



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

The Grove

Job Description

Title: Senior Support

Main Purpose of the Job

To provide high quality support to guests based upon their needs and wishes which reflect:

- Peoples choices and preferences
- Respect for guests as individuals
- Guests presence and participation in the community
- A positive image of the guests within the community
- The need to maintain the guests welfare and safety

Principle Accountabilities:-

- To provide support that meets the daily living and personal care needs of the guests staying at the service.
- To support the guests in undertaking activities and opportunities of their choice both within the service and in the community.
- To maintain records as required relating to the guests lives, service Safety at Work Act guidelines, and individual financial affairs.
- To assist with the drawing up of risk assessments relating to individuals and the service in order to protect the health, safety and welfare of all the staff and guests and to implement and contribute to the review of these.
- To liaise with external parties, carers and parents as required.
- To refer to the senior staff or manager in the event that managerial advice is essential to deal with an immediate situation.

- To support and work together with all members of the team to provide a friendly and open atmosphere thus enhancing the guests stay.
- To participate in the homes keyworker system.
- To participate in all relevant training offered/required.
- To be aware of company policies and procedures regarding Health and Safety and to have appropriate knowledge of the Health and Safety at Work Act guidelines.
- To report any accidents, untoward incidents and complaints to the Senior Staff or Manager.
- To maintain confidentiality relating to colleagues, guest and company policies and procedures.
- To undertake any other duties commensurate with the general level of responsibility of the job.

This job description should be considered as a general guideline and does not preclude other appropriate functions and should be read in conjunction with the Company Policies and Procedures.

Person Specification:-

Job Title: - Support Worker

Reports to: - Senior Support and Manager

Education:-

- GCSE (or equivalent) standard of education - Desirable
- Relevant Qualification NVQ2 in Care – Desirable
- Mandatory Training - First Aid, Moving and Handling, Fire Safety, Food Hygiene.

Work/Life Experience

- Experience/contact with people who have a learning disability which may have been gained at work, as a volunteer or through personal contact.
Desirable

Skills/Abilities/Knowledge

- Ability to communicate effectively and support people with a learning disability in line with their personal plans - Essential
- An ability to apply the principles of equal opportunity in support work - Essential
- Ability to record information appropriately in writing - Essential
- To have a general awareness of Health and Safety - Essential
- An ability to work closely within a staff team – Essential
- A minimum of 1years driving experience and a full drivers licence - Desirable

Personal Qualities

- A commitment to The Grove's Values - Essential
- A commitment to equal opportunities - Essential
- An empathic/warm disposition - Essential

All staff are required to respect the confidentiality of all matters that they might learn in the course of their employment. All staff are expected to respect the requirements under the Data Protection Act 1998. All staff must ensure that they are aware of the responsibilities under the Health and Safety at Work Act 1974.

SIGNATURE OF JOB HOLDER

DATE

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SIGNATURE OF HOME MANAGER

DATE

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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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