

# Support with Confidence

Personal Assistant Application Form & Data Protection Statement



Support with  
Confidence

  
Brighton & Hove  
City Council

## **Privacy Notice**

The Council is the data controller for purposes of the Data Protection Act (2018) and EU General Data Protection Regulation as of May 2018 and is registered as a data controller with the Information Commissioner's Office (ICO)

Brighton & Hove City Council are committed to protecting your personal information. As a data controller we have a responsibility to make sure you know why and how your personal information is being collected in accordance with relevant data protection law.

### **Purposes & Lawful basis of processing**

We are collecting your data for the purpose of the Support with Confidence PA Approval. We may also need to use your contact details for communication purposes in connection with your PA Approval.

Our lawful basis for collecting and processing your personal data is under the performance of a task carried out in the public interest or official authority, specifically within the Support with Confidence PA Approval. Special category data is collected because there is a substantial public interest, specifically relating to the Data Protection Act 2018, Schedule 1, Part 2, Paragraph 18 'Safeguarding of children and individuals at risk'

### **Who we will Share your Data with**

Your data may be shared internally with Adult Social Care Team. We will also share your data externally with Halifax Care.

### **How Long we will Hold your Data (Retention)**

We will hold your data for the whole time you are a Support with Confidence PA plus 3 years from the date the application was applied for.

### **Transferring Data outside the European Economic Area**

Your information is not processed outside of the European Economic Area.

### **Your information rights**

Under GDPR you have certain rights concerning your information.

For further information on your rights visit <https://www.brighton-hove.gov.uk/privacy>

### **Further information**

If you would like to discuss this further please contact our Information Governance Team on 01273 295959 or [data.protection@brighton-hove.gov.uk](mailto:data.protection@brighton-hove.gov.uk)

The council also has a Data Protection Officer, who can be contacted via <https://www.brighton-hove.gov.uk/dpo>

You can also contact the ICO for further information or to make a complaint:

Information Commissioner's Office

Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

Phone: 0303 123 1113 (local rate) or 01625 545 745 if you prefer to use a national rate number

<https://ico.org.uk/global/contact-us/email/>

<https://ico.org.uk/make-a-complaint/>

# Welcome

Thank you for contacting us about becoming an approved Personal Assistant. If you have any queries or questions about the Support with Confidence scheme or this form please contact:

Support with Confidence  
Trading Standards  
2nd Floor, Bartholomew House  
Bartholomew Square  
Brighton BN1 1JE

Tel: 01273 292494

Email: [supportwithconfidence@brighton-hove.gov.uk](mailto:supportwithconfidence@brighton-hove.gov.uk)

[www.brighton-hove.gov.uk/supportwithconfidence](http://www.brighton-hove.gov.uk/supportwithconfidence)



## Personal Contact Details

### Your Full Name

Please ensure you submit all current names including middle names

### Please give details of any former names

Please ensure you provide all details on different names used including when these names were used from and to (Month / Year)

Date of Birth

National Insurance No.

Your Address

Postcode

### Please provide five years address history

Please ensure that you fill in address details in full including postcode AND the dates you moved in and moved out of that property (Month / Year)

Landline number

Mobile

Email

Do you have any restrictions on your ability to work in the UK?

<https://www.gov.uk/browse/visas-immigration/work->

Yes

No

## Adult Protection Checks

**Please note that if you have been convicted of any of the following offences your application will not be approved:**

- Any offence against children, young people or vulnerable adults
  - Murder
  - Offences involving serious violence or threats of violence
  - Offences involving serious theft or fraud where duties allow access to substantial financial resources
  - Sexual offences of any nature
  - Serious burglary or arson, where duties involve substantial responsibility for security of buildings or equipment
  - If you have been placed onto the following lists
    - 1) Protection of Vulnerable Adults List (POVA)
    - 2) Protection of Children's Act List (POCA)
    - 3) Section 142 of the Education Act (List 99)
- For all other offences appointment is subject to a risk assessment.

## Rehabilitation of offenders act 1974 and exception order 1975

**The role you are applying for is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.**

This means you cannot withhold information about any conviction. All information given will be verified against a returned Enhanced DBS check. The term “conviction” relates to a finding of guilt following a hearing in a court of law, including Courts Martial. Prospective employees for jobs exempt from the Rehabilitation of Offenders Act working with children or vulnerable adults will also be asked to declare official warnings, reprimands, registration as a sex offender, cautions, bindovers and other relevant matters. If you are Approved, not disclosing such convictions could result in us taking you off of the Approved list. Any information given will be completely confidential and will be considered only in relation to an applicant for a role to which the Order applies. Have you ever been subject to any Police warnings, reprimands, cautions, convictions,

Yes

No

**If Yes what are they? Please give all information including date(s).**

**A Risk Assessment will then be carried out.**

*Failure to give this information will mean that your application will be refused.*

## Rehabilitation of Offenders Act 1974 and exception order

Are you willing to have an Enhanced Disclosure & Barring check carried out? The Council will pay the fee.

Yes

No

### [Guide to DBS Checks](#)

*Please note that responding "No" to this question will mean that your application for approval will be refused.*

## References

Please supply the names, postal addresses and/or email addresses of two referees, one of whom should be your most recent employer. However, if you have not been previously employed, give one reference from a professional member of your local community and the other a personal reference.

*Please note: Approval cannot be confirmed unless we are in receipt of 2 references, as deemed satisfactory by Brighton & Hove City Council.*

### Reference 1

### Reference 2

## Employment

If you are a car driver, is your car insured for business use?

Yes

No

## Training

**Have you previously undertaken Induction Training with an Approved Home Care Provider?**

Yes

No

**Can you supply copies of certificates for training undertaken?**

Yes

No

**Have you undertaken NVQ level training?**

Yes

No

**If you have answered Yes to any of the above, please give details.**

*Please use another sheet of paper if you need to and label it with Training*

**If required, would you be willing to undertake free Induction Training as provided by the Approved Home Care Provider?**

Yes

No

*Please note that refusal will mean that your application for approval will be refused.*

## Availability

Times of day - what time would you prefer to start and finish work, please indicate whether am or pm?

Start

10am (for example)

Finish

5pm (for example)

How many hours a week do you want to work?

How many days a week do you want to work?

Are you available to work on Saturday and Sunday?

Yes

No

Are you able to work during school holidays?

Yes

No

Are you available for emergency short notice cover?

Yes

No

Which geographical area will you cover?

## Availability *continued...*

**Do you drive a car?** *If Yes, please provide a copy of your driving licence.*

Yes  No

**Do you have the use of a car for work purposes?**

Yes  No

**Have you any driving convictions?** *If yes, please provide a copy of your insurance*

Yes  No

**If Yes what are they?** *Please give all information including date(s)*

## Specialisation

Do you have any specialist skills or experience particularly related to care that you wish to use?

Yes

No

*If Yes please give details. (This information will appear on your profile).*

*Please use another sheet of paper if you need to and label it with Specialisation*

## Legislation Checks

Do you currently advertise your services?

Yes

No

*If Yes, please specify where*

*If you do please supply copies of advertisements you use, or indicate where you advertise if you are not able to send copies.*

**Charges** - It is acceptable for approximate charges to be entered here, however all charges must be made clear to Clients, in writing before service delivery begins

What hourly rate will you require?

£

Will this include mileage? If not how much per mile will you require?

Yes

No

£

Will a short notice fee be charged? This is a fixed amount for accepting a non-scheduled appointment.

Yes

No

£

Any additional comments:

## Other Information

**Do you have any particular needs or medical conditions that the service user should know about?**

Yes  No

*If so please specify:*

*If you wish to add any further information about yourself, please enter it here. (This information will appear on your profile).*

*Please use another sheet of paper if you need to and label it with Further Information*

## Terms & Conditions of Approval

*On being accepted as an approved Personal Assistant you agree to deliver services in accordance with the Terms and Conditions as specified in the Code of Conduct. Quality monitoring will take place to ensure Client safety and satisfaction; a random check may be carried out by Brighton & Hove City Council on any services which you deliver. The information given in this form will be reviewed and updated annually. If complaints are received by Brighton & Hove City Council, then your name may be temporarily removed from the Support with Confidence Approved Register whilst the complaint is being investigated by Brighton and Hove City Council and may be permanently deleted from it if the content of those complaints are proved to be true. Do you agree to these terms and conditions?*

Yes

No

*Please note that responding "No" to this question will mean that your application for approval will be refused.*

Print name:

Signature:

Date:

*Thank you for taking the time to complete this questionnaire, your application for approval will be processed as soon as possible.*

**You must send with this application copies of two forms of ID, one of which must be a photo ID plus copies of all relevant training certificates.**

**If you have any visa restrictions you must provide a copy of your passport and any other relevant documentation.**

**Thank you**

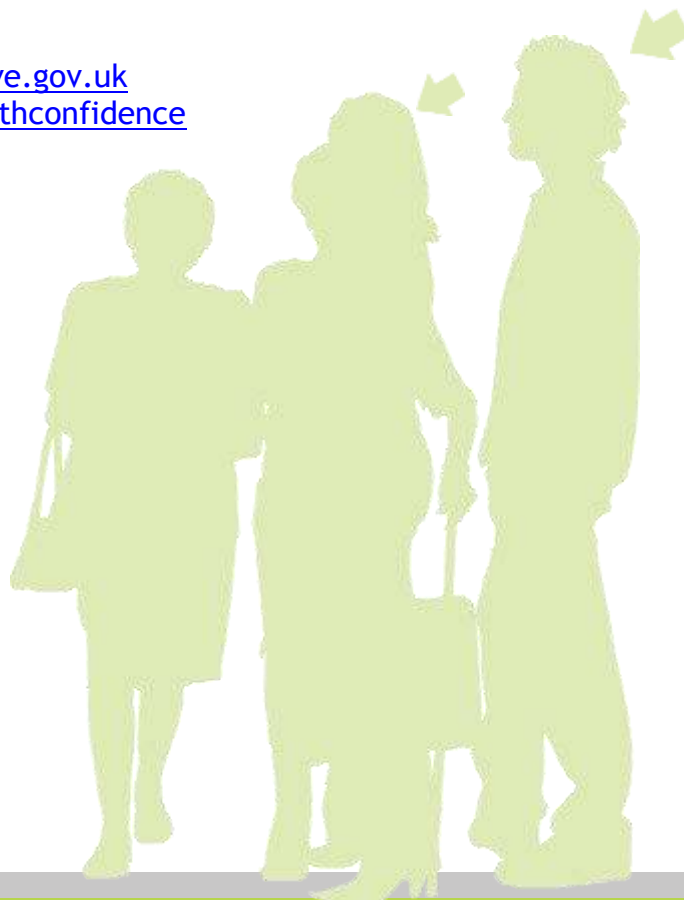
## Contact us

Please contact the Support with Confidence Team if you have comments, compliments or complaints about any of our activities.

Telephone: 01273 292494

Email: [supportwithconfidence@brighton-hove.gov.uk](mailto:supportwithconfidence@brighton-hove.gov.uk)

Visit: [www.brighton-hove.gov.uk/supportwithconfidence](http://www.brighton-hove.gov.uk/supportwithconfidence)



Alternative formats of this publication can be made available on request. These include other languages, large print, Braille or audiotape. Please telephone 01273 292494.



Support with  
Confidence

Brighton & Hove  
City Council