

FOR OFFICE USE ONLY:

Date received:		Notes:
If applicable, interview date:		

CARE/SUPPORT WORKER - APPLICATION FORM

Thank you for showing an interest in working for Care Dynamics. Please complete all sections, **incomplete forms may invalidate your application**. If you have any difficulties completing this form, please call us on 01274 307533. Please email completed form to admin@cdyorkshire.co.uk

Please post/deliver completed handwritten applications to: Care Dynamics (Yorkshire) Ltd, 297 Bradford Road, Riddlesden, Keighley, Bradford, BD20 5LD.

YOUR APPLICATION MUST BE LEGIBLE AND COMPLETED IN FULL.

Your name, address and contact details:					
Title: (please tick)	Mr	Mrs	Miss	Ms	Other
Gender: please tick)	Male		Female		Other
First name:					
Middle name:					
Surname:					
Preferred name:					
Email:					
Address, including postcode:					
Home telephone:					
Mobile telephone:					

Your personal details: <i>(for equal opportunity purposes)</i>			
Ethnicity: <i>(please tick relevant)</i>	White/White British	Asian/Asian British	Black/Black British
Religion:			
Sexual Orientation:			
Marital status:			
Date of birth:			
DBS number: <i>If you have a DBS already</i>			
Languages spoken:			
National Ins No:			

National Minimum Data Set (NMDS-SC): <i>(this is a Social Care Institute for Excellence electronic tool designed to gather minimum information about social care workforce)</i>		
Do you have previous paid experience of working in UK Social Care:	YES	NO
If yes, what date were you first employed in UK Social Care:		
Are you seeking sponsorship or already sponsored? If so, please give details:		
Nationality & place of birth:		
Date of arrival in UK, if born outside:		
Do you have a disability:	YES	NO

Where did you hear about us?	
Name of friend/colleague or job centre, job site, our website etc.	

Personal Care: <i>(your role will involve “personal care” such as bathing and toileting)</i>		
Are you willing to undertake?	YES	NO

Are you applying in response to a specific advertised position? <i>(complete if relevant)</i>	
Job title and/or reference number:	

Which role/contract type are you applying for? <i>(please only apply for full and part time contracts if you have experience and are able to commit to scheduled hours)</i>		
Core staff Full time hours:	37.5-hour permanent contract. Guaranteed hours, endeavouring to offer you a regular customer rota.	Tick if relevant
Core staff Part time hours:	16-hour permanent contract. Guaranteed hours, endeavouring to offer you a regular customer rota.	Tick if relevant
Casual staff:	These are zero-hour contracts, offering flexibility. We will endeavour to offer work based on your availability.	Tick if relevant

Number of hours available to work:		Write number here (note: we require a minimum commitment of 10 hours per month):					
What days are you available: (please tick)							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Day:							
Evenings:							
Sleep shifts:							
Nights:							
Do you have any specific day / time restrictions i.e. visa, sponsorship, college, school hours, other employment etc?							

Do you drive? <i>(not mandatory but desirable)</i>		
Do you have a valid UK driving license?	YES	NO
Do you own a car?	YES	NO
Do you have business insurance?	YES	NO

Distance prepared to travel? <i>(whether driving or using public transport)</i>		
We only work with BD postcodes are you prepared to travel to any BD postcode?	YES	NO

Are you a student? <i>(helps us to understand your availability)</i>		
Are you studying in college/university?	YES	NO
If so what course?		

WORK HISTORY

THIS SECTION MUST BE COMPLETED IN FULL

CQC regulations stipulate that we MUST document a comprehensive work history from leaving to present day (whether UK or overseas). If you have gaps (due to unemployment, child illness etc) please record these in date sequence and continue on separate page if you had more than seven previous employers. Alternatively, provide a separate full CV.

NOTE: IF YOU HAVE PREVIOUSLY BEEN DISMISSED FROM EMPLOYMENT YOU MUST DECLARE THIS SO THE MATTER CAN BE DISCUSSED.

What year did you leave school:

Employer	Date from (month/year):	Date to (month/year):	Name of company:	Position, summary of role & responsibilities	Reason for leaving:
1 st					
2 nd					
3 rd					
4 th					
5 th					
6 th					
7 th					

EMPLOYERS REFERENCE AND CONSENT

THIS SECTION MUST BE COMPLETED IN FULL

CQC regulations stipulate that we MUST send a reference request to your last two employers (preferably relevant to healthcare).

Last employer: *(or current if still employed)*

Name and position of person giving reference:	
Name of organisation representing:	
Dates employed between:	Reason for leaving:
Official email address:	
Full address and postcode:	
Telephone number:	

Second to last employer: *(or current if still employed by two companies)*

Name and position of person giving reference:	
Name of organisation representing:	
Dates employed between:	Reason for leaving:
Official email address:	
Full address and postcode:	
Telephone number:	

Reference consent

I hereby given my permission for Care Dynamics Yorkshire Limited to request a reference from ANY of my previous employers.

Print name:	
Sign name:	
Date:	
Where relevant, please tell us your notice period:	

CHARACTER REFERENCE

PLEASE NOTE THAT THIS SECTION ONLY APPLIES TO THOSE WHO HAVE NOT HAD TWO PREVIOUS EMPLOYERS

If you have not been employed twice previously, then three-character references from reliable sources are necessary or one employer and two-character references. Please ensure the nominated referee is aware you have proposed them and also note that **we will not accept character references from family members or friends** (full list of eligible professions available upon request).

Character reference 1

Name of character reference:

Professional capacity (i.e. tutor, manager, driving instructor, doctor, police man/woman etc)

E mail address (or full address if no access to emails)

Telephone Number:

Character reference 2

Name of character reference:

Professional capacity (i.e. tutor, manager, driving instructor, doctor, police man/woman etc)

E mail address (or full address if no access to emails)

Telephone Number:

Character reference 3

Name of character reference:

Professional capacity (i.e. tutor, manager, driving instructor, doctor, police man/woman etc)

E mail address (or full address if no access to emails)

Telephone Number:

MANDATORY TRAINING

You will need to have (or be willing to undertake) all the training listed below.

Please tick against courses you have undertaken, add dates, tick how it was delivered and whether certificates are available.

Courses	Tick:	Date achieved:	On line:	Face-face:	Certificate available?
Medication					
Safer people handling					
Health & Safety					
Infection control					
Food safety					
Basic first aid & CPR					
Safeguarding adults					
Safeguarding children					
MCA/DoL					
Equality & Diversity					
Learning Disabilities					
Fire safety					
Epilepsy Awareness					
Positive Behaviour/MVA					
Autism					

CARE CERTIFICATE (15 units) or NVQ

Courses:	Tick:	Date achieved:	On line:	Face-face:	Certificate available?
The Care Certificate , with observations					
Health & Social Care NVQ 2/3/4					

ANY OTHER TRAINING?

Please add any other courses you have undertaken,
add dates, tick how it was delivered and whether certificates are available.

Courses	Tick:	Date achieved:	On line:	Face-face:	Certificate available?

CLIENT GROUPS *(please tick areas appropriate to your past experience)*

Client groups	Previous experience
Learning difficulties	
Physical disabilities	
Autism	
Children	
Older People	
Epilepsy	
Head Injuries	
Challenging Behaviour	
Dementia	
Other (please write)	
Customer settings	Previous experience
Social inclusion	
Supported living	
Domiciliary (customers home)	
Rehabilitation	
Nursing home	
Residential home	
Day centre	
Hospital/hospice	
Other (please write)	

REHABILITATION OF OFFENDERS ACT 1974

Our role involves access to Vulnerable Adults; therefore, legislation requires enhanced DBS (Disclosure & Barring Service) and ISA (Independent Safeguarding Authority) checks.

The amendments to the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (2013 and 2020) provides that when applying for certain jobs and activities, certain convictions and cautions are considered 'protected'. This means that they do not need to be disclosed to employers, and if they are disclosed, employers cannot take them into account. Guidance about whether a conviction or caution should be disclosed can be found on the Ministry of Justice website.

Do you have a DBS certificate registered with the update service?

YES

NO

If yes, please write the certificate number and issue date:
Note, if not a new disclosure would need to be processed.

Certificate number:

Issue date:

Do you have any unspent conditional cautions or convictions under the Rehabilitation of Offenders Act 1974?

YES

NO

If yes, please give details:

Do you have any adult cautions (simple or conditional) or spent convictions that are not protected as defined by the Rehabilitation of Offenders Act 1974?

YES

NO

If yes, please give details:

I confirm I have read the above statement regarding the Rehabilitation of Offenders Act 1974. The information provided above is a true and accurate statement and I hereby confirm I have not (or have) a criminal record subject to the disclosure requirements of the Care Quality Commission.

Name:

Signed:

Date:

WHY ARE YOU SUITABLE FOR THIS ROLE?

In this final section , please tell us “why you are suitable for this role”.

*Please read the job description and person specification
and give examples of how you meet the essential criteria*

Note: minimum 250 words

DECLARATION:

I hereby declare that the information provided on this form is accurate and that I understand any untrue or misleading information will give my Employer the right to terminate any employment contract offered.

Data Protection/GDPR: The information requested within this application (and any further recruitment documentation) is necessary for Care Dynamics Yorkshire Limited (CDY) to make an employment decision and to subsequently satisfy employment law. By signing below, you are confirming that you give permission for your information to be considered by authorised CDY office staff.

Please note that applications not shortlisted will be safely destroyed.

Name:	
Signed:	
Date:	

Thank you for completing.

Please return at your earliest convenience.

We look forward to hopefully working with you.

Job Description	
Job title:	Care & Support Worker
Contract types:	<ul style="list-style-type: none"> • Full time permanent fixed/scheduled hours - 37.5 hour* • Part time permanent fixed/scheduled hours - 16 hour* • Casual – flexible hours <p style="text-align: right;">*Note, overtime available</p>
Reporting to:	Care Coordinators
Line Manager:	Care Manager
Location:	
<ul style="list-style-type: none"> • Domiciliary (customers own home) • Supported living • Community recreational, leisure and social inclusion • Nursing and residential home • Day service provisions 	
Key responsibilities:	
<ul style="list-style-type: none"> • Ensuring all customers are healthy, happy, living a fulfilling life, respected, valued, treated with kindness and dignity, safeguarded and protected against abuse, immediately reporting any concerns as per our safeguarding policy. • Encourage customer independence and allow them to take control of how they choose to live their life using a person-centred approach. • To support customers with all areas of their daily living e.g. domestic duties, cooking, shopping, laundry, cleaning, tidying, paying bills and budgeting. • To uphold Care Dynamics values at all times. • Undertake any other reasonable duties as requested. 	
Key duties:	
<ul style="list-style-type: none"> • Follow, monitor and deliver support in accordance with the customers care and support plans and ensure any necessary changes are reported and implemented. • To ensure confidentiality is maintained at all times. • Where needed, assist with personal care ensuring dignity is always maintained. • Monitor & record the administration of medication as per prescribed by the customers GP. • To encourage customers to become active members of their community eg assist in the planning of recreational, social, vocational, educational events and activities, supporting the customer as necessary during such activities. • To assist customers to develop and maintain good relationships with family, friends etc. • Work in collaboration with others to ensure customer needs are met and maintained e.g. colleagues, family, other professions etc. • Attend training sessions and meetings as requested; participate in development activities to maintain skills, knowledge in keeping with the role. • Ensure effective and regular communication takes place between fellow team members. 	
Administration:	
<ul style="list-style-type: none"> • Maintain accurate customers records in accordance with policy and procedure. • Where relevant ensure financial checks are made and recorded. • To have a working knowledge of Care Dynamics policies and procedures and ensure these are put into practise. • To ensure that all necessary administrative records are completed legibly and are submitted on time e.g. timesheets, mileage claims etc • To follow all local protocols within the service setting. 	
Professional development:	
<ul style="list-style-type: none"> • Meet with Line Manager on a regular basis to assess own performance against agreed objectives and identify development needs. • Attend and participate in twice yearly supervisions and annual appraisal. 	

Person Specification	CRITERIA		EVIDENCED VIA	
	Essential	Desirable	Application	Interview
Knowledge, Skills and Experience:				
You must have and be able to deliver the following values: Respect, Integrity, Compassion, Independence	Yes		Yes	Yes
Availability:				
Ability to commit to a range of different shift patterns including day time, nights, sleeps and some weekends.	Yes		Yes	
Personal care:				
Bathing, showering, toileting.	Yes		Yes	
Training and personal development				
Current mandatory training.		Yes	Yes	
Willingness to undertake further training.	Yes		Yes	
Social care qualification (NVQ) or equivalent.		Yes	Yes	
Experience:				
Supporting people in a social care environment.		Yes	Yes	Yes
Knowledge:				
Understanding of care and support.	Yes		Yes	Yes
Understanding of care and support plans.		Yes	Yes	Yes
Understanding of health and safety.	Yes		Yes	
Understanding risk assessment.		Yes	Yes	
Knowledge of CQC, their role and our responsibilities.		Yes		Yes
Specific Skills:				
Passionate about making a difference.	Yes		Yes	Yes
Willingness to travel to your place and between services as required.	Yes			Yes
Interpersonal Skills:				
Good verbal communications skills.	Yes		Yes	Yes
Good written communications and record keeping skills.	Yes		Yes	Yes
Good listening skills.	Yes		Yes	
Empathy and compassion.	Yes		Yes	Yes
Conflict resolution.	Yes		Yes	
Organisational Skills:				
Able to work alone or as part of a team.	Yes		Yes	
Able to prioritise own workload.	Yes		Yes	
Problem Solving:				
Ability to resolve any problems that may arise, whilst remaining professional.	Yes		Yes	
Understand how to help others use their own initiative.	Yes		Yes	
Other:				
Car user (full UK driving license).		Yes	Yes	