Trampoline Policy

1. Students may only use the Trampoline under direct staff supervision.

2. Only one student may be using the Trampoline at the same time.

3. The safety net must be in place and the zipper entry closed while a student is using the equipment.

4. In keeping with the manufacturer’s instructions tumbles, forward rolls and landing on ones knees is not permitted. Students need to be instructed in the correct use of the equipment.

5. Students with Down syndrome are not permitted to use the equipment until a medical clearance is given since some students with Down syndrome have joint instability in the first cervical joint in the neck (Atlanto-Axial instability). Since it is not recommended that these people do not engage in activities which can put extra strain on the neck, we require a medical clearance to ensure the student’s safety.

6. Knee – drop activities should be avoided.

7. Students should wear socks while performing on the trampoline.

8. The wearing of spectacles and hearing aids is to be avoided when using the trampoline.

9. Remove any loose apparel which could cause injury.

10. Supervising Staff will adhere to the attached risk assessment for specific management practices to minimise risks.

Policy Source: DOEM HS-10 – 109
Date: 14-3-05
Dear Parents and Caregivers

The issue of students with Down syndrome participating in certain sporting activities was raised due to the instability of a cervical joint in the neck among some people who have Down syndrome. The use of the trampoline needs careful consideration for students with this disability.

According to most literatures 10 to 15% of people with Down syndrome have joint instability in the first cervical joint in the neck (Atlanto-Axial instability) without showing any signs or symptoms. It is generally recommended for these people not to engage in activities which can put extra strain on the neck. Such activities can include trampolining, tumbling, diving, gymnastics, swimming the butterfly stroke and other collision sports.

As the diagnosis of Atlanto-Axial instability can only be given by a medical practitioner usually after checking for the presence of neurological signs and by looking at the X-ray of the neck taken from the side. The school would like to advise parents of students with Down Syndrome to contact your paediatrician or orthopaedic specialist to screen for Atlanto-Axial instability in your child and also give us specific instructions on whether your child can or cannot participate in activities mentioned above in paragraph two in this letter.

To protect your child he or she will not engage in such activities before the medical clearance with specific instructions about participation in this activity is given to the school.

Though we understand that the occurrence of any injury happening as a result of Atlanto-Axial instability is low, we should also be aware of the seriousness of such injury. At the same time we are aware of the many benefits to vestibular balance, proprioception, muscle tone, core stability as well as aerobic fitness which can result from such a popular sporting pursuit. To maximise these benefits inservice of staff will occur periodically.

Please feel free to contact either myself or the school Physiotherapist for any queries relating to this matter.

Terry Forster
Principal