Date as Postmarked

Dear Applicant

# Re: Job Ref PGB WN

Please find enclosed job description and application form for the post with the above job reference.

Lothian Centre for Inclusive Living is only passing this information on to you on behalf of an individual employer. If you are short-listed you will be contacted by our client.

If you do not hear from them within four weeks from the closing date, you can presume the post has been filled. Unfortunately we are unable to write to those who have not been short-listed for interview.

Thank you for applying for the job and Good Luck with your application!

Yours faithfully

# Admin Support

Independent Living Team

**JOB DESCRIPTION**

**Personal Care Assistant. Job reference PGB WN**

The aim of this job is to provide the assistance required by the employer, a 57 year old disabled man.

A personal assistant should provide the help I need at my request. Too often a disabled person can find that those who assist them try to take over and make the decisions about what the disabled person should do and how. In fact, you can only provide the assistance I really need by listening to my requests and instructions on how to do tasks. Getting the right assistance at the time I need it enables me to lead my life independently.

A personal assistant should be able to handle the tasks of lifting, pushing and bending. You do not have to be strong to do the job well, but general good health is important.

The job involves providing personal services as follows:

**Personal Tasks**

- assisting me to get in and out of hospital bed using electric hoist

- assisting me with dressing/undressing as required;

- assisting me to wash (bed bath and shower);

- assisting with hair washing, shaving, brushing teeth;

- assisting me with toileting, using a urinary system;

- assisting me to move using a hoist, as required;

- assisting me to get in and out of my wheelchair;

- assistance with eating and drinking;

- assisting me with basic massage (i.e. bending, stretching of limbs, joints);

- general assistance with range of manual tasks;

- any other reasonable duties;

**Night shifts**

I require assistance throughout thenight, I suffer a lot from muscle spasms and require the massaging and straightening of my legs, and in turning me over in my bed, throughout the night making sure that I am lying comfortably. With going to the toilet or some other task listed under "Personal Tasks".

**Personal Qualities Required**

Preferably have previous experience of this kind of work but It is not essential as you will be trained in time to my requirements. Although ideally having worked with someone who had multiple sclerosis, would be advantageous, the ability to take full responsibility,be reliable and punctual and trustworthy. You should have clean personal habits and general good health.

An outgoing personality and a sense of humour would also be beneficial.

If you have not heard from me within two weeks after my receiving your application, the appointment will have been filled.

The post is for evening shifts from 11pm until 7 am and may include some relief shifts.

Hourly rate: £9.95

**Closing date for applications is 4th April 2014.**

# Application Form for Job Reference PGB WN

Please complete the following application form as accurately and in as much detail as possible. Shortlisting for interview will be based on the information you supply on the application form read in conjunction with the job description.

Please do not send in the job description or covering letter when returning the application form. If you require more room please use a separate piece of paper with the job reference and your name on it. If completing electronically press tab whilst the final cell in a table is selected to insert a new row.

## Personal Details

|  |  |
| --- | --- |
| First Name |  |
| Surname |  |
| Telephone Number |  |
| Mobile Number |  |
| Email Address |  |
| Postal Address, first line. |  |
| Postal Address, second line |  |
| Postal Address, third line |  |
| Postal Address, Town. |  |
| Post Code |  |

## Declaration

I agree that the information I have supplied in this application form is true and accurate to the best of my knowledge. I understand that any deliberate falsification on my part will be viewed as gross misconduct and may lead to my dismissal without notice.

Signature of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_

(Please leave the signature and date blank if you are sending in the form electronically. If you are invited to interview, you will be asked to sign a printed out copy then.)

## History of Education and Training

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Educational Establishment | From | To | Qualifications Gained |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Work History (including voluntary work)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Employer | Position held | From | To | Main Duties and reason for leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## Additional Information

|  |
| --- |
| After reading the Job Description carefully, consider what skills and experience you have that are suited to this post. They need not have been gained in paid employment and may include special interests relevant to the post. |
|  |

## Work Availability

Please indicate in the table below what times you would be available for work within the period of the day, i.e. if you are available from 7am to 11am Tuesday morning, then put 7-11am in the box. If you are available for any time write yes and please write no if you are not available.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Morning | Afternoon | Evening | Overnight |
| Sunday |  |  |  |  |
| Monday |  |  |  |  |
| Tuesday |  |  |  |  |
| Wednesday |  |  |  |  |
| Thursday |  |  |  |  |
| Friday |  |  |  |  |
| Saturday |  |  |  |  |

## Supporting information

You do not need to fill out the following questions if they are not applicable to the post. e.g. if the job description does not ask for PVG membership, then you may put N/A in the space provided.

|  |  |
| --- | --- |
| Are you a member of the PVG Scheme? |  |
| PVG Membership Number |  |
| Do you have a full driving license that is valid in the UK? |  |
| Do you have the use of a vehicle? |  |
| If applicable, would you be prepared to use the vehicle for work? |  |
| When could you start work? |  |
| Where did you see this post advertised? |  |

## References

Please write the names and contact details for two independent people who would be willing to provide a reference for you. One of them should be your most recent employer. Note that a telephone number is not sufficient.

|  |  |  |
| --- | --- | --- |
|  | Reference 1 | Reference 2 |
| Name |  |  |
| Position |  |  |
| Relationship to you |  |  |
| Title of referee |  |  |
| Company |  |  |
| Postal Address, line 1 |  |  |
| Postal address, line 2 |  |  |
| postal address, town |  |  |
| Post code |  |  |
| Email address |  |  |
| Telephone number |  |  |

Please return the completed application form by 4 pm on the closing date of 4th April 2014.

Application forms may be returned by email to: [pajobs@lothiancil.org.uk](mailto:pajobs@lothiancil.org.uk) or can be posted to:

PA Recruitment, Lothian Centre for Inclusive Living, Norton Park Centre, 57 Albion Road. Edinburgh, EH7 5QY

Please ensure that you have paid adequate postage to send any application forms by mail as LCIL does not accept postage otherwise.