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| **Site / Area:** |       | **Date of assessment:**  |  | **Risk Assessment #:** | **036RA** |
| **Completed by (name):** |       | **Signature:** |       |
| **In Consultation with** |       | **Signature:** |       |
| **Identify / describe activity, equipment, area or event you are assessing:**  | **JUMPING CASTLE AMUSEMENT DEVICE** |
| **Step 1:** **Identify the hazard/s:**What do you believe are the hazards?(Refer Risk Assessment Guideline (015G) | **Step 2: Assess the risks:**What do you believe are the risks?(Refer *Risk Assessment Guideline (015G)* | **Step 3: Reducing the risk:**What do you believe can be done to reduce the risk?(Refer *Risk Assessment Guideline (015G)* |
| **What could cause harm?** | **What could go wrong?** | **Controls** |
| NOTE: Different requirements may apply depending on the Inflatable Amusement Device you hire dependant on the platform height.Platform Height – In relation to an inflatable device (continuously blown) means the height of the highest part of the device designed to support persons using it (the platform) as measured from the surface supporting the device to the top surface of the platform is inflated but unloaded from the ground to the highest point at with a child is supported e.g. top of slide. Refer to the end of this risk assessment for regulatory requirements on the different platform heights. |
| In conjunction with this risk assessment training / education and development of a relevant SOP may be required. |
| **Machinery & Equipment*** Colliding with other jumpers
* Falling or jumping off the castle entrance
* Doing stunts on the jumping castle
* Slips
* Trips
* Access / Egress – easily accessible in the event of an emergency
 | * Open wounds
* Strains
* Sprains
* Dislocations
* Fractures
* Concussion
* Neck Injuries
* Head Injuries
 | * Follow the suppliers instructions regarding amount of children on at once
* Match children who are on together in age / size
* No somersaults, flips or other fancy moves
* Children to be instructed on safe play while on the castle
* Other children in area to be kept clear of jumping castle when in use
* No eating or drinking while on the jumping castle
* Set time limit on jumping so children don’t get tired
* Clear, simple instructions given to children on how to use individual equipment and consequences if equipment is used incorrectly
* Entry and exit areas are clear and well defined
* Visual checks prior to use – nets, jumping surfaces
* Supervision at all times .Educator to stand next to equipment being used, If Educator required in another area activity to be ceased
* Any issues identified at the time of inspection, equipment to be taken out of service immediately and reported to supplier
* Senior First Aiders onsite
* Serious injuries to be reported to Education & Early Learning Board, CESA and Catholic Safety Health & Welfare SA
 |
| **Machinery & Equipment*** Injury to patrons of bystanders (falls or being hit by moving objects)
 | * Fatality
* Serious injuries
 | * Ensure jumping caste has been inspected and maintained by engineer
* Obtain their public liability insurance
* Structure and accessories to be secured. Ensure all anchor points, ropes and stakes or ballast are undamaged and fit for continual use (do in consultation with the operator)
* Check all tie down ropes attached to the devise are fastened to adequate anchorages and there is adequate soft fall area
* Jumping Castle must not be erected under any trees or overhanging branches or overhead power lines
 |
| **Machinery & Equipment*** Sharp objects that could puncture the bouncy castle
 | * Lacerations
* Serious injuries
 | * Structure will not be set up on concrete or gravel and will be checked thoroughly before it is used
* Children asked to remove their shoes and any other sharp objects before they go on the structure
 |
| **Electricity*** Frayed cord
* Overloaded power boards
* Faulty appliances
* Cutting cords
* Electrical short
* Water on the electrical equipment
* Overheating of electrical appliances

**NOTE:** Electrical (delete this if they use a generator)Generator (delete this if they are using electricity to blow the castle up) | * Electrocution
* Electric shock
* Fuel spill
* Exposure to fumes
* Fire
 | * Visual Inspection
* Cords are tested and tagged
* Portable RCD used
* Weatherproof fittings in use
* Adequate protection of the public from any trip hazards from cords are minimised
* Fuel for generator is stored in appropriate containers that are labelled
* SDS available for the fuel
* Fuel decanted in well ventilated area
* Fire extinguisher is available
 |
| **Extreme Temperatures*** Rain
* Storms
* Lightening
* Windy conditions
* Extreme heat
 | * Structure lifting resulting in children being thrown off
* Struck by lightening
* Flooding
 | * Operator monitors prevailing wind conditions
* Jumping castle will not be used in wet weather
 |
| **Other** | *
 | *
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| **Authorised by:** |  | **Signature:** |  | **Date:** |  |

**WHS Regulatory Requirements**

**Under 3m platform height:**

No longer, require item registration. *Refer Schedule 5 – Part 2 -4 – Exceptions (2) (e)*

No longer require design registration *Refer Schedule 5 – Part 2 -4 – Exceptions (2) (e)*

No longer require a professional engineer to conduct the annual inspection – it is not a competent person. *Refer Reg. 241 (5) (a)*

**Between 3m and 9m platform height:**

No longer require a professional engineer to conduct the annual inspection – it is now a competent person. *Refer Reg. 241 (5) (a)*

Still require design registration (except Class 1)

Still require item registration (except Class 1)

**Over 9m platform height:**

Still require annual inspection by professional engineer. *Refer Reg. 241 (5) (b)*

Still require design registration. *Refer Schedule 5 Part 1 -2 – Exceptions (2) (e)*

Still require item registration. *Refer Schedule 5 Part 2-4 – Exceptions (2) (e)*

In all cases listed above – owners are still required to ensure a logbook is maintained.

**Review hazard/risk assessment if task or circumstances change and at intervals appropriate to the level of risk (minimum 5 years).**

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| **Step 4: Monitor & review:**(Refer to hazard sheet)**Please tick Yes or No** |
| **Were the controls effective?** | **Were there any unforeseen hazards/ incidents?** | **New controls** |
| **Yes** | **[ ]**  | **No** | **[ ]**  | **Yes** | **[ ]**  | **No** | **[ ]**  |
| **DETAILS** | **DETAILS** | **DETAILS** |
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| --- | --- | --- | --- | --- | --- |
| **Name:** |  | **Signature:** |  | **Date:** |  |