



2019 SOUTHWEST FLORIDA COUNCIL RISK MANAGEMENT AWARD



To qualify for the Southwest Florida Council Risk Management Award, the unit must complete (12) of the following requirements.

Pack, Troop, Crew or Post # (circle one) _____ Chartered Organization _____

City _____ State _____ Recharter Month _____ District _____

2019 YEAR 2020 YEAR **MARK YES (Y) OR NO (N)** (* Items are Required plus two additional items)

- *1. _____ _____ **Health and Safety Position.** Establish and maintain a Unit Health and Safety Chairman. *Our chairman is:*
Name _____ Address _____
City _____ State _____ Zip _____ Email: _____
- *2. _____ _____ **Safety Check.** Conduct a safety check of the unit's meeting location using the checklist in the *Guide to Safe Scouting*.
- *3. _____ _____ **Adult / Youth Protection Training.** All registered adult leaders have up to date age appropriate Youth Protection Training -REQUIRED.
- *4. _____ _____ **Youth / Youth Protection Video.** Unit shows the appropriate YPT DVD to youth at unit meeting and records attendance. Available @ Scout Office & Shop **Date:** _____ # youth _____ Unit has record on file: Y ___ or N ___
- 5. _____ _____ **First Aid/Cardiopulmonary Resuscitation (FA/CPR).** At least two of the unit adult leaders are currently trained in first aid and cardiopulmonary resuscitation (FA/CPR).
- 6. _____ _____ **BSA Hazardous Weather Training & BSA Wilderness First Aid Unit** (*Troops/Crews/Posts*) have at least one leader trained or *C.S. Packs* must have at least one leader trained in **BALOO and BSA Hazardous Weather Training**.
- *7. _____ _____ **First Aid Kit.** Verify that the first aid kit for the unit is up to date.
- *8. _____ _____ **Guide to Safe Scouting.** The unit has a hard copy of the **Guide to Safe Scouting** or printed from on-line web address www.swflcouncilbsa.org & a copy of the **SWFL Guidelines for Aquatics, Shooting Sports and Climbing**.
- *9. _____ _____ **Unit Finance.** The unit files a Unit Money Earning Application Form with the Council for all money earning projects and has reviewed and adheres to BSA unit finance policies and procedures.
- 10. _____ _____ **Safe Swim Defense.** Unit leaders and youth are trained in Safe Swim Defense. Swim Tests done on regular basis.
- 11. _____ _____ **Safety Afloat.** Unit leaders and youth are trained in Safety Afloat.
- 12. _____ _____ **Health & Safety or Risk Management Promotion.** The unit conducted a health & safety or risk management program for Scouts and/or leaders such as a bike safety or related project. _____ Date _____
- *13. _____ _____ **Liability Automobile Insurance levels.** Liability automobile insurance levels are checked on all unit drivers-ON FILE. Unit equipment trailer's checked before each trip for tire wear and proper air.
- *14. _____ _____ **Medical Forms.** Have Medical Forms Parts A&B on file for all registered youth and adults (Part C recommended).

_____ **Date Submitted**

_____ **District Health & Safety Chairman**

_____ **Unit Leader**

Instructions: The completed application for the Risk Management Award is to be **submitted** to the SWFL Council Office with your annual recharter. Ribbon to be awarded upon completion.

OFFICE USE ONLY: Date Received: _____ Verified _____

Mailed: _____ Awarded in Person: _____