

RDA COACH REVIEW FORM



COACH NAME: _____

GROUP: _____

DATE: _____

Passport seen and up to date: Y/N

Safeguarding Certificate seen: Y/N

Expiry Date: _____

PRE-VISIT NOTES:

BRIEFING NOTES:

OBSERVATION/EVIDENCE

Essential is marked with a *

Capability ¹	A	C	P	Evidence (MUST be included where action required)
Pre Session Checks				
Plan for a suitable and progressive session*	A	C	P	
Risk assessment*	A	C	P	
Riders and volunteers welcomed / briefed	A	C	P	
Equines and tack fit for the job*	A	C	P	
Mounting and Dismounting				
Safe and effective mounting and dismounting*	A	C	P	
Knowledge & Rapport with Riders				
Preparation and communication	A	C	P	
Medical conditions and contra-indications*	A	C	P	
Involvement and progression for all	A	C	P	
Coaching Skills				
Listens / questions to engage & develop riders	A	C	P	
Positive behaviour and language	A	C	P	
Feedback provided to riders	A	C	P	
Technical Instruction				
Position and posture*	A	C	P	
Use of aids*	A	C	P	
Equine interaction*	A	C	P	

¹ A: Action required as falls below competent standard, C: Competent, meets standard, P: Proficient, exceeds standard (see accompanying capability table for details). All of the essential capabilities must be met along with at least 3 of the 5 desirable capabilities for Group Coaches. All capabilities must be met with at least four Proficient capabilities anywhere for Coaches. **Take a photo of this form once completed and send to the coach and RDA National Office.**

NOTES FROM POST-OBSERVATION DISCUSSION

COACH REFLECTIONS	
DISCUSSION AND FEEDBACK From Coach Developer	

AGREED DEVELOPMENT PLAN

GOAL	WHAT I NEED TO DO	SUPPORT I NEED	TARGET DATE

This review is evidence that the coach REMAINS / IS NOT at the standard required to coach within RDA Group sessions, in line with their qualification.

Signature of Reviewer: _____

Name of Reviewer: _____

Signature of Coach: _____

Date: _____