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| **Risk Assessment** |
| **Risk Assessment for the activity of** | **Mixed Martial Arts Fight Night (SUMMA Showdown)** | **Date** | **08/03/24** |
| **Club or Society** | **Southampton University Mixed Martial Arts** | **Assessor** | **Calvin Feliciano** |
| **President** | ***Lewis Patrick*** | **Signed off** |  |

| ***PART A***  |
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| **(1) Risk identification** | **(2) Risk assessment** | **(3) Risk management** |
| **Hazard** | **Potential Consequences** | **Who might be harmed****(user; those nearby; those in the vicinity; members of the public)** | **Inherent** |  | **Residual** | **Further controls (use the risk hierarchy)** |
| **Likelihood** | **Impact** | **Score** | **Control measures (use the risk hierarchy)** | **Likelihood** | **Impact** | **Score** |
| Physical Injury | Fighters could become injured to any part of their body. Spectators may be disturbed if they witness an injury. | Fighters competing in a bout in the event, and possibly spectators becoming uncomfortable should an accident occur. | **4** | **3** | **12** | Paramedics and first aiders on hand in the area.Professional referee will be overlooking the fight, and will call it off at any sign of injury or unwillingness to fight or defend oneself. 16 Oz gloves (other weight to be agreed upon between competitors), shin guards and mouthguards along with groin cups will be mandatory to participate.Headguards available. | **2** | **3** | **6** | Fighters will be thoroughly briefed before so all know what strikes are allowed in the ring, preventing injury from illegal strikes.Everyone should be made aware of what is happening throughout the event. Health checks before fight |
| Ring hygiene and safety | Injury or illness to people in the ring. Spread of infection. | Any person in the ring, from the referee, to cornermen, to fighters.Spectators | **1** | **3** | **3** | Only 2 cornermen allowed to limit capacityRing will be standard 22x22 ft ring in compliance with safety expectations and padded to prevent injury should falls occur.Made sure ring is free of debris and cleaned if any fluids or debris visibleAppropriate clothing and no jewellery (or taped off)Referees and volunteers will be expected to wear masks, fighters will be exempt from this. (unless current COVID guidelines does not require this.No bare-foot before entering the ring | **1** | **2** | **2** | Ensure spectators are aware that they are not allowed to enter the ring under any circumstances. |
| Health and Safety | Unknown illness or injury that the fighters may have had before or during the fight.Disturbances and aggressions of the crowd or opposing teams if tensions were to grow. | Fighters competing, opposing teams, members of the audience | **2** | **3** | **6** | Fighters will undergo medical checks before and after the fight.Pre- medical checks will ensure fighter is physically and mentally able to participate with no glaring or obstructive injuries.Post medical fights will ensure there is no serious or grave injuries dealt to the fighter during the fight.Tapping out should be encouraged despite losing a bout to prevent excessive injury- each fighter or cornerman must use their judgement.Any glaring issues may prevent fighter from fighting or will result in more serious medical attention being called to the fighter post fight.Security/ referee on hand to take preventative methods if audience members become aggressive or unmanageable. | **2** | **2** | **4** |  |
| Alcohol Consumption | Injury or illness to consumers, aggression | Club members, fighters competing and audience | **2** | **4** | **8** | Alcohol should not be served to individuals who are responsible for organising the event- including fighters or cornermen (prior to their respective bout) or other helpers. Alcohol is not to be served to anyone deemed to be too intoxicated. Alcohol is to be kept away from the ring and responsible drinking behaviour is encouraged. | **2** | **2** | **4** | Security present to observe and promptly handle any participant causing an issue. |
| ‘Making Weight’ | Injury or illness, mental distress | Fighters competing in bouts | **2** | **4** | **8** | Fighters should be discouraged weeks prior to events of habits regarding making weight. Bouts should be accommodated to fit the weight of each fighter rather than having a fighter take measures to be eligible for a certain bout. Weigh ins should also be monitored prior to bouts to ensure fairness.  | **1** | **2** | **2** |  |
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| ***PART B – Action Plan*** |
| **Risk Assessment Action Plan** |
| **Part no.** | **Action to be taken, incl. Cost** | **By whom** | **Target date** | **Review date** | **Outcome at review date** |
| 1 | Ensure paramedics and first aiders on hand at all times | MMA committee | 8/3/24 | 7/2/24 | First aiders supplied via Beyondfirstaid |
| 2 | Fighters will be made to have all appropriate gear, mouth guards etc | MMA committee | 8/3/24 | 7/2/24 | Inventory has been updated as of 1/1/24, shin pads and gloves available but fighters encouraged to supply own |
| 3 | Ensure appropriate security coverage. | MMA committee | 8/3/24 | 7/2/24 |  |
| 4 | Health Checks of fighters before and after fight | MMA committee | 8/3/24 | 7/2/24 | Weigh ins asked to be done (a week) before the day/ on the day |
| 5 | Ensure IDs are checked especially for alcohol purchase | MMA committee | 8/3/24 | 7/2/24 |  |
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| Responsible manager’s signature: Calvin Feliciano | Responsible manager’s signature: Lewis Patrick |
| Print name: Calvin Feliciano  | Date:7/2/24 | Print name: Lewis Patrick | Date 7/2/24 |

**Assessment Guidance**

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| 1. Eliminate
 | Remove the hazard wherever possible which negates the need for further controls | If this is not possible then explain why |  |
| 1. Substitute
 | Replace the hazard with one less hazardous | If not possible then explain why |
| 1. Physical controls
 | Examples: enclosure, fume cupboard, glove box | Likely to still require admin controls as well |
| 1. Admin controls
 | Examples: training, supervision, signage |  |
| 1. Personal protection
 | Examples: respirators, safety specs, gloves | Last resort as it only protects the individual |

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| **LIKELIHOOD** | 5 | 5 | 10 | 15 | 20 | 25 |
| 4 | 4 | 8 | 12 | 16 | 20 |
| 3 | 3 | 6 | 9 | 12 | 15 |
| 2 | 2 | 4 | 6 | 8 | 10 |
| 1 | 1 | 2 | 3 | 4 | 5 |
|  | 1 | 2 | 3 | 4 | 5 |
| **IMPACT** |

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| Impact | Health & Safety |
| 1 | Trivial - insignificant | Very minor injuries e.g. slight bruising |
| 2 | Minor | Injuries or illness e.g. small cut or abrasion which require basic first aid treatment even in self-administered.  |
| 3 | Moderate | Injuries or illness e.g. strain or sprain requiring first aid or medical support.  |
| 4 | Major  | Injuries or illness e.g. broken bone requiring medical support >24 hours and time off work >4 weeks. |
| 5 | Severe – extremely significant | Fatality or multiple serious injuries or illness requiring hospital admission or significant time off work.  |

Risk process

1. Identify the impact and likelihood using the tables above.
2. Identify the risk rating by multiplying the Impact by the likelihood using the coloured matrix.
3. If the risk is amber or red – identify control measures to reduce the risk to as low as is reasonably practicable.
4. If the residual risk is green, additional controls are not necessary.
5. If the residual risk is amber the activity can continue but you must identify and implement further controls to reduce the risk to as low as reasonably practicable.
6. If the residual risk is red do not continue with the activity until additional controls have been implemented and the risk is reduced.
7. Control measures should follow the risk hierarchy, where appropriate as per the pyramid above.
8. The cost of implementing control measures can be taken into account but should be proportional to the risk i.e. a control to reduce low risk may not need to be carried out if the cost is high but a control to manage high risk means that even at high cost the control would be necessary.

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| Likelihood |
| 1 | Rare e.g. 1 in 100,000 chance or higher |
| 2 | Unlikely e.g. 1 in 10,000 chance or higher |
| 3 | Possible e.g. 1 in 1,000 chance or higher |
| 4 | Likely e.g. 1 in 100 chance or higher |
| 5 | Very Likely e.g. 1 in 10 chance or higher |