*Supplementary material*

Table 1: Rationale for changes of the opt-out letter

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| ***Main theme*** | ***Definition*** | ***Subthemes*** | ***Examples by LGA*** |
| Clarifications (References [R] = 19) | Changes to clarify the process of the NCMP. | *Date, opt-out* | “*Add an opt-out section at the end of the letter...*” |
| Language(R = 24) | Changes to modify the language of the opt out letters, change the tone, or improve readability. | *Make friendly, personalised, Improve readability* | “*Make it more personal and user friendly...”; “To improve readability for parents.”; “language is slightly modified to be a bit more friendly and less formal*” |
| Localisations(R = 46) | Changes to “localise” letter to a given area. | *Contacts, design, other screening, services* | “*The letter is locally tailored as for the Reception age”; “To fit with local commissioned services...”; “We also branded our services and used the strapline...*” |
| User driven(R = 13) | Changes due to feedback from users. | *Parents, public health director* | “*Based on feedback from parents who have previously complained about the letter and the NCMP programme.*”; “*(wording)...Director of Public Health is comfortable to use.*” |

\*R = References

Table 2: Rationale for changes of the result letter

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| ***Main theme*** | ***Definition*** | ***Subthemes*** | ***Examples by LGA*** |
| Clarifications (R = 10) | Changes to clarify results letter and the process of the NCMP. | *Confidentiality, results* | “*...reiterate information on confidentiality.*”; “*The tailored letter adds further information, including ‘hat 'some medical treatments can mean that BMI centile is not the best way to measure your ’child'*”; “*To give more information about the weight categories*” |
| Design(R = 5) | Changes to modify the design of the result letter. | *Nudge, printing costs, visuals* | “*...apply 'nudge theory' to the letter - the information remains the same but is presented and structured differently to the standard letter.*”; “*We also send a growth chart to indicate visually to parent the degree of difference from percentile...*” |
| Language(R = 20) | Changes to modify the language of the result letters, change the tone, or improve readability. | *Emphasise health issues, make friendly, neutralise, personalise, Improve readability* | “*Added in a little more information about how obesity can cause health problems...*”; “*To make the wording more user friendly.*”; “*It was agreed to soften the language...*”; “*Trying to make it a more personal*”; “*...to be more readable.*” |
| Localisations(R = 50) | Changes to “localise” letter to a given area. | *Contacts, other screening, services* | “*...local number and information.*”; “*...provide information on dental health.*”; “*To promote local weight management services.*” |
| User driven(R = 19) | Changes due to feedback from users. | *Parents, public health director, school nurses* | “*The provider received a number of complaints from parents regarding the suggestion that their child was overweight.*”; “*We have significantly changed the results letter following focus group activity with parents. Many parents told us the language was not engaging and felt blaming.*”; “*...wording* *approved by programme leads and Director of public health.*”; “*We decided to change our letters in consultation with our school nurses as they had expressed a concern that some parents felt offended by the letter.*” |

\*R = References



Figure 1: Job titles of LGA’s representatives (respondents)



Figure 2: Methods of contact available to parents inside the result letters



Figure 3: Reasons for limited service provision



Figure 4: Comparison of responses across PHE regions



Figure 5: Map of survey responses across England – General



Figure 6: Map of survey responses across England – RY OW and VOW prevalence



Figure 7: Map of survey responses across England – Y6 OW and VOW prevalence



Figure 8: Map of survey responses across England – IMD