1. Introduction

This is an assessment checklist to use in assessing an applicant to gain a permit to lead Scuba Diving. More details on the permit scheme, assessing, technical skills and Scuba Diving can be found in resources listed on [scouts.org.uk/a-z](http://www.scouts.org.uk/a-z).

**Using this checklist**

This checklist is the syllabus that an applicant should be assessed against for the technical section of gaining a permit. The columns on the right of each skill show whether it is applicable for each type of permit:

* P – Personal permits
* L – Leadership permits

Once an assessment is complete, the assessor should either submit a recommendation on Compass (if the assessor and applicant are from the same County/Area/Region) or fill in the back page and give it to the applicant to take to their Commissioner to be added to Compass.

1. Equivalent qualifications
2. If an applicant holds an award of the British Sub Aqua Club (BSAC) or Professional Association of Diving Instructors (PADI) from the table below, or equivalent or higher, and has up to date logged experience, then no practical assessment is likely to be required as they have already shown competence in all of the skills listed in this assessment checklist. They will still require a recommendation from an assessor for a Commissioner to grant them a permit.

|  |  |
| --- | --- |
| **Qualification** | **Permit** |
| Practical Instructor Award (BSAC) | Scuba Diving Sheltered Water – Leadership |
| Open Water Scuba Instructor Award (PADI) | Scuba Diving Sheltered Water – Leadership |
| Open Water Scuba Instructor Award (PADI) | Scuba Diving Open Water – Leadership |

1. Technical publication

If you require any more technical information on any of the elements in the checklist, these can be found in the official technical manual, which is:

**The Diving Manual: An Introduction to Scuba Diving** *by BSAC* ISBN 0-9538919-2-5

1. Scuba Diving Name:

| Core Skill | Sheltered Water | | Open Water | |
| --- | --- | --- | --- | --- |
| P | L | P | L |
| **Responsibilities** |  |  |  |  |
| * Be aware of the limits of your own abilities |  |  |  |  |
| * Choose objectives appropriate to the group. |  |  |  |  |
| * Plan effectively in advance. |  |  |  |  |
| * Knowledge of the use of dive markers and flags. |  |  |  |  |
| **Group Management** |  |  |  |  |
| * Manage and communicate with a group effectively. |  |  |  |  |
| * Ensure the group is adequately briefed before scuba diving. |  |  |  |  |
| * Ensure all the group are aware of who their diving buddy is and agree on when the ascent has to begin. |  |  |  |  |
| **Risk Assessment** |  |  |  |  |
| * Know how to complete a risk assessment. |  |  |  |  |
| * Able to effectively identify the hazards and risks and know how to reduce or remove them, during scuba diving. |  |  |  |  |
| **Weather** |  |  |  |  |
| * Knowledge of where to gain weather information. |  |  |  |  |
| * Knowledge of how weather conditions can affect scuba diving. |  |  |  |  |
| * Knowledge of and ability to read tide tables. |  |  |  |  |
| **Technical** |  |  |  |  |
| * Knowledge of signals used in diving. |  |  |  |  |
| * Ability to assemble equipment correctly before use. |  |  |  |  |
| * Ability to enter and exit the water safely. |  |  |  |  |
| * Ability to move through the water and control personal speed, direction and depth. |  |  |  |  |
| * A knowledge of breathing techniques and the ability to remove and replace a regulator. |  |  |  |  |
| * Ability to manage an Oxygen Administration system. |  |  |  |  |
| * Ability to plan suitable dives. |  |  |  |  |
| * Ability to resurface safely. |  |  |  |  |
| * Ability to clear, remove and refit a mask underwater. |  |  |  |  |
| **Emergency Procedures** |  |  |  |  |
| * Knowledge of relevant procedures in the event of an accident. |  |  |  |  |
| * Knowledge of the emergency ascent procedures. |  |  |  |  |
| * Ensure that all participants are briefed on the emergency ascent procedures. |  |  |  |  |
| * Ability to recover an incapacitated casualty. |  |  |  |  |
| * Demonstrate correct use of distress signals. |  |  |  |  |
| * Demonstrate a self-rescue and buddy rescue. |  |  |  |  |
| **Equipment** |  |  |  |  |
| * Knowledge of personal equipment required and how it is used. |  |  |  |  |
| * Knowledge of group equipment required and how it is used. |  |  |  |  |
| * Understanding of additional equipment required by the leader. |  |  |  |  |
| * Understanding of how and where all equipment should be checked before use. |  |  |  |  |
| * Knowledge of how air tanks should be secured when being transported. |  |  |  |  |

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| 1. Notes: |
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**Scuba Diving - Permit Assessment**

DATA PROTECTION: This form is used to collect information about you for the purpose of approving your permit application, this is to be used by your Assessor and Commissioner. As part of this form we collect personal data about you, your Assessor and Commissioner, this detail is required so that we can log your permit onto Compass (the Scout’s membership database) and also follow up as necessary with your Assessor and Commissioner. We do not share your personal data provided in this form with any third parties. The data provided in this form is stored securely in Compass. We take your personal data privacy seriously. We will keep the data we capture from this form, in line with the Scout’s Data Retention Policy and it will be securely disposed of six months after the permit expires.

The applicant should keep this form once it has been completed by the assessor and take it to their Commissioner.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant’s name** | |  | | | | | **Membership No.** | | |  | |
| **Type** | | Sheltered Water  / Open Water | | | | | | | | | |
| **Category** | | Personal  / Leadership | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. TECHNICAL COMPETENCE | | | | | | | | | | Done |  |
| **Description:** Technical assessment based on competence in all areas of the assessment checklist.  **To be completed by:** Either a County Assessor or an External Assessor with the appropriate NGB award. | | | | | | | | | | | |
| Restrictions based on technical assessment: | | | | | | | | | | | |
|  | | | | | | | | Date | |  | |
| Assessor Signature | | |  | | | | | **Name** | |  | |
| County Assessor Membership Number | | | | |  | | | | | | |
| External Assessor Phone/Email | | | | |  | | | | | | |
| External Assessor Qualification | | | | |  | | | | | | |
|  | | | | | | | | | | | |
| 2. SCOUT ASSOCIATION RULES | | | | | | | | | | Done |  |
| **Description:** Check of knowledge of the appropriate Scout Association rules for running Scuba Diving. Appropriate rules can be found in the Scuba Diving section of [scouts.org.uk/a-z](http://www.scouts.org.uk/a-z).  **To be completed by:** Either a County Assessor, Commissioner or nominee of the Commissioner. | | | | | | | | | | | |
| Restrictions based on knowledge of The Scout Association rules: | | | | | | | | | | | |
|  | | | | | | | | | Date |  | |
| Signature |  | | | Name | |  | | | Role |  | |
|  | | | | | | | | | | | |
| 3. SAFEGUARDING | | | | | | | | | | Done |  |
| **Description:** Check applicant has undertaken the necessary personal enquiry checks and received the appropriate safeguarding training.  **To be completed by:** Commissioner or nominee of the Commissioner. | | | | | | | | | | | |
| Restrictions based on Child Protection: | | | | | | | | | | | |
|  | | | | | | | | Date | |  | |
| **Signature** |  | | | Name | |  | | Role | |  | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 4. PERSONAL SUITABILITY | | | | | | | | Done |  |
| **Description:** Check the applicant is suitable (attitude, etc.) based on the demands of Scuba Diving.  **To be completed by:** Commissioner or nominee of the Commissioner. | | | | | | | | | |
| Restrictions based on personal suitability: | | | | | | | | | |
|  | | | | | | | Date |  | |
| **Signature** |  | | Name | |  | | Role |  | |
|  | | | | | | | | | |
| 5. PERMIT GRANTED | | | | | | Entered on to Compass | | |  |
| Restrictions: | | | | | | | | | |
|  | | | | Permit expiry date (max. 5 years) | | | |  | |
| Commissioner signature | |  | | | | Date | |  | |