

CHAPTER 29

PHYSICAL DEVELOPMENT

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CHAPTER 29**PHYSICAL DEVELOPMENT (PDEV)****SECTION 1 - GENERAL****2901. Introduction**

Armed conflict, at its most extreme, is characterised by intense, extensive and sustained combat. Even routine Naval activities in peacetime can place considerable physical and mental demands on personnel. Therefore, Naval personnel must be physically fit and robust enough to withstand the rigours of Service life whether at war or in peace. PDev plays a crucial role in this process and is instrumental to developing a range of appropriate attributes for Naval personnel. It also plays an important part in the maintenance of morale which, amongst the ten principles of war, is considered the single most important critical success factor across the spectrum of conflict, including military activities in peace¹. The delivery of individuals who are mentally and physically robust with a war-fighting spirit and who understand how the physical, mental and emotional components impact on military effect, contributes significantly to the development and sustainment of the Moral Component of Operational Capability. PDev is the cornerstone that provides a 'Winning Spirit' comprising self-confidence, leadership, teamwork, robustness, grit and the will to win.

2902. PDev Strategy and Policy

Captain People Support is the OF5 lead for PDev Strategy and Policy and is also the Head of the PT Specialisation. Working through the Head Naval People Strategy (NPS) to the Assistant Chief of Naval Staff (Personnel) (ACNS(Pers)), Capt People Support is responsible for the governance and delivery of SQEP PTIs, Physical Education (including the promotion of Healthy Lifestyle), Adventurous Training and access to sport. Day to day desk level activity for the development, implementation and assessment of PDev policy is delegated to three SO1s, each responsible for the pillars outlined below:

- a. Physical Education (PEd) SO1 PDEV (Tel: 9380 28030, email: navynps-peoplesptcotempedso1@mod.gov.uk).
- b. Naval Service Adventurous Training - SO1 AT (Tel: 9380 28035, email:navynps-peoplesptatso1@mod.gov.uk).
- c. Sport - SO1 NS (Tel: 9380 28034, email: navynps-peoplespnavysportso1@mod.gov.uk).

1. British Defence Doctrine Annex A (JWP 0-01)

SECTION 2 - PILLARS OF PHYSICAL DEVELOPMENT

2903. Pillars of Physical Development

There are three pillars of Physical Development: Physical Education (PEd), Adventurous Training (AT) and Sport. Singularly, the pillars are valuable; taken as a whole their impact is invaluable. The collective outcome of Physical Development programmes and opportunities is to develop the ability to respond instantly and effectively to the physical and psychological demands of operations and be able to maintain that response over prolonged periods. The PDev Mission is therefore:

To provide accessible support services that strengthen and enhance the resilience and resourcefulness of NS personnel, their families and communities'.

The BR providing detailed instructions and guidance for PDev is BR 51.

2904. Physical Education (PEd)

a. PEd includes Executive Health and RNFT, both of which address the core requirement for physical fitness by promoting a life-long exercise habit and healthy lifestyle, underlining the importance of these in a Naval context. Its purpose is to enable personnel to withstand the physical rigours of Service life and imbue them with a winning war-fighting spirit. The main reference is BR 51, the Physical Training Handbook, which although primarily a book of reference for the PT Specialisation, is also of general interest and use to all those concerned in any way with physical training, physical fitness and recreational training in the Royal Navy. RNFT policy and guidance is detailed in Chapter 29 [Section 3](#). RNFT Policy is delivered by RNFTO (Tel: 9380 28021, email: navynps-peoplesptrnftpol@mod.gov.uk).

b. Executive Health in this instance refers to the non-clinical aspects of Health Promotion and the decision making process associated with the maintenance of a healthy lifestyle. The aim of Executive Health is to increase resilience, reduce the incidence of musculo-skeletal injury and ultimately maximise Naval Service Personnel capability. The Naval Health and Wellbeing Committee (NHWC), chaired by Capt People Support, has the policy lead for the Naval Service and links together the PDev, Executive, Medical and the PT departments. The NHWC is responsible for supporting the development and implementation of the Naval Health and Wellbeing Plan (NHWP). The NHWP includes five objectives that are based around each life-stage of Naval People, and are summarised as: Join Well, Train Well, Work Well, Live Well, and Leave Well. To ensure Naval Service targets are met, four working groups sit under the NHWC; Lifestyle, Mental Health, Injury Prevention and Preventive Health. Unit Health Committees have a vital input to the Health and Wellbeing structure of the Naval Service. It is a requirement for all units to have an active UHC that meets on a termly basis with meeting documents sent to SO2 Executive Health. Guidance for Unit Health Committees can be found in BR 51 Volume 2, Chapter 1 or on the NAVYfit Portal (www.royalnavy.mod.uk/sports/physical-education/executive-health/health-and-wellbeing/health-promotion-tools). Executive Health Policy is delivered by SO2 Executive Health (SO2 ExH) (Tel: 9380 28074, email: navynps-peoplesptexhealthso2@mod.gov.uk).

2905. Adventurous Training (AT)

AT is defined in JSP 419 as “challenging outdoor training for Service personnel in specified adventurous activities, involving controlled exposure to risk, to develop leadership, teamwork, physical fitness, moral and physical courage, among other personal attributes and skills, vital to Operational Capability”. The activities listed below are recognised as Adventurous Training by the three Services and are the subject of a Joint Services programme to encourage and increase Service participation:

- a. Offshore Sailing.
- b. Sub Aqua Diving.
- c. Canoeing.
- d. Caving.
- e. Mountaineering.
- f. Ski Mountaineering.
- g. Parachuting.
- h. Gliding.
- i. Mountain Biking.

The RN also has a number of Challenging Activities (CA) which are low level outdoor activities that can be easily accessed and are conducted under similar rules (including duty status) as AT. These are as follows:

- a. Low level Trail Cycling.
- b. Low level walking on recognised paths.
- c. Dinghy Sailing.
- d. Stand Up Paddle Boarding.
- e. Cycle Touring.

BR 51 Volume 3 provides a comprehensive guide for planners and authorisers of all AT/CA activities. AT/CA assurance and the management of the PT(ATI) cadre's CPD is delivered by SO2 AT, (Tel: 9380 28075/50 or 02392 573075/50, email: navynps-peoplesptatso2@mod.gov.uk).

2906. Sport

Sport in the Naval Service makes a significant contribution to operational effectiveness, fighting spirit and personal development. It is recognised as a feature of the Armed Forces Covenant, and plays an important part in Service life, including recruiting and retention and in many instances provides excellent public visibility of the Services. Thus it has a wide role, but specifically within the envelope of physical development, it contributes to fitness, teamwork, leadership, self-discipline, determination, co-ordination, courage, competitive spirit, individual and collective resilience, and consequently military ethos. Inextricably linked to operational efficiency, authorised sport is a Condition of Service with duty status and is a core activity that cannot be considered discretionary. Sport supports the recovery and rehabilitation of the wounded, injured and sick (WIS). It also provides a balance in the lives of Service personnel from the pressures of military commitments and, during periods of high tempo operations, an invaluable opportunity for decompression. It is to engender all these qualities that public funding and time is made available for Service sport. This Policy applies both to Regular and Reserve Service personnel.

- a. **Principles.** The principles underpinning the Naval Service sport policy are to:
 - (1) Create an environment which encourages Service personnel, both Regular and Reserve, to participate in a full range of sporting activity, whatever their level of ability.
 - (2) Provide personnel with time for sport and access to a clearly defined standard of sports facilities and equipment, in order to achieve and maintain fitness, health and wellbeing.
 - (3) Encourage sporting success at individual, unit and representational level and provide a framework for Service, Inter-Service and Armed Forces sports competitions and representational sporting opportunities.
- b. **Governance.** 2SL provides strategic direction of Naval Sport. Responsibility for Naval Sport policy, higher-level coordination of its resources, both public and non-public, together with promotion and management is exercised by ACNS(Pers) through Chairmanship of the Naval Service Sports Board (NSSB) and subordinate Commanders (Hd NPS and Capt People Support). All RN sports are played in accordance with national governing body rules and RN Sports Associations administer their sport in accordance with Service instructions and any directives from the relevant national governing body. RN Sports Associations are MOD bodies accountable through the chain of command under Para 3. The responsibilities of Commanding Officers' responsibilities for sport are detailed in Queen's Regulations, Training Directives and Second Sea Lord's Personnel Functional Standards (see Chapter 22), all of which encourage participation in sport along with the provision of time and public funding. Commanding Officers are responsible for sport within their commands and should authorise activity through Unit Sports Boards and/or through Physical Training staff.
- c. **Further information.** JSP 660 (Sport in the UK Armed Forces) and BR 51 Volume 4 (Sport in the Naval Service) are the books of reference for Naval Sport.

2907. Physical Development Communications

A number of channels of communication have been developed to assist culture change and inform the Naval Service on Physical Development issues and opportunities, as follows:

- a. **NAVYfit.** In 2016 the outward face of RN Physical Development (PDev) was rebranded as NAVYfit to raise awareness of the PDev opportunities available to all NS personnel and provide renewed focus.



Note. *This only applies to customer-facing activities and documents and 'Physical Development' remains the HQ heading.*

- b. **Fit to Fight Magazine.** 'Fit to Fight' magazine is an annual publication that acts as a shop window, serving to encourage and promote participation in AT/CAs, sports and activities through the collation of articles and pictures submitted by Service personnel.
- c. **NAVYfit (formerly PDev) Portal.** The NAVYfit Portal is a comprehensive website, accessible through the Defence Gateway, providing a one-stop-shop for contact details, sporting results, news and images for each RN Sports Association (www.royalnavy.mod.uk/sports).
- d. **Sports Fixtures Calendar.** The Sports Fixture calendar is an interactive calendar, providing details of RN sports fixtures, including those authorised for travel at public expense (www.royalnavy.mod.uk/sports/calendar).
- e. **Social Media.** The RN Sport Facebook page provides results, images and details of future sports events.

SECTION 3 - ROYAL NAVAL FITNESS TEST (RNFT)

2908. General

Fitness - physical and mental - is essential to Operational Effectiveness. The Royal Navy Fitness Test (RNFT) provides an indication of an individual's aerobic fitness in relation to a scientifically derived standard based on generic tasks such as fire fighting and casualty evacuation. Physical strength is assessed using a fire fighting task based simulation; this part of the RNFT is to be taken on completion of the relevant aerobic test. It is an important element of the Physical Development ('Fit to Fight: Fit for Life') agenda and the Naval Health and Wellbeing Plan, both of which aim to maximise the number of personnel fit for task. It is the duty of all RN personnel who are not exempt from the test to be in date for RNFT.

2909. Validity

The underlying principle of the fitness testing regime is that personnel should be able to pass the RNFT at any time and not treat it as an annual event. An In Date RNFT is valid until the next test, which must be taken within 12 months of the previous test. The individual is considered to be 'in date' if they take and pass the RNFT, hold a valid exemption based on medical, age or location limitations, or take and fail the RNFT and undertake a Remedial Training package (RNFT Remedial Training to be delivered in accordance with RNTM01 081/17). It is not acceptable to be Out Of Date (OOD) for RNFT. The only recognised official records for an 'in date' status are JPA and the RNFT 5 Certificate - locally produced alternatives are not to be used. Inaccurate data will give a false impression of a unit's overall RNFT performance and may also result in an individual not being presented for consideration for promotion. All RN personnel are personally responsible for ensuring that JPA reflects their individual RNFT competence correctly. The warning system documented in BR 51, Volume 2, Chapter 2 is applicable to all Officers, Senior Ratings and Junior Ratings.

2910. Testing to Age 55

- a. The RNFT is also compulsory to all serving RN personnel aged between 50-55. Meanwhile, those in the over 55 age groups are encouraged to maintain a lifestyle that includes regular physical activity and to undertake the RNFT voluntarily.
- b. All personnel over the age of 40 are strongly advised to undertake the Rockport Walk as this test minimises the risk of musculoskeletal and/or cardiac injury and is configured for heart rate monitoring. Personnel over 40 who regularly undertake rigorous physical exercise and have no medical concerns, may request, as a personal decision, to undertake a maximal test (ie. 2.4km run or MSFT) but must be made fully aware that exercise at high intensities (maximal or close to maximal) particularly in older age groups increases the risk of a cardiovascular event (eg. a dysrhythmia, heart attack or sudden cardiac death) during or immediately after the exercise period. They must ignore peer or management pressure and misguided confidence in deciding to do a maximal test and must declare any doubts over their medical suitability to the PT staff conducting the tests beforehand.
- c. Personnel over the age of 50 will not be required to take the strength test element of the RNFT.

2911. Promotion

For promotion individuals are required to remain in date for RNFT which now means that the tests should be undertaken at least annually. The key principles are as follows:

- a. **Requirement.** JPA recorded RNFT status will not affect an individual's ability to be selected for transfer or promotion. For promotion or transfer, individuals are required to remain in date for RNFT which now means that the tests should be undertaken at least annually. The results are to be recorded on JPA but a 'fail' will no longer restrict an individual from substantive promotion/award of ES, provided they remain engaged with remedial training; this revised RNFT policy will apply equally to the award of Acting Rank/Rate. The individual's CO is to determine whether there has been sufficient engagement with remedial training, with the usual baseline being an average of 3 periods of training per week or as advised by PT staff. All personnel are to satisfy this RNFT requirement on the Common Promotion Date/Due Date for which selected, or the Due Date for non-selective promotion.
- b. **Permanent Exemption.** Permanent exemptions can only be issued by the Naval Service Medical Board Of Survey (NSMBOS) and will appear as JMES limitation 8000 or 8001. This must be shown on JPA as an exemption, with the 'to' date being the individuals 55th birthday (or Termination date if later).
- c. **Pregnancy and Maternity Temporary Exemption.** Servicewomen who are pregnant or on maternity leave on the required Common Reporting Date (CRD) or Streamlined Eligibility Date (SED) will be considered by Selection Boards whilst those who are pregnant or on maternity leave on the date they are due promotion will be promoted or advanced notwithstanding non-completion of the RNFT. The temporary extension will be annotated on JPA by the unit PT, upon sighting Form 790 issued by the servicewoman's Medical Officer, and will be calculated to expire 24 months beyond the date of the birth of their child. Any amendment to this date is the responsibility of the individual in consultation with their unit PT.
- d. **Medical Temporary Extension.** Temporary RNFT extensions may only be granted by MOs (to cover injuries or medical conditions that would prevent an individual from undertaking their RNFT). These temporary extensions (JMES codes 8201 and 1100) are authorised by Medical Officers for personnel with longer term conditions. After a medical upgrade, further Medical Temporary Extensions may be determined in consultation between MO/CO and unit PT, subject to the previous medical assessment. Medical Officers are empowered to ask an individual to undertake the RNFT as a guide to an individual's recovery. Should someone fail it under such circumstances it will not be recorded as an RNFT Fail, however, if they were to pass the RNFT as part of their medical rehabilitation assessment and subsequently be medically upgraded, the RNFT pass can be awarded against their competence.
- e. **Operational Temporary Extension.** Temporary RNFT extensions may be granted by COs for operational/detachment reasons where an individual through no fault of their own has been unable to undertake the RNFT. Extension dates are to be specified and are not normally to exceed 3 months.

f. **Location Temporary Exemption.** A Location Temporary Exemption (LTE) may be granted to personnel who are assigned into Local Foreign Service (LFS) billets where no Tri-Service PT support is provided for RNFT/Royal Marines Basic Fitness Test (RMBFT) - see RNTM 123/15. Personnel may apply for a LTE in accordance with BR 51 Volume 2 Chapter 2 Para 0219.c(6). This is administered and approved only by HMS TEMERAIRE's Royal Navy Fitness Testing Officer (RNFTO) for RN personnel, and CTCRM's AIPTRM for RM personnel. LTEs will be approved only for those who are In-Date RNFT/RMBFT on the date they are due to take up their assignment in accordance with the Assignment Order. Once RNFTO/AIPTRM is satisfied that the person is either in date or has a relevant exemption, they will update JPA with a LTE that will expire at the end of three calendar months after their return to UK (as stated on their Assignment Order).

g. **Eligibility for Promotion.** Service Personnel granted a temporary extension will remain eligible for consideration for selective promotion unless specifically excluded under the terms of the extension.

2912. Defence Health Questionnaire

The Defence Health Questionnaire (DHQ) is a basic medical screening aid to identify those who may be potentially at risk, which enables them to seek medical advice on eligibility without sharing confidential medical information with PT or other staff a copy can be found in BR 51 Volume 2, Chapter 2 - (RNFT Policy, Protocols, Instructions and Guidance). All personnel of 40 years of age or over will be required to complete and sign the DHQ before taking the RNFT. The DHQ is to be retained with the RNFT 5 and handed to the individual once the test has been completed.

2913. Weight Management Policy

Preventing and addressing weight management (WM) issues can positively contribute to the morale and effectiveness of the workforce, as well as providing a timely and cost efficient contribution to easing current manpower challenges and enable maximise deployability. The Armed Forces Weight Management Policy (2017DIN01-179), developed as part of the Defence Health Strategy, focuses on three main areas;

- a. **Measurement** of body composition for monitoring, and for raising awareness to Service Personnel (SP) of the impact of physical inactivity and poor dietary behaviours on WM.
- b. **Prevention** of unhealthy body weight; and
- c. **Early intervention, effective management and support** for SP who demonstrate increased risk of ill-health due to their weight, through a standardised, multi-disciplinary, person-centred, behaviour change Defence Weight Management Service (DWMS), or alternative WM support, as appropriate.

2914. Medical Referral

If there is doubt about an individual's ability to undertake the RNFT, a medical assessment should be sought. Personnel who fail the RNFT after 3 months of Remedial Training (RT) will automatically be referred for a medical assessment; full details of this process can be found in BR 51 Volume 2 in the flow diagrams at Paras 0228 and 0229).

2915. Documentation

BR 51 Volume 2 - RNFT Policy and Protocols, Instructions and Guidance - contains the following sections:

- a. Section 1 - Policy Statement including General Instructions.
- b. Section 2 - Instructor Notes including the protocols and procedures for administering the RNFT; RNFT graded performance tables; briefs; recording sheets; Form RNFT 5; Defence Health Questionnaire (DHQ); JPA data input instructions; Command Guidance including Divisional responsibilities; and guidance to MOs.

2916. Testing Staff

Any qualified Tri-Service Physical Trainer (PT) may conduct the RNFT maximal tests. To conduct the Rockport Walk or to carry out the RN Remedial Training package, suitably qualified PT staff must have completed the RNFT Polar Heart Rate Monitor Training at HMS TEMERAIRE. This training is conducted by the Royal Navy Fitness Testing Officer (RNFTO), (Tel: 9380 28021 or email: navynps-peoplesptrnftpol@mod.gov.uk).

2917. Command Role

- a. Whilst it is an individual responsibility to remain in date for the RNFT, it is the Command's responsibility to ensure that there is sufficient opportunity and encouragement to do so through regular rigorous physical exercise and good RNFT administration. Regular reviews by the CO of the unit's RNFT status using the OBIEE JPA tools, supported by strong leadership from Divisional Officers and Senior Rates, will provide the necessary focus on those personnel who fail to remain in date. Such reviews will also ensure that the unit's programme takes into consideration future opportunity for RNFT testing and identify times such as leave periods when a large number of personnel are likely to fall out of date. Personnel who, after Command intervention, continue to exhibit a recalcitrant attitude to the RNFT should be subject to Minor Administrative Action (MAA), or disciplinary action as appropriate.
- b. Commanding Officers are also to ensure that the Discharge Warning Process for RNFT failures, contained in BR 51 Volume 2, Chapter 2 and BRd 3(1) Chapter 54. are properly applied. Failure to allocate a warning at the appropriate time will prolong the discharge process and can be misconstrued as a lack of conviction on the Service's part to enforce the fitness regime.