

BOA Controlled Risk Assessment

For The British Octopush Association

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REVISION HISTORY

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1.0	27/05/11	Formerly accepted	Phil Lawrence
1.1	20/01/14	Revised	Phil Lawrence
1.2	13/12/14	Minor formatting	Phil Lawrence
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1.3	23/10/19	Changes to description & addition of apnoea. Reviewed and amended by Dr Tim Fitzsimons (UKDMC Diving Referee and Hyperbaric Specialist)	Phil Lawrence
1.4	14/07/20	COVID-19 Risks included	Phil Thompson

1.5	29/09/2025	Minor Revision, removal of COVID Risks as no longer applicable.	David Surridge
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- This document takes account of the risks presented by UWH (Underwater Hockey AKA Octopush).
- Each **initial risk** is primarily controlled by the local pools normal operating procedures (NOP).
- Specific UWH risks are controlled by the BOA through its rules, briefings, competition guidelines & other documentation.
- The **resultant risk** level can subsequently be used to assess the *local risk* by BOA clubs and teams on the **BOA Club Risk Assessment** form.
- Risks identified locally, and any variations from these controlled risks, should be added to the **BOA Club Risk Assessment** form and take account of how the clubs officials and members control these risks.
- Only BOA recognised clubs are covered by the contents of this document.
- To confirm the status of the club or session email: membership@gbuwh.co.uk.

Description:

Underwater hockey was invented in the early 1950s by sub-aqua divers in Southsea and the game is now played worldwide. It is a snorkelling game, in which players wear basic equipment of a mask, snorkel, fins, and water polo hats. The players return to the surface at regular intervals to breathe, which becomes more frequent the harder and faster they play, as the higher CO₂ level will be the dominant reflex, rather than hypoxia. The game is played in swimming pools of all sizes, shapes & depths, using sticks/bats of approximately 30cm. The idea of the game is to use the stick to push/propel the 1.2 kilogramme puck around the pool bottom and into the opposing team's goal, which consists of a three metre tray at the opposing end of the pool. For competitions there are up to 10 people in each team, but only six are allowed in the water at one time. The game is controlled by 2 (or 3) water referees and a (chief) referee on the side, who is assisted by a timekeeper and goal-scorer.

Ref. No.	To identify each hazard.	Hazard	What could cause harm – this may be physical, chemical, biological, psychological etc.
Consequences	What could happen / nature of injury – how might someone be harmed?	Risk to	Who might be harmed – directly or indirectly
Likelihood (L):	1 = Unlikely (Low) 2 = Plausible 3 = Possible 4 = Probable 5 = Very Likely (High)	Severity (S) (Consequence)	1 = Slight / Minor 2 = First Aid 3 = Hospital Admission 4 = Permanently Disabled 5 = Fatal / Major
No.'s affected (N)	1 = 1; < 4 = 2; 4 or more = 3	Environment (E)	1 = Internal; 2 = External; 3 = Remote N.B. Where this is applicable to the hazard.
Initial Risk (IR)	= L x S x N x E i.e. before any control measures are put in place.	Existing Control Measures	Lists all relevant controls and references to them, e.g. Competition and games rules, guidelines laid out in BOA Club Handbook and other relevant documentation, advice on elimination of hazard, method of reduction of risk, isolation of the problem, training available and the use of Personal Protection Equipment (PPE).
Resultant Risk (RR)	= L x S i.e. after control measures are put in place.	References	<ol style="list-style-type: none"> 1. BOA Club Handbook 2. BOA Rules 3. BOA Club Coaching Manual 4. Competition Briefings

No.	Hazard	Consequences	Risk to	L	S	N	E	IR	Existing Control Measures (BOA Club Handbook Recommendations – unless referenced to other documentation)	Resultant		
										L	S	
1	General uncontrolled, reckless or dangerous play	Various injuries	Players	5	5	2	1	50	<ul style="list-style-type: none"> All games (and training) should be conducted within the rules and guidelines laid down by the BOA. Sessions should be closed to public swimming. Club officials should ensure that the club and all participants are valid members of the governing body (the BOA), and abides by its rules. All coach's & instructors should be BOA qualified. All members are covered by BOA insurance and prospective members are covered for the initial 28 days. Where a referee has not been nominated, for casual games, captains should be selected for each team and they should enforce the rules. Anyone responsible for deliberately dangerous play will be excluded from the game and if appropriate the tournament⁴. Clubs officials, referees, coaches and instructors should be briefed on the NOP (Normal Operating Procedures) and EAP (Emergency Action Procedures) by pool staff. All players should be made aware of these procedures. BOA recommends that a qualified in-water referee, instructor or other club official should life-guard the session, prior to them being in the water a dedicated lifeguard. The contractual agreement between pool and UWH Club should include agreed lifeguard cover. 	1	3	3
2	Personal medical problems	Generally getting into difficulties, panic or drowning	Players	4	5	1	1	20	<ul style="list-style-type: none"> Clubs gather information on pre-existing medical conditions of all participants. All Coach's & Instructors should be BOA qualified. Coach's & Instructors should be notified of any relevant medical problem declared by a new member¹ and monitor them closely - especially when new to the game. Club officials should raise awareness with other officials of any medical problem they discover amongst their players. Pool staff should brief club officials, Coaches and Instructors on EAP. The club referees, or other officials, should have suitable life-saving skills or the pool should provide a lifeguard for UWH sessions. Contractual agreement between pool and UWH Club should include agreed lifeguard cover. 	1	3	3

									<ul style="list-style-type: none"> ▪ Club officials should ensure that all participants are valid members of the governing body (the BOA) and they abide by its rules. 			
3	Poor swimming ability e.g. weak swimmers	Generally getting into difficulties, panic or drowning	New players	5	5	1	1	25	<ul style="list-style-type: none"> • Prospective members should take a swim test: <ul style="list-style-type: none"> ◦ i.e. be able to swim a minimum distance of 25m before being introduced to full snorkelling equipment and capable of recovering a brick from the pool bottom. • None swimmers and very weak swimmers should have their memberships deferred until they can pass a swim test. • Beginners should be closely supervised³. • In-water referees and instructors should have suitable life-saving skills, or a lifeguard should be provided, especially for the period up until the referees are ready. If necessary, the pool should provide a life-guard. • UWH clubs to be given relevant information taken from pool facilities NOP and EAP. • Copies of qualifications of each instructor or coach and BOA insurance details, should be given to pool authority, if requested. 	1	3	3
4	Substitution	Collision injuries to players.	Players	5	4	2	1	40	<ul style="list-style-type: none"> • Players are forbidden² to dive in and required to enter the water slowly with one hand on the side. • Major competitions⁴ use 'in-water substitution' wherever possible. • Use of side-substitution is recommended for other competitive matches, wherever possible. • End-substitution should only be used in very casual circumstances, or where other options are impossible. • Clubs are advised to apply these rules when training and any players are in the water. 	2	2	4
5	Physical contact with other players	Cuts, bruises & other injuries e.g. nose bleed, burst ear-drum, tooth damage, scrapes and other non-life threatening injuries.	Players	5	4	2	1	30	<ul style="list-style-type: none"> • Octopush is a non-contact sport and rules dictate that barging, and blocking are not allowed². • Members should be made aware of the need to take care within the water¹ regarding contact with other players. However, due to the close nature of the sport, minor injuries can occur. • Players are obliged to wear mouth guards, gloves and swimming caps with ear protection at competitions and are advised to do the same at local sessions. • Venues have trained lifeguards able to treat minor injuries in accordance with their qualifications. • Players with suspected burst ear-drums and deeper cuts should be referred to medical attention and advised not to play. 	3	3	9
6	Physical contact with the pool infrastructure	Major or minor injuries, inc. unconsciousness, spinal injury and drowning.	Players	5	5	1	1	25	<ul style="list-style-type: none"> • It is recommended that, where possible, all obstructions should be removed from the playing area. • New members must be informed about the depth of the pool and other potential hazards before they use the pool for the first time³. 	3	3	9

									<ul style="list-style-type: none"> Players are advised not to dive into shallow water and follow other pool guidelines. 			
7	Depth	Burst ear-drum / running out of air/ being 'out-of-your-depth'.	Players & Referees	3	3	1	1	6	<ul style="list-style-type: none"> Players are trained in the Valsalva Manoeuvre to equalise the pressure and therefore any depth can be used. This can also be achieved by swallowing or a yawning motion³. Players who don't use these methods feel ear pain and therefore cannot get to depths of typically greater than 1.5m. Ears clear (re-equalise) naturally when returning to the surface. Frequently returning to depth reduces the need to repeatedly equalise, as simply breath-holding repeats the equalisation. UWH is played in various depths, many in excess of the normal 2 or 3m. Increased depth increases the time under water by a such a short time (typically only 1 second) that players quickly adjust & acclimatise. Players are not allowed to stand on the bottom² (in any depth) and are taught to float motionless on the surface facing down, breathing through the snorkel (aka – the rest position). Treading water is unnecessary! Deeper water consequently makes the play safer for the players below. 	1	3	3
8	Tripping or slipping	Personal injury	Players & Referees	5	3	1	1	15	<ul style="list-style-type: none"> Members are advised not to run, or wear fins, while walking on the poolside. Equipment & kit-bags should be stowed correctly and kept away from the pool edge. Pools are naturally slippery environments. Pool rules should be observed by all members. Any faults with the pool infrastructure should be reported to the pool staff. Good housekeeping should be encouraged by all officials, e.g. rubbish put in bins. 	3	3	9
9	Hyper-ventilating Or Apnoea	Blackouts, drowning	Players	3	5	1	1	15	<ul style="list-style-type: none"> This is highly unlikely to happen in a normal playing situation, as players are working hard and fast, the urge to breathe is strong. Club Coaches, Instructors and other officials are well educated on the subject³. There is no time in a playing situation to practice the techniques used by freedivers, therefore it remains the fittest players who can hold their breathe a few seconds longer, or return to play sooner after breathing¹. When attempting distance or timed breath holding exercises, coaches should include a reminder for players, especially new members, not to hyperventilate, as this could precipitate a blackout. Safety players should observe on a 1:1 basis, capable of bringing the player to the surface, responding with vocalisation, breathing on the players face and if needed rescue breaths. 	2	3	6

									<ul style="list-style-type: none"> An explanation of the problem, relevant to the level of the student, should be included in basic training³. 			
10	Fatigue	Panic or drowning	Players & Referees	4	3	1	1	12	<ul style="list-style-type: none"> New players are taught the 'rest position' – see sect. 7. Experienced players are unlikely to suffer. Agreed life guarding levels as per NOP and EAP 	2	2	4
11	UWH goals (gullies)	Manual handling injuries to players --- Damage to pool tank floor and equipment.	Players & Referees	5	3	1	1	15	<ul style="list-style-type: none"> Goals should only be handled by experienced players. Goals should be stored in a purpose made position to accommodate the size and the need to access on a regular basis. Goals should be placed underwater and recovered by two persons, wherever possible. Facility Staff should be trained in manual handling operations. Equipment should be made to BOA standards² and inspected on set up prior to use. 	2	2	4
12	Playing equipment faults	Cuts, scratches and other injuries.	Players & Referees	5	3	1	1	15	<ul style="list-style-type: none"> Rules dictate that any equipment that might be dangerous or might harm another player in any way is not allowed². Kit inspections are conducted at BOA competitions⁴. The BOA recommends that these are conducted at local sessions. Mouth guards are recommended and obligatory in all competitions⁴ and should be fitted in a 'non-dangerous' way. Gloves can have no solid materials in them². Caps with ear protection must be worn at all sessions². Any cracked, broken or damaged equipment must not be used. It is the responsibility of competition officials to enforce this and for club officials to do the same at local sessions. All masks must be made of two-piece tempered glass or plastic lenses². All snorkels must be soft, flexible, cut flat at the top and free of protrusions². Use of un-approved or open foot fins is prohibited. i.e. no buckles or sharp edges². Sticks/pushers must meet BOA safety specifications². 	2	2	4
13	UWH Puck	Bruises, cuts & scratches and damage to pool floor and equipment	Players & pool infra-structure	5	3	1	1	15	<ul style="list-style-type: none"> Shots to the area near the head are not allowed². All pucks used should conform to BOA standards². Pucks are manufactured with plastic and rubber coating so as to be safe and non-damaging². 	3	1	3
14	Installation of barriers	Drowning	Installers	3	5	1	1	15	<ul style="list-style-type: none"> Trained scuba divers to carry out the fixing at the bottom of the pool Snorkellers only used to deliver the barrier sections to the pool bottom. Safety divers - buddy system. Pool lifeguards on-duty. 	1	5	5

15	Tile scraping, puck and stick collisions	Injury to the hands.	Players	5	4	1	1	20	<ul style="list-style-type: none"> Hand protection should always be worn² to prevent tile abrasion to the knuckles. Gloves of approved UWH design only are to be used to protect the playing hand from collisions with the puck and sticks. 	3	2	4
16	Air temp	Hyperthermia / hypothermia	Players & Referees	3	3	3	2	54	<ul style="list-style-type: none"> Members are advised to dress accordingly, and wear protective clothing at open air events & venues, whilst not playing. Open-air competition organisers should provide shelter against the weather for participants. 	1	3	3
17	Sunlight	Sunburn	Players & Referees	4	3	3	2	72	<ul style="list-style-type: none"> Members are advised to dress accordingly, and wear protective clothing at open air events & venues, whilst not playing. Open-air competition organisers should provide shelter for participants from the weather. 	1	3	3
18	Lack of medical facilities	Lack of immediate treatment	Players & Referees	4	5	2	3	120	<ul style="list-style-type: none"> Members attending competitions in foreign or remote places should undertake a risk assessment prior to travelling, consider optional arrangements and only attend if they have been able to mitigate the risks. All participants on their conclusions. 	3	2	6
19	Jewellery	Cuts & scratches	Players	5	3	1	1	15	<ul style="list-style-type: none"> The BOA recommends that no jewellery is allowed in any session. It is also recommended that locker keys are not worn during UWH sessions. Club official should exclude anyone wearing anything which might hurt another participant from the session. 	2	2	4
20	Chewing food, gum or sweets.	Choking, asphyxia or sickness.	Players & Referees	3	3	1	1	9	<ul style="list-style-type: none"> BOA recommended that food, gum and sweets are not allowed in any session. Most pools also ban these items. 	1	3	3
21	Muscular problems / over exertion	Sprains, strains, twisted ankles, etc.	Players	4	2	1	1	8	<ul style="list-style-type: none"> Players are advised to do warm-up exercises³. Stitches and cramps are more common in players new to the sport. They are advised to stretch the muscle involved. 	3	2	6
Document originated By: Phil Lawrence			Date: 23 th Oct 2019			To be reviewed annually by a BOA delegate.			Date: 29/09/2025 - David Surridge			