



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: SENIOR CARE ASSISTANT
ACCOUNTABLE TO: HOME MANAGER
RESPONSIBLE: MANAGER/NURSE-IN-CHARGE

JOB SUMMARY

The post holder works to provide a supporting service to the Nurse-in-Charge. Duties are described within the following helping roles of support assistant.

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

Receiving and giving information.

Working with and lending support to the qualified nurse carrying out planned care for individual service users.

CARE RESPONSIBILITIES

Personal and Social Care

1. Participating in the preparation for the informal reception of the client user at the time of admission
2. Attending to the needs of the carers/relatives of patients/service users and courteous reception of visitors in the Home.
3. Protecting service users who are frail, unsteady when walking, disabled by poor vision or confusion from all types of accidents.
4. Assisting service users in the care of their personal clothing and other possessions/valuables in accordance with the Home policies/procedures.
5. Knowing personal role at first aid level in resuscitation procedure.
6. Receiving and acting upon the instruction of the Nurse-in-Charge that may be spoken and/or written in the service users care plan, or occur during work activities.

HOUSEKEEPING

1. Observing and prompting comfortable heating and tolerable noise levels within the Home.
2. Service meals to service users.
 - * assisting with help or feeding
 - * assisting with choice when required.
 - * record of fluid intake when appropriate or directed.
 - * comply with special diets, report appetite and intake.
 - * prepare food and drinks as required.
3. Maintain recommendations/procedures for food hygiene and food handling.
4. Having detailed understanding of fire hazards, sighting of appliances, routines to be followed in the event of fire and evacuation process.
5. Assisting with tidiness in clinical areas, removal of used items of equipment, correct disposal of waste, soiled linen.
6. Assist Nurse-in-Charge or nominated Deputy in technical activities as required.
7. Preparing the personal space areas for service users before admission/after discharge, cleaning the beds etc., and other items of equipment.
8. Replenishing the service users areas with towels, soap etc., and identifying the need to replenish clinical stocks where holding levels are required.

CLERICAL/ADMINISTRATION

1. Listing service users 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 aspect of service users care - as supervised by Nurse in Charge.
4. Dealing promptly with telephone enquiries and messages, communicating effectively with other members of the team.

ADDITIONAL RESPONSIBILITIES

1. Promote effective communication both within and outside the Home environment.
2. Participate in flexible duty patterns that promote effective 24 hour care of service user.

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

SIGNATURE OF JOB HOLDER

DATE

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SIGNATURE OF HOME MANAGER

DATE

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P012a

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 Education:	Course and dates attended; Qualifications obtained and name of 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 separate 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

I have completed this application on behalf of the applicant

Signed

Signed

Date:

Print Name

Date:

This form should be returned to:

The successful candidates will 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: Male / Female

C) Ethnic origin: 1. UK/European _____
 2. Caribbean _____
 3. Asian _____
 4. Other (please state) _____

D) Are you registered disabled? 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 newspaper) _____

Other source (please specify) _____

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?	Yes / No
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What is your average daily consumption of:	Alcohol	_____
	Tobacco	_____

Are you pregnant? (where aplicable)	Yes / No
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If you have answered yes to any of the following questions, please give details including dates:

This Section to be completed by the Employee:

Signed:	Date:
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To be completed by the Manager:

Signed:	Date:
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