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|  | | **MOD Risk Assessment Form** |  | | **MOD Form 510** | | ANNEX K To SECTION 11 UKAFBA HANDBOOK 2019/20 | | | |
| **Establishment /Unit/Ship:**  Army Sports Control Board | | | | | | **Assessment Ref:**  **ASCB/01** | | **Date:**  **1 Sept 19** | |
| **Section/Department:**  **ARMY BOXING ASSOCIATION** | | | | | | **Assessment Type**  **(Note 1) tick as appropriate** | | | |
| **Specific** | | **Generic** | |
|  | | | | | | | | | |
| **Activity/Process:**  **COMPETITIVE BOXING** | | | | **Who is at risk:** | | | | | |
| **All staff:** | | | | | |
| **Operators and/or maintenance staff:** | | | | | |
| **Visitors, vulnerable groups, public, etc. :** | | | | | |
|  | | | | | | | | | |
| **Ref** | **Hazard** | | | | | | | | **RA Required** |
| 1 | Death From Brain Injury | | | | | | | |  |
| 2 | Burst Eardrum, Detached Retina, Fractures to face, hands, ribs | | | | | | | |  |
| 3 | Bruising to face hands and ribs | | | | | | | |  |
| 4 | Dehydration | | | | | | | |  |
| 5 | Muscle Strain or Injury | | | | | | | |  |
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| **Likelihood** | | | | | | | | **Risk Matrix** | | | | | | | | | | | | |
| **Common, regular or frequent occurrence.** | | | | | | **3** | | **3 Med** | | | | **6 High** | | | | | **9 High** | | | |
| **Occasional occurrence.** | | | | | | **2** | | **2 Low** | | | | **4 Med** | | | | | **6 High** | | | |
| **Rare or improbable occurrence.** | | | | | | **1** | | **1 Low** | | | | **2 Low** | | | | | **3 Med** | | | |
| **Severity** | | | | | | | | **1**  **Minor injury or illness.** | | | | **2**  **Serious injury or illness.** | | | | | **3**  **Fatalities, major injury or illness.** | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **Hazard**  **Ref** | **RISK Associated with Hazard**  **(How people may be harmed – type of injury or ill health)** | | | | **Existing Control Measures**  **(Note 2)** | | | | | | | | | **Risk Rating** | **Additional Controls Required**  **(Note 2)** | | | | | **Review frequency**  **(Note 3)** |
| 01 | Death from Brain Injury | | | | Head Guards, Bandage inspections, Abdominal protectors, Qualified Referees, Ringside Medical cover of Dr and Paramedics, annual medicals at least 10 days prior to comp and pre bout medicals compulsory. Coaches to be qualified and in date and registered with the Army BA. All Boxers are to be registered through the Army BA. Boxers are categorised and matched according to Weight and Experience. | | | | | | | | | 1 x 3 = 3 | All control measures are stipulated by the National Governing Body for Competitive Boxing, except where the Army imposes the following additional measures to protect their employees;  Annual Medicals, additional Ringside Medical Cover. | | | | | Annually |
| 02 | Burst eardrum / Detached Retina / Fractures to hands, face or ribs | | | | 2 x 2 = 4 | Annually |
| 03 | Bruising injuries to face, hands and ribs. | | | | 3 x 1 = 3 | Annually |
| 04 | Dehydration | | | | 1 min breaks afforded at end of each round, Rounds only 2 or 3 mins max dependant on Cat of Boxer, max of 4 rounds for any boxer | | | | | | | | | 2 x 1 = 2 |  | | | | | Annually |
| 05 | Muscle injury / strain | | | | All participants will be encouraged to warm up prior to taking part. | | | | | | | | | 3 x 1 = 3 |  | | | | | Annually |
|  | | | | | | | | | | | | | | | | | | | | |
| **Assessor** | | | | | | | | | **Manager (Note 4)** | | | | | | | | | **Overall Activity/Process Risk Rating** | | |
| **Name:** | | | **R Walker** | | | | | | **Name:** | | **NL Pearce** | | | | | | |
| **Rank/Grade:** | | | **Dr** | | | | | | **Rank/Grade:** | | **C2** | | | | | | | Med | | |
| **Date:** | | | **1 Sept 19** | | | | | | **Date:** | | **1 Sept 19** | | | | | | |  | | |
| **Sig:** | | |  | | | | | | **Sig:** | |  | | | | | | |  | | |
| **Line Manager Assessment Review**  **(Note 3 and 4)** | | | | | | | | | | | | | | | | | | | | |
| **Date:** | |  | | **Date:** | | |  | | | **Date:** | | |  | | | **Date:** | | |  | |
| **Name:** | |  | | **Name:** | | |  | | | **Name:** | | |  | | | **Name:** | | |  | |
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**Notes:**

1. If using a ‘Generic’ risk assessment, Assessors and line managers are to satisfy themselves that the assessment is valid for the task and that all significant hazards have been identified and assessed. If additional hazards are identified they are to be recorded and attached to the Generic assessment.

2 Only a reference or simple description of the control measures is required. If the risk assessment identifies the need for additional control measures, the hazard will need to be reassessed once the additional controls have been implemented.

3 Risk Assessments are to be reviewed:

* at a frequency proportional to the risk (e.g. high risk – 6 monthly; medium risk – annually; low risk – every 2 years)
* where required by local instructions/procedures;
* if the safe execution of the activity relies on stringent supervision and/or adherence to a safe system of work;
* if there is reason to doubt the effectiveness of the assessment.
* following an accident or near miss.
* following significant changes to the task, process, procedure, personnel or line management.
* following the introduction of more vulnerable personnel.
* If a “Generic” assessment then prior to use.

4 Line managers are to note that they are responsible for production of the risk assessment and that they are signing to indicate that the risk assessment is suitable and sufficient and they consider the risks to be acceptable.

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| High | Common, regular or frequent occurrence. | **3** | **3 Med** | **6 High** | **9 High** |
| Medium | Occasional occurrence. | **2** | **2 Low** | **4 Med** | **6 High** |
| Low | Rare or improbable occurrence. | **1** | **1 Low** | **2 Low** | **3 Med** |
| **Risk Matrix**  **Likelihood X Severity** | | | **1** | **2** | **3** |
| Minor injury or illness. | Serious injury or illness. | Fatalities, major injury or illness. |
| Low | Medium | High |

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| **High** | Improve control measures; consider stopping work. Conducting work at this level of risk is to be reported up the Line Management / Command chain. |
| **Medium** | Review control measures and improve if reasonably practicable to do so, consider alternative ways of working. |
| **Low** | Maintain control measures and review regularly or if there are any changes. |