

## Carriage Driving Coach Review Form

## Coach Details

Name:	Group Name:	
Group Driving Organiser:	Contact Number:	
Email Address:		
Assessor Details		
Name:		
Contact Number:		
Email Address:		
Please tick when seen:		
CD Coach Logbook		
Safeguarding Certificate Expiry Date:		
Disclosure Check (DBS, PVG or Access NI)	Date Awarded:	
Valid First Aid Certificate (recommended b	ut not required) Date Awarded:	
Brief overview of additional experience, training or CPD completed within the past 3 years:		



## Practical Observation



Please ensure all individual parts of the assessment are marked as  $\sqrt{\text{(acceptable)}}$  or x (requiring reassessment)

TASKS TO BE ASSESSED		
Meeting and greeting both drivers and volunteers		
Pre Drive checks and briefing		
Check and warm-up of equine		
Putting- To, fitting vehicle and harness		
Organisation of helpers with the above tasks during driving and taking out		
Mounting vehicle, taking up reins and whip		
Driving turnout to demonstrate technique to assessor		
Taking charge of mounting and dismounting of disabled driver		
Taking charge of whole turnout and conducting safety checks		
Working with ambulant and non-ambulant driver		
Taking out equine, care of equine and cooling down		
End of session feedback, plans for next session or future		
Assessor Comments:		
Please ensure that all individual points of the assessment have been marked as appropriate (√ or x). Please note- any part of the review considered unacceptable may be result in further training, and an additional review, being required.  □ Next review in 1 year □ Next review in 3 years		
Assessor Print Name: Signature:		
Date:		

When completed please email this form to the Coaching Team <u>coaching@rda.org.uk.</u>

Please also copy to your Regional Carriage Driving Representative and retain a copy for the Group.

