



<b>Version</b>	Blue Light – <b>Bubble Attack</b> - Activity Management Plan – V2
<b>Issue Date</b>	6/3/2024
<b>Review Date</b>	30/07/2024
<b>Next Review</b>	30/07/2025
<b>Revised By:</b>	Dominic Crow
<b>Authorised By:</b>	Brendon Crompton

Blue Light Bubble Attack Activity Management Plan							
<b>Activity Description</b>	Participants hop into an inflatable bubble and play a variety of games			<b>Location</b>	Flat grass areas with boundaries		
Toilets	Yes	<b>Max Ratio</b>	2 - adult 12 - Participants	Water	Yes	<b>Mobile Reception</b>	Yes
<b>Instructor Competency</b>	Blue Light internal competency signed off			<b>Client Competency</b>	Able to fit in the bubble ball	<b>First Aid Kit Available</b>	Yes
<b>Equipment required by participants</b>	Covered toe shoes, appropriate clothing for the weather, personal medication if needed			<b>Emergency Response / Incident Reporting</b>	Refer to Blue light Rock & Ropes Incident Reporting Procedure		



#	HAZARD	POTENTIAL INJURY/ILLNESS	CONSEQUENCE	LIKELIHOOD	INITIAL RISK RATING	CONTROL METHODS	CONSEQUENCE	LIKELIHOOD	RESIDUAL RISK RATING
1	<p><b>Physical or impact injury</b></p> <ul style="list-style-type: none"> <li>*Participant being hit out of the bubble</li> <li>*Participant hitting the ground</li> <li>*Incorrect use of equipment</li> <li>*Whiplash from being hit from behind</li> <li>*Participants being stood on or crushed</li> </ul>	<p>Serious injury Head/Neck/ Spinal Injury Moderate Injury</p>	Severe	Likely		<ul style="list-style-type: none"> <li>*All adult helpers must be inducted by BL staff to run activity with assistance of que cards – Follow BL SOP</li> <li>*Safety brief to cover rules of activity – No attacking unless participant is standing up in the bubble and facing you. Ensure to brief and monitor participants are in the bubble correctly</li> <li>*Brief only hitting participants standing up in bubbles and facing you</li> </ul>	Severe	Rare	
3	<p><b>Grazes and cuts</b></p> <ul style="list-style-type: none"> <li>*Sliding on the grass</li> <li>*Sharp object on the playing field</li> </ul>	Minor Injury	Moderate	Likely		<ul style="list-style-type: none"> <li>*Covered shoes to be worn</li> <li>*Area is checked for any sharp objects prior to use</li> <li>* Students briefed on risks</li> </ul>	Moderate	Rare	
4	<p><b>Torn or strained muscle</b></p> <ul style="list-style-type: none"> <li>*Getting up in the bubble incorrectly</li> <li>*Carrying bubbles</li> </ul>	<p>Moderate Injury Minor Injury</p>	Moderate	Almost Certain		<ul style="list-style-type: none"> <li>*Teach correct way of getting in / out of the bubble</li> <li>*Teach correct lifting technique</li> <li>*Ensure there is enough people lifting bubble together</li> </ul>	Moderate	Unlikely	



5	<b>Psychological harm</b> *Claustrophobic *Forced to participate *Panic Attack *Cultural factors	Psychological Harm / Trauma	Major	Likely		*Challenge by choice *Full debrief with students to ensure they have a good understanding of activity and safety processes in place *Ensure every group is supported and treated appropriately	Minor	Unlikely	
6	<b>Equipment failure / Incorrectly Worn</b> *Bubble pops *Handle or shoulder strap in bubble breaks	Death Serious injury Head/Neck/ Spinal Injury	Severe	Likely		*6 month in house inspection completed *Visual inspection completed prior to use * Students are briefed prior to activity on how to fit correctly	Severe	Rare	
7	<b>Weather Conditions (Sun, wind, temperature, and lightning)</b> *Hyperthermia Hypothermia *Heat stroke *Struck by lightning	Serious Injury Minor Injury	Major	Likely		*Activities called to a halt when thunder or lightning & 30/30 rule followed *Ensure group has been briefed on appropriate clothing *Shelter provided *Instructors call a halt if participants impacted / affected by the weather *Ensure water / sunblock available. * Weather conditions checked prior to activity if adverse activity will be postponed	Moderate	Unlikely	
8	<b>Instructor impairment</b> *Drug and Alcohol	Death Serious Injury Minor Injury	Severe	Unlikely		* No drinking of alcohol prior to or during activity *Adhere to Blue Light drug and alcohol policy *Cease Activity if instructor is suspected to be impaired	Major	Rare	



9	<b>Medical Injury</b> *Preexisting medical condition	Serious Injury Minor Injury	Major	Likely		<ul style="list-style-type: none"> <li>*Collect medical consent forms prior to arriving</li> <li>*Contact participants with any questionable health issues to better understand conditions so a plan can be made</li> <li>*Ensure participant is carrying required medication</li> </ul>	Moderate	Unlikely	
11	<b>Operator Fatigue</b>	Death Serious Injury Minor Injury	Severe	Likely		<ul style="list-style-type: none"> <li>*Regular breaks, rotations and checks to ensure operator is not fatigued</li> </ul>	Major	Unlikely	
13	<b>Wandering participants</b>	Death Serious Injury Minor Injury	Major	Likely		<ul style="list-style-type: none"> <li>*Establish clear safety zones.</li> <li>*Instructors to be aware of participant locations at all times.</li> </ul>	Major	Unlikely	
15	<b>Manual Handling</b>	Serious Injury Minor Injury	Major	Likely		<ul style="list-style-type: none"> <li>*All staff complete in-house Health and Safety training which includes manual handling</li> </ul>	Moderate	Rare	



In assessing the level of risk, considerations such as the likelihood of an incident happening in combination with the seriousness of a consequence are used to gauge the overall risk level for an activity. The matrix below has been used as a guide to assist with developing the risk assessment:

Risk Level	
Low	Continue
Medium	Control to minimise risk
High	Control to eliminate risk
Severe	Stop – find alternative

### Risk Matrix

Risk Assessment Matrix	Consequences			
	1. Minor	2. Moderate	3. Major	4. Severe
Likelihood	None/minimal Injuries	Moderate injuries	Medical treatment	Fatalities
1. Almost certain	Medium	High	Severe	Severe
2. Likely	Medium	High	High	Severe
3. Unlikely	Low	Medium	Medium	High
4. Rare	Low	Low	Medium	Medium



## Appendix B Emergency Response Plan



### INCIDENT REPORTING PROCEDURE





## Employee Declaration

The Activity Management Plan for Bubble Attack been covered in this session, and I have been given the opportunity to ask questions and review the information provided. I fully understand the procedures and agree to comply with them.

Employee Name	Signature	Date