

Gainford Care Homes Ltd Gainford House Picktree Lane Chester-le-Street Co. Durham DH3 3SR Tel:+44 (0)191 389 5810 Email:admin@gainfordcarehomes.com

## **Application Pack**

### **GAINFORD Care Homes Limited**

Job Title: General Assistant

Accountable to: Home Manager

**Responsible to:** RMN/Senior Carer

### Job Summary

The post holder works to provide a supporting service to senior staff in charge. Duties are described within the following helping roles of support assistant.

Maintaining a safe and homely environment for service users, by duties in the care areas and prevention of cross-infection.

Receiving and giving of information.

Working with and lending support to the qualified nurse/senior carer for individual patients when required.

### Care Responsibilities

Personal and Social Care

- 1. Participation in the room preparation, welcome visitors, and give refreshments at the time of admission.
- 2. Attending to the needs of the carers/relative of patients/residents and courteous reception of visitors in the home.
- 3. Protecting patients/residents who are frail, unsteady when walking, disabled by poor vision or confusion from all types of accidents wherever possible.
- 4. Assisting patients/residents in the care of their personal clothing and other possessions/valuables in accordance with the home policies/procedures.
- 5. Receiving and acting upon the instruction of the Nurse in Charge that may be spoken.
- 6. Reporting to the Nurse in Charge/Senior Carer.
  - Information received from the patient/residents family, friends etc that seem important.
  - > Any change in the patient's usual condition.
  - > Information important to the patient's comfort or emotional well being.
  - Falls or other accidents.

- 7. Maintaining confidentiality of information gained about patients/residents, discussing private information only with those responsible for the care.
- 8. Be consistent and warm in the manner encouraging patients/residents to talk socially when they feel ready to do so, valuing the potential of the conversation.
- 9. Become involved in social and occupational activates with patients/residents as appropriate.
- 10. Help patients/residents who are confined to bed by appropriate means, comfort and safety.
- 11. Participate with due regard for the acceptability to the patient/resident preventing embarrassment, maintaining dignity, complying with established policy.

### Housekeeping

- 1. Observing and prompting comfortable heating and tolerable noise levels within the home.
- 2. General Cleaning of rooms.
- 3. Service meals to patients/residents.
  - Assisting with help at meal times.
  - Assisting with choice when required.
  - > Record fluids taken when appropriate or directed.
  - Comply with special diets, report appetite and intake.
  - > Prepare food and drinks as required.
- 4. Maintain recommendations/procedure for food hygiene and food handling.
- 5. Having detailed understanding of fire hazards, siting of appliances routine to be followed in the event of fire and evacuation process.
- 6. Assisting with tidiness in clinical areas, removal of used items of equipment, correct disposal of waste, soiled linen.
- 7. Assist Nurse in Charge or nominated deputy in technical activities as required.
- 8. Preparing the personal space areas for patients/residents before admission/after discharge, cleaning the beds etc, and other items of equipment.
- 9. Replenishing patients/residents areas with towels, soap etc, and identifying the need to replenish clinical stocks where holding levels are required.

### **Clerical/Administration**

1. Listing patients/residents property on arrival or departure.

- 2. Noting, reporting and documenting damaged furnishings, condition of equipment, baths, showers or other appliances.
- 3. Assisting as necessary with written documentation associated with any respect patients/residents care as supervised by Nurse in Charge.

### **Additional Responsibilities**

- 1. Participate in flexible duty patterns that promote effective 24 hour care of patients/residents.
- 2. Flexibility in working within various departments in the home when required ie. Kitchen, laundry
- 3. Promote effective communication both within and outside the Home environment.

This job description may be altered subject to the needs of the service we are required to provide, and is not exhaustive list of duties.

SIGNATURE OF JOB HO	OLDER	DATE
SIGNATURE OF MANAG	GER	DATE

# Application For Employment

Gainford House, Picktree Lane Chester-le-Street, Co. Durham, DH3 3SR www.gainfordcarehomes.com admin@gainfordcarehomes.com Tel: 0191 389 5810 Fax: 0191 389 5811



Personal Information		
Name:		
Home Address:		
Town, County, Postcode:		
Telephone Home and/or Work:		

Position Applying For			
Job Title:			
PIN No. (if applicable)		Expiry Date:	

Education		
Secondary education:		
Qualification/Dates obtained:		

Further, higher or professional	Course and dates attended; Qualifications obtained and name of
Education:	awarding body:

Particulars of any other training relevant to the post		

## EMPLOYMENT HISTORY

Present Employer:	
Position Held:	
Dates Employed:	
Notice Required:	
Brief Summary of Duties:	

Previous employment - in date order:			
Employer	Position	Date from/to	Reason for leaving

Any gaps in employment must be recorded.

## PERSONAL STATEMENT

Please give reasons why you want this post together with any other information you wish to add to support your application:

Please give below two referees, one of which must be your present employer if you are in employment. The second referee should also be able to comment on your suitability for this post.

REFERENCES		
Name:	Name:	
Job Title:	Job Title:	
Address:	Address:	
Telephone:	Telephone:	
Can your present employer be contacted for a reference?	Yes/No	

## REHABILITATION OF OFFENDERS ACT

Because of the nature of the work for which you are applying, this post is exempt from provisions of section 4(2) of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of offenders Act (1974) (Exceptions) Orders, 1975. Applicants are therefore not entitled to withhold information about convictions which for other purposes are "spent" under the provisions of the act, in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action. Any information given will be completely confidential and will be considered only in relation to an application to which the order applies.

Have you ever convicted of a criminal offence? Yes/No

If the answer immediately above is yes, please set out full details of the conviction(s) on a seperate note which you should sign and attach to the application form.

I believe that the statements made in this form are true and accurate to the best of my knowledge and belief.

I have	completed and signed this application myself
Signed	l
Date:	

I have completed this application on behalf of the
applicant
Signed
Print Name
Date:

This form should be returned to:

The successful candidates with be asked to apply for disclosure via the Criminal Records Bureau. The level of disclosure for this position is Enhanced. Further information about the Disclosure Service can be found at www.disclosure.gov.uk or by contacting the Criminal Records Bureau line of 0870 9090811

### Equal Opportunities Questionnaire

Gainford Care Homes Limited aim to be an equal opportunities employer, and we select staff solely on merit, irrespective of race, sex, disability or age. In order to monitor the effectiveness of this policy, we request all applicants to provide the information indicated by ticking the appropriate selection.

A)	Post applied for:			
B)	Gender: Mal	e / Female		
C)	Ethnic origin:	1.  UK/European		
D)	Are you registered d	isabled? Yes / No		
E)	Age Range:	17-30  31-40  41-50    51-60  60 +		
F)	Source of Information – how did you hear about this vacancy?			
	Internal advert Job Centre Press (which newspa Other source (please			
	Date:			

All information will be held in the STRICTEST OF CONFIDENCE

## Declaration of Health

Home Location\_\_\_\_\_

To be completed by the employee:

Name:	D.O.B.		
Address:			

Have you ever suffered from any of the following?	
Depression/Anxiety State, Nervous Illness or Breakdown	Yes / No
Epilepsy or Disease of the Nervous System	Yes / No
Aliment of Lungs or Chest	Yes / No
Spinal Problems	Yes / No
Arthritis, Rheumatism or Gout	Yes / No
Any Heart or Circulatory, including Blood Problems	Yes / No
Illness of the Digestive System	Yes / No
Illness of the Kidneys	Yes / No
Diabetes	Yes / No
Major Accident, Operation or Physical Defect	Yes / No
Skin Disorder	Yes / No

Are you presently taking	or undergoing any	treatment?

What is your average daily consumption of:	
	Alcohol
	Tobacco
Are you pregnant? (where aplicable)	Yes / No

Yes / No

If ۱	you have ans	swered ves	to any	of the	followina	auestions.	please	aive	details	includina	dates:

#### This Section to be completed by the Employee:

Signed:	Date:

To be completed by the Manager:

Signed:	Date: