1. Introduction

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

1. 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:

* L – Leadership permits
* S – Supervisory permits

Once an assessment is complete the assessor should fill in the back page and give it to the applicant to take to their Commissioner.

1. Equivalent qualifications

If an applicant holds an award of the British Canoeing (BC) 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** |
| Bell Boat Helm | Bell Boating - 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:

**Bell Boat Helm Handbook** *by British Canoeing*

Bell Boating Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Core Skill** | **L** | **S** |
| --- | --- | --- |
| **Responsibilities** |  |  |
| * Be aware of the limits of your own abilities |  |  |
| * Choose objectives appropriate to the group. |  |  |
| * Plan effectively in advance. |  |  |
| * Knowledge of the rules / regulations which govern the use of waters. |  |  |
| * Able to identify when remote supervision is not appropriate in running bell boating. |  |  |
| **Group Management** |  |  |
| * Manage and communicate with a group effectively. |  |  |
| * Ensure the group is adequately briefed before bell boating (including lifting techniques and emergency procedures). |  |  |
| * Able to identify group members with the skills and experience to be able to lead bell boating as a designated leader under supervision. |  |  |
| * Able to set up appropriate monitoring systems to effectively supervise bell boating groups. |  |  |
| * Able to ensure that designated leaders are aware of their responsibilities. |  |  |
| **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 bell boating. |  |  |
| * Able to train participants to carry out their own dynamic risk assessments. |  |  |
| * Able to complete a risk assessment and identify those factors that are likely to change gradually or quickly. |  |  |
| * Able to identify emergency procedures in a number of situations |  |  |
| **Weather** |  |  |
| * Knowledge of where to gain weather information. |  |  |
| * Knowledge of how weather conditions can affect bell boating. |  |  |
| **Technical** |  |  |
| * Ability to launch and recover the bell boat, including the use of trolleys and trailers. |  |  |
| * Ability to safely leave and approach a bank. |  |  |
| * Ability to control the speed and direction of the Bell Boat. |  |  |
| * Knowledge of how to safely load a boat. |  |  |
| * Knowledge of basic paddling technique. |  |  |
| * Ability to perform a safe emergency stop. |  |  |
| * Ability to teach proper usage of a paddle and basic paddle strokes appropriate to the activity being undertaken. |  |  |
| * Ability to safely navigate a lock. |  |  |
| * Experience in a variety of environments for bell boating. |  |  |
| * Experience of working with a variety of different activity groups in bell boating. |  |  |
| **Emergency Procedures** |  |  |
| * Knowledge of relevant procedures in the event of an accident. |  |  |
| * Knowledge of how to deal with capsized boats and how to right them. |  |  |
| * Ability to demonstrate man overboard recovery. |  |  |
| **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. |  |  |

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| Notes |
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Bell Boating 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** | | |  | | | | **Member No.** | | | | | | | |  | | | |
| **Permit applied for** | | | B1 waters  B2+ waters | | | | | | | | | | | | | | | |
| **Category** | | | Leadership  Supervisory | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| 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: | | | | | | | | | | | | | | | | | | |
| Assessor: | | **Signature** | | |  | | | | | | | | **Date** | | |  | | |
|  | | County (if TSA Assessor) | | | | | |  | | | | | Phone | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| 2. SCOUT ASSOCIATION RULES | | | | | | | | | | | | | | | | Done |  | |
| **Description:** Check of knowledge of the appropriate Scout Association rules for running bell boating. Appropriate rules can be found in [www.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 Safeguarding: | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Date | | |  | | |
| **Signature** |  | | | | | Name | | |  | | | | Role | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| 4. PERSONAL SUITABILITY | | | | | | | | | | | | | | | | Done |  | |
| **Description:** Check the applicant is suitable (attitude etc) based on the demands of bell boating.  **To be completed by:** Commissioner or nominee of the Commissioner. | | | | | | | | | | | | | | | | | | |
| Restrictions based on Personal Suitability: | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | Date | | |  | | |
| **Signature** |  | | | | | Name | | |  | | | | Role | | |  | | |
|  | | | | | | | | | | | | | | | | | |
| 5. PERMIT GRANTED | | | | | | | | | | | Permit added to Compass | | | | | |  | |
| Restrictions: | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | Expiry Date | | | |  | | |
| Commissioner Signature | | | |  | | | | | | | | Date | | | |  | | |