Social Care & Community Care Interview
(Internal Use Only)

As part of the registration process all candidates must be interviewed face to face.

The registration interview process must include:

- Verifying the candidate's CV and gaining an explanation for any gaps in employment history. Any discrepancies should also be queried at this stage

- Discussing the nature and duration of previous experience

- Exploring the candidate's specialist knowledge and skills and to identify preferred areas of work

Consultants should use these questions as a base to ask follow up probing questions around experience and motivation of the candidate. If the consultant asks questions outside of the ones included, please ensure these are captured on the form.

All consultants should be trained to a suitable standard prior to conducting an interview.

Should you feel more training is required please speak to your Line Manager before proceeding with the interview.

Social Care & Community Care Interview Form

Candidate Full Name:		X3 ID:	
Name of Interviewer:		Interview Location:	
		Interview Date:	

1. Why are you interested in this role/type of work?

2. Please talk me through your work history and give examples of the skills/ knowledge you have gained

3. Please explain how this previous experience makes you suitable for this role.

4. Please explain any gaps in your recent employment history?

5. Please specify your availability for work - e.g. start date, shifts, hours etc.

6. Which geographical areas are you prepared to work in?

7. Are you registered with any other agencies? If yes, tell me about your experiences.

8. What are your expectations of Reed?

Competency Based Questions

1. **A) Individuality and identity, rights, choice, privacy, independence, dignity, respect and partnership are all important values. Please give me an example of how you would promote these values** **B) Demonstrate the meaning of prejudice and equal opportunities in relation to your service user group**

2. **A) Give 2 examples of how the relationship with a service user is different from other relationships** **B) What is the nature of the responsibilities and limits of a worker relationship?**

3. **A worker has a responsibility to report any concerns in their workplace. What concerns might this include?**

4. **Speech is not the only way to communicate, please give some examples of other forms of communication**

5. **A) Confidentiality is of paramount importance, however, when would you break confidence?** **B) It is important to check identity of people accessing information and premises, why is this?**

Is the candidate currently, or ever been, under suspension or investigation at an organisation?	Yes	☒	No	☒

If yes, please provide details:

Please remind Candidate that if this were to change that the branch must be alerted <u>immediately</u>

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Declaration	
I confirm that I have met with the interviewer named below for a face-to-face interview. I understand that the information obtained within this interview may be entered onto a computer and under the terms and conditions of the Data Protection Act will be treated in a secure and confidential manner.	
Candidate Name:	**Candidate Signature:**
Date:	

Interviewer Name:	**Interviewer Signature:** EJColman
Professional Registration No: *(If Applicable)*	

In extenuating circumstances interviews can be conducted via Facetime. If this interview was conducted via Facetime please give details below:

Details: ....

Consultant Signature .... Print Name ....

Date..

INTERVIEWER SECTION				[OFFICE USE ONLY]	
Is the candidate able to communicate effectively and fluently in English?	Written English:	Yes	☒	No	☐
	Spoken English:	Yes	☐	No	☐
Please list the areas in which the candidate would be suitable to work in (including justification for this decision).					
Area	**Justification**			**Comments**	
1.	Evidence of certified courses ☐ Relevant and suitable referencing ☐ Acceptable competency checklist ☐ Acceptable experience ☐				
2.	Evidence of certified courses ☐ Relevant and suitable referencing ☐ Acceptable competency checklist ☐ Acceptable experience ☐				
3.	Evidence of certified courses ☐ Relevant and suitable referencing ☐ Acceptable competency checklist ☐ Acceptable experience ☐				
4.	Evidence of certified courses ☐ Relevant and suitable referencing ☐ Acceptable competency checklist ☐ Acceptable experience ☐				

Additional Notes/Observations:

Additional Notes/Observations continued:

Skills Checklist for Social Care & Community Care

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Candidate name:	

Client Type		Client Group			
Older Person	☐	Learning Disabilities	☐	Mental Health	☐
Adults	☐	Physical Disabilities	☐	Sensory Impairment	☐
Children	☐	Complex Care	☐	Challenging Behaviour	☐
Young Person	☐	Terminal Illness	☐		

Experience, please tick all that apply			
Medical Condition		**Competence Skills**	
Acquired Brain Injury	☐	Bath/Shower/Strip Wash	☐
ADHD	☐	Use of Bath Aids	☐
Arthritis	☐	Bed Bath	☐
Alzheimer	☐	Shaving	☐
Asperger's	☐	Care of Hair	☐
Autism	☐	Mouth Care	☐
Bi-polar	☐	Dressing/Undressing	☐
Breathing Difficulties	☐	Care of fingernails	☐
Cerebral Haemorrhage	☐	Care of bladder/bowels	☐
Cerebral Palsy	☐	Use of bedpans/commodes	☐
Confusion	☐	Emptying catheter bag	☐
Contagious Disease	☐	Changing colostomy bag	☐
Deaf	☐	Suction	☐
Dementia	☐	Nasal Gastric Feeding	☐
Diabetes	☐	Peg Feed	☐
Eating Disorders	☐	Recording fluid balance/weight	☐
EBD	☐	Use of M&H equipment	☐
EMI	☐	Using walking aids	☐
Epilepsy	☐	Keeping records	☐
Failure to thrive	☐	Observing health/well being	☐
Frail	☐	Reporting changes	☐
Heart Problems	☐	Preparation of meals	☐
Immobile	☐	Feeding service users	☐
Infections	☐	Preparing baby food/bottles	☐
Kidney Failure	☐	Pressure area care	☐
Motor Neurone	☐	Dealing with medication	☐
Mobility Issues	☐	Obtaining simple specimens	☐
Muscular Dystrophy	☐	Bed making	☐
Neuro Care	☐	Housework – washing, etc	☐
Palliative Care	☐	Shopping/Budgeting	☐
Parkinson's Disease	☐	Financial transactions	☐
Reduced Sight	☐	Clerical support	☐
Respiratory Failure	☐	Behaviour modification	☐
Self-harm	☐	Makaton	☐
Short Term Memory	☐	PEC's	☐
Spina Bfida	☐	Arranging social activities	☐
Stroke	☐	Person centred planning	☐
		Outcome based care plan	☐

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Please list below any additional client groups or medical conditions that you have had experience of working with and any additional skills or competencies that you wish to detail.

Where has your experience been? In someone's home, residential, nursing/care home, hospital etc

Car driver / access to car
Geographical cover -how far willing to travel
Length of shift / assignment restriction / availability ongoing

Candidate Name:		Candidate Signature:	
Date:			