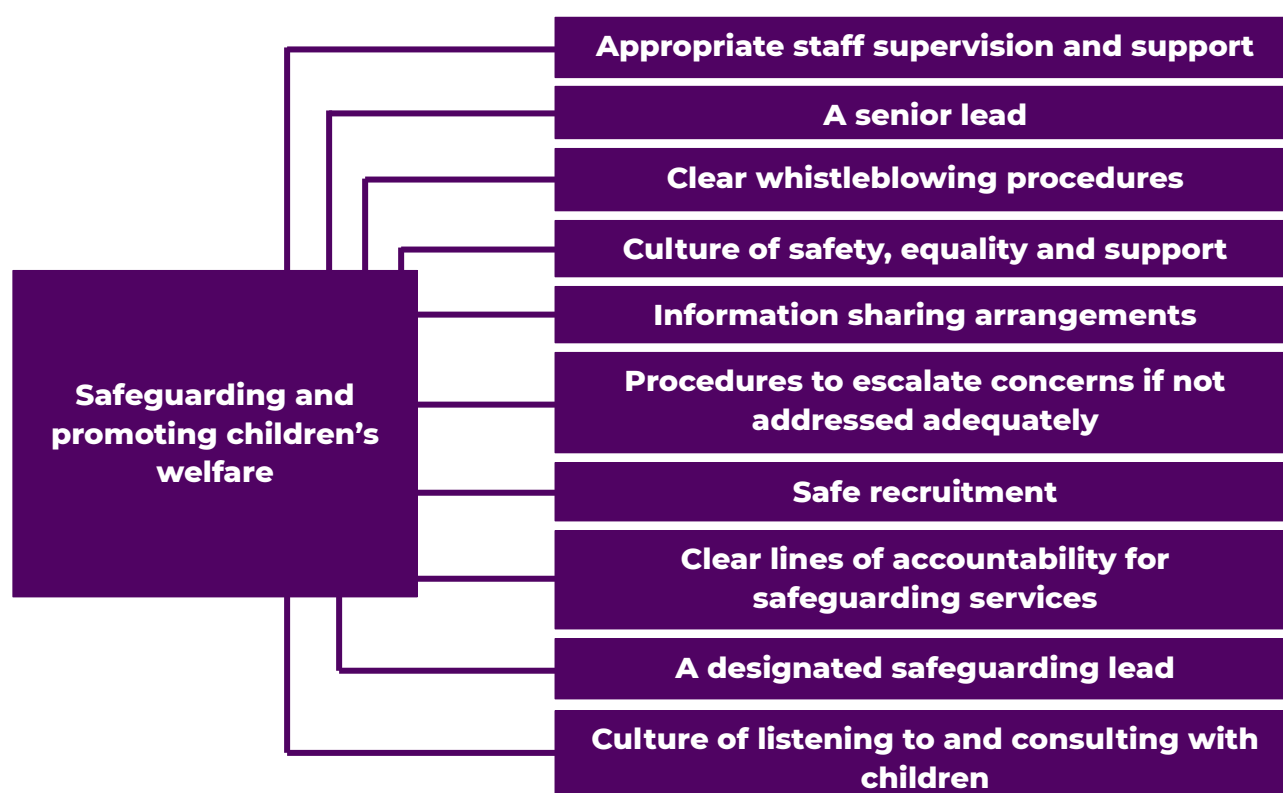
1. Foundational Safeguarding and Governance

Area	Requirement / Best Practice	Notes
Safer Recruitment (Vetting)	DBS Checks: All instructors and any regular assistants/volunteers (that may be “watching” the children whilst their parent is exercising must undergo an appropriate Disclosure and Barring Service (DBS) check. The role's regular access to infants makes it high-risk, regardless of direct responsibility. (DBS checks are available through EMD UK (add link here)	You will only be able to obtain a DBS if the activity meets the threshold for regulated activity. Note that DBS checks are just one part of safer recruitment, a self-declaration forms and references would also be required. Sole traders must ensure their vetting status is current and meets the requirements of any hired venue.
Safeguarding Training	Instructors with regular contact with CYP – no direct responsibility or Regular responsibility for CYP – supervised must complete an introductory safeguarding course such as : Child Protection in Sport and Physical Activity training which can be done as eLearning or an interactive course (e.g., UK Coaching's Safeguarding and Protecting Children). https://www.ukcoaching.org/our-courses/courses/safeguarding-protecting-children/	Training should be context-specific, addressing what concerns look like within the Group Ex environment.
Safeguarding Procedures	Policy & Reporting: A clear, written Safeguarding Policy is mandatory. This must detail the process for recognising, reporting, and recording concerns, and must name a Designated Safeguarding Lead (DSL) or the equivalent point of contact (for sole traders). In the case of a sole trader, you are the Designated Safeguarding Lead (DSL)	The CPSU's Sports Safeguarding Self-Assessment to check compliance is available in our Resource Hub or you can download the resources from CPSU library https://thecpsu.org.uk/resource-library/ <u>Note: We recommend that policies are updated at least every 3 years, or sooner if there has been updates in government guidance/legislation and mandatory for all staff/volunteers</u>
Incidental Responsibility	Instructor's Duty: Recognise that if a parent is unable to care for the child during class (e.g., injury, or	The instructor's primary duty is to ensure a safe environment for both parent and child.

	steps away to go to the toilet), the instructor assumes incidental responsibility for the child's immediate safety and welfare. Ultimately, without the children, these types of sessions wouldn't be running and therefore, the instructor has the responsibility to ensure a safe environment for the parent and child and that includes Safeguarding. This additionally leads to the need for Paediatric First Aid (PFA) and Emergency Action Plans (EAP	Using the CPSU Self-Assessment Tool may help you as the activity provider understand what you currently have in place and potential what you need further work/focus on in terms of safeguarding. Self-assessment Tools: https://thecpsu.org.uk/sports-safeguarding-tools-introduction/ https://thecpsu.org.uk/help-advice/putting-safeguards-in-place/
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The Why – the standards reflect statutory guidance

Organisations should have in place arrangements reflecting the importance of safeguarding and promoting the welfare of children.



2. CRITICAL GAP INTEGRATION: Health, First Aid & Emergencies

These elements are considered best practice for any setting involving infants.

2.1. Paediatric First Aid (PFA)

- **Mandatory Certification:** All instructors and primary assistants present during the session **must** hold a current and valid **Paediatric First Aid (PFA) certificate or have access to someone who does if working in a leisure facility.**
- **Requirement Level:** This PFA must be a comprehensive course that covers first aid specific to infants (0-1 years) and children (1-5 years), including **infant CPR and management of common emergencies** (e.g., choking, sudden illness). PFA is typically a 12-hour course, aligned with the criteria set by the Early Years Foundation Stage (EYFS) for child carers.
- **Validity:** Certificates are generally valid for three years. Refresher training is required before expiry.

2.2. Emergency Action Plan (EAP)

- **Specific Infant EAP:** Develop an EAP detailing immediate, calm procedures for medical emergencies involving a baby (e.g., a child on a mat becoming unresponsive, or a choking incident).
- **Clear Roles:** If multiple adults are present, clarify roles (who calls emergency services, who administers PFA, who manages other clients).
- **Specialist Insurance:** Operators and sole traders must hold **Public Liability and Professional Indemnity insurance** that explicitly covers working with infants and young children in a fitness setting.
- **Mandatory Consent:** Clear written consent must be obtained from the parent for the child's participation, including a record of the child's age, medical history, and emergency contact details. This data must be handled in compliance with **GDPR/Data Protection** laws.
- **Image Release form:** If you intend to take photos during your class for promotion, you must ensure you have authorised consent from parents before images are taken (Link to photo consent form)

- Emergency contact details must be provided for parental/carers who are participants in case of any issues where parent is taken ill and the child needs alternative carer.

3. Activity and Age-Specific Safety

Area	Requirement / Guidance	Rationale
Health Checks (Minimum Age)	Parents must confirm they have passed their 6–8-week post-natal medical check-up (or longer for C-section). The baby must also have completed their relevant paediatric checks (e.g., 6–8-week check).	Ensures medical clearance for the intensity of exercise and checks for underlying infant health issues.
Maximum Age & Mobility	Classes where the infant is expected to remain stationary (e.g., on a mat) should impose an age/mobility limit (e.g., pre-crawling/non-mobile).	Mobile children are a significant tripping and impact hazard in an active fitness space.
Baby Wearing Classes	T.I.C.K.S Check: Instructor must perform a visual check at the start of every session using the T.I.C.K.S guidance for safe baby wearing. (see appendix 1.) Carrier Structure: Encourage structured carriers and ensure babies are dressed appropriately to avoid overheating during exercise.	Prevents positional asphyxia, airway obstruction, and hyperthermia.
Baby-as-Weight Classes	Instructor must have a specialist qualification (e.g., Midwife, Health Visitor, or specialist baby fitness accreditation) to ensure understanding of infant anatomy and development. In-depth risk assessment is mandatory.	Reduces the risk of injury from incorrect handling or movement.

4. CRITICAL GAP INTEGRATION: Environment, Ratios & Legalities

4.1. Physical Environment & Venue Suitability

- **Designated Safe Zone:** A **clear, safe, and easily observable zone** must be established for babies, away from weights, steps, and dynamic movement.

- **Temperature & Ventilation:** Ensure the environment is safe, well-ventilated, and avoids drafts or excessive heat that could cause infant hyperthermia.
- **Equipment:** All toys and equipment for babies must be **age-appropriate, regularly inspected, and sanitised** after each use.
- **Facilities:** Adequate, hygienic changing and feeding facilities should be available.

4.2. Safe Instructor-to-Baby Ratio

- **Best Practice Recommendation: 1:8 Max (Adults):** Given the dual focus on the parent's exercise and the baby's safety, a recommended ratio of **one instructor/trained assistant to a maximum of 8 actively exercising parents/babies** should be adhered to.
- **Rationale:** This ratio ensures the instructor can maintain visual oversight of all infants, monitor T.I.C.K.S checks, manage the class intensity, and respond quickly to a parental or infant emergency. *This ratio should be lowered if the class involves higher risk activities (e.g., high-intensity movement).*

4.3. Insurance and Consent

- **Specialist Insurance:** Operators and sole traders must hold **Public Liability and Professional Indemnity insurance** that explicitly covers working with infants and young children in a fitness setting.
- **Mandatory Consent:** Clear written consent must be obtained from the parent for the child's participation, including a record of the child's age, medical history, and emergency contact details. This data must be handled in compliance with **GDPR/Data Protection** laws.
- **Image Release form:** If you intend to take photos during your class for promotion, you must ensure you have authorised consent from parents before images are taken (Link to photo consent form)
- **Emergency contact details must be provided for parental/carers who are participants in case of any issues where parent is taken ill and the child needs alternative carer.**

Appendix 1:

T.I.C.K.S. CHECK: Safe Babywearing for Fitness

Essential Safety Guide for Instructors & Parents

T	TIGHT	Carrier is snug, baby is close to you.	
I	IN VIEW	Baby's face is visible & uncovered.	
C	CLOSE ENOUGH TO KISS	You can easily kiss baby's forehead.	
C	KEEP CHIN OFF CHEST	Two fingers of space under chin. NO!	
S	SUPPORTED BACK	Baby's back is supported in natural 'C' curve.	

Always check on your baby. If in doubt, take them out.

Appendix 2: Quarterly Compliance & Review Checklist

Use this checklist every three months to ensure your Group Exercise operations—whether you are an instructor, operator, or brand—are consistently meeting the highest standards for child safety and safeguarding.

Training and Personnel Review

Task	Status (Date Completed)	Notes / Action Required
Safeguarding Training		Confirmed all instructors/assistants have current training (e.g., renewed within last 3 years).
Paediatric First Aid (PFA)		Confirmed all instructors/assistants have current PFA certification (e.g., renewed within last 3 years).
Vetting (DBS Checks)		Confirmed all staff/volunteers requiring checks have up-to-date and appropriate clearance.
New Staff Onboarding		Verified safer recruitment procedures (references, training, checks) were followed for any new personnel.

Policy and Documentation Review to be updated and reviewed every 3 years.

Task	Status (Date Completed)	Notes / Action Required
Safeguarding Policy		Reviewed and dated the policy; ensured all staff know the Designated Safeguarding Lead (DSL) .
Emergency Action Plan (EAP)		Reviewed the infant-specific EAP; ensured all staff understand emergency roles.
Risk Assessments		Reviewed and updated all class-specific Risk Assessments (venue, toys, equipment, safeguarding considerations).

Task	Status (Date Completed)	Notes / Action Required
Consent and Data		Verified parent consent forms are being collected and stored securely (GDPR compliant).

Operational and Class Safety Review

Task	Status (Date Completed)	Notes / Action Required
Instructor-to-Ratio Adherence		Audited class rosters to ensure the safe ratio (e.g., 1:8 maximum) is consistently maintained.
T.I.C.K.S. Compliance		Observed or confirmed instructors are consistently applying the T.I.C.K.S. check in baby wearing classes.
Venue and Equipment Safety		Inspected the physical environment (temperature, lighting, designated safe zone, clean floors) and sanitised baby equipment/toys.
Age and Health Checks		Confirmed procedures are in place to verify minimum health checks (6–8-week post-natal) and mobility limits are being observed.