

Daughterly Care Community Services

Caregiver Employment Application Form

- 1. Please complete the Application Form.
- 2. Scan & Email it to <u>recruitment@daughterlycare.com.au</u>
 Alternatively, post it to Po Box 670, Narrabeen NSW 2101

1. Personal De	tails					
First Name		Surname				
Date of Birth		Mobile number				
Gender Identity	F / M / Other	Email Addre	SS			
Home Address						
Are you an Australian Citizen or Resident?	☐ Australian citizen (<i>please</i>)☐ Visa (we do not employ Stu☐ If it is a partner Working \	udent/Tempora	iry Visas) <mark>please</mark>	do not continue with this application		
Country of Birth	resident of	een a citizen o a country othe fore turning 1	er than	☐ No☐ If Yes, which country?		
What languages can you speak?		Is English your first language?	☐ Yes☐ No: enter first language spoken:			
2. Documents	required for employm	ent				
Police Certificate	☐ Yes — is it less than 3 mo☐ No — Please wait to app	-	-	asked to come for an interview		
Driver's Licence	Driver's Licence Driver's Licence No – this role requires you to have a full Driver's Licence (no P plates) *** please do not continue with this application					
Reliable car to drive to work						
Current First Aid Certificate	· ·			tificate (it expires after 3 years) ertificate before commencing		
If you are a RN/EN are you looking for work as a	ou are a RN/EN □ RN/EN only you looking for □ Paid Caregiver and willing to do RN/EN if available (paid as RN/EN)					

3. More about y	/ou			
Will Daughterly Care	be your only employer? 🔲 Yes 🔲 No			
If no:				
Who will you be w	vorking for as well as for Daughterly Care?			
How many hours/	days will you be working for your other employer?			
Is your current rol	e with another Aged Care Provider? 🗖 Yes, who?			□ No
Are you working in	n a Nursing Home? Yes, name?			□ No
Are you working a	s a Private Carer independently? Yes	(no. of da	ys)	□ No
What best describes v	why you work?			
o Main breadwinne	er	☐ Yes	□ No)
o My family relies o	on my income to help pay the mortgage/rent/living expenses	☐ Yes	□ No)
o Pocket money – N	My family is not reliant on my income	☐ Yes	□ No)
o Pensioner – I can	only work a certain number of hours per week	☐ Yes	□ No)
o Saving for my reti	irement	☐ Yes	□ No)
o Semi-retired		☐ Yes	□ No)
o Other- please tell	us in your words			-
4 Health & Wel	lbeing (legally you are required to answer this section a	ccurately an	d trut	hfully)
Have you been	Yes	——————————————————————————————————————	u 11011	
vaccinated for COVID-19?	To work for Daughterly Care, it is compulsory to be vaccinated vacto provide a copy from MyGov and/or your Immunisation Histo Which one applies to you: Covid-19 1 & 2 – mandatory to work for Daughterly Care Covid-19 Booster (no 3) – not compulsory Covid-19 Booster (no 4) – not compulsory Covid-19 Booster (no 5) – not compulsory			
	☐ No, I don't want to be vaccinated – unfortunately you cannot please do not continue with this application	t work at Daugl	hterly	Care –
Have you received	☐ Yes If yes, which year did you have your last Flu Vaccinatio	ın?		
the Flu Vaccination	☐ No It is not compulsory to have the Flu Vaccine			
Do you smoke	□ No I do not smoke or vape			
or vape?	☐ Yes If yes, how many per hour? Per day? Do you wear a nicotine patch while working with client Do you smoke in your car?	ts? [□ Yes	□ No
Do you have osteoporosis?	□ No □ Yes – if yes, please describe your condition			
Do you have an existing physical, medical or psychiatric condition?	□ No □ Yes − if yes, please describe your condition			
Do you, or have you ever, had a bad back/ neck?	□ No □ Yes – if yes, please describe your condition			

4. Health & Well	being (legally you are required to answer this section accurately and truthfully)
Do you have a bad shoulder, leg, knee, hip or bulging spinal disc?	□ No □ Yes − if yes, please describe your condition
Do you or have you ever had any other injuries that we should take into consideration when scheduling you for work?	□ No □ Yes – if yes, please describe your condition
Have you ever claimed Worker's Compensation in a previous role? Please note - we	□ No □ Yes o Describe how the injury happened?
may need you to visit our Doctor and also speak to your Doctor to ensure you are fit to work for Daughterly Care	W/h et elete did the inium harman?
Community Services.	What date did the injury happen? How much time did you have off work?
	O How much time were you on suitable duties? ———————————————————————————————————
	o If you were on suitable duties, how many hours did you work per week?
	What restrictions or limitations did you have on your medical certificate?
	What date did you come off Workers Compensation?
Please Be Aware O	f Section 79 Worker's Compensation Board And Assistance Act 1981
claims compensation	at the worker has, at the time of seeking or entering employment in respect of which she/he for a disability, wilfully and falsely represented himself/herself as not having previously ability, the Board may in its discretion refuse to award compensation which otherwise would be
I acknowledge that th dismissal.	e deliberate giving of false information, with respect to any of the above areas, shall lead to
Name:	Signature:

Employment History: tell us about your current/previous work history, even if not in Aged Care we want to know about where you have worked							
Most recent employer details							
Company name of your most recent employer							
Your position/title in that role							
Are you currently employed with this employer?	□ Yes	□ No					
If no, reason for leaving							
Dates you were/are employed	From		To				
Main duties							
Previous employer details							
Company name of your past employer							
The reason why you left							
Your position/title in that role							
Dates you were employed	From		_ To				
Main duties							
i.e. volunteer or have cared for a family memberskillset and your past work experience, including	er? How did	you assist them? L	et us know more				

6. Rates of pay, mileage, allowances and salary packaging

HOURLY care work:

- Are you able to assist or supervise our clients with showering, grooming, dressing, hygiene, cooking?
- We aim to give you a mix of ongoing, short term and one off clients and aim to give you the maximum number of hours you request.

Classifications for DC HOURLY Caregiver Wages:

- Level 1: Paid entry level: new Caregivers joining DC with less than 3 months employment in paid Aged Care work
- Level 2: Unqualified Caregivers with 3 months or more paid employment with DC or some experience in Aged Care work (with no formal Qualification/Certificate)
- Level 3: Qualified experienced Caregivers with full Certificate III (either Individual Support or Aged Care) or Certificate IV in Aged Care or Aged Care related

Classification	Mon-Fri			25% casual loading		DC TO PAY OURLY RATE	
Level 1 - Introductory	\$	31.13	\$	7.78	\$	38.91	
Level 2 - Home carer	\$	32.86	\$	8.22	\$	41.08	
Level 3 - Qualified	\$	34.59	\$	8.65	\$	43.24	
Classification	:	Saturday		25% casual loading		DC TO PAY HOURLY RATE	
Level 1 - Introductory	\$	43.58	\$	10.90	\$	54.48	
Level 2 - Home carer	\$	46.01	\$	11.50	\$	57.51	
Level 3 - Qualified	\$	48.42	\$	12.11	\$	60.53	
Classification		Sunday		25% casual loading		DC TO PAY OURLY RATE	
Level 1 - Introductory	\$	56.03	\$	14.01	\$	70.04	
Level 2 - Home carer	\$						
	Þ	59.15	\$	14.79	\$	73.94	
Level 3 - Qualified	\$	62.26	\$ \$	14.79 15.57	\$	73.94 77.83	
Level 3 - Qualified	<u> </u>		_				
Level 3 - Qualified Classification	\$		_		\$		
	\$	62.26	_	15.57 25% casual	\$	77.83 DC TO PAY	
Classification	\$ Pul	62.26	\$	15.57 25% casual loading	\$ H	77.83 DC TO PAY OURLY RATE	

Level 4: From 6/1/2029: for Caregivers who already hold a Certificate III (or higher) qualification eg Registered Nurse (Nursing Degree), Diploma in Aged Care, etc and currently on Level 3 will automatically become Level 4.

Note: Daughterly Care pays 12% superannuation based on the Total Hourly Rate

LIVE-IN care work:

- Are you an exceptional, highly experienced in-home carer wanting to care for high care clients in their home
- Our Live in Carers are experienced age care workers who are familiar with caring for frail elderly people or people living with dementia.
- You are paid on a daily rate, not an hourly rate (do not divide by 24).
- o Some of our Live in Care clients need more than 8 hours of care and in that case either the family assist or we assign hourly workers to reduce the live in carer's work load to 8 hours, per every 24 hours.

Note: Daughterly Care pays 12% superannuation based on the Total Daily Rate

Classification		Mon-Fri	25% casual loading	DC	TO PAY DAILY LIC RATE	
Level 2 - Home carer	\$	378.62	\$ 94.66	\$	473.28	
Level 3 - Qualified	\$	398.59	\$ 99.65	\$	498.24	
Classification	Saturday		25% casual loading		DC TO PAY DAILY LIC RATE	
Level 1 to Level 3	\$	408.19	\$ 102.05	\$	510.24	
Classification		Sunday	25% casual loading	DC	TO PAY DAILY LIC RATE	
Level 1 to Level 3	\$	425.28	\$ 106.32	\$	531.60	
Classification	Pul	olic holiday	25% casual loading	DC	TO PAY DAILY LIC RATE	
Level 1 to Level 3	\$	584.26	\$ 146.06	\$	730.32	

MILEAGE:

If you use your car to drive clients to appointments or to do shopping / errands for them you are paid 99c/km.

Pay Between Clients

From 1st July 2022, the Award was updated to pay Time + Mileage between clients or a Flat Shift Break Allowance.

Time + Mileage is paid between Immediately Successive Clients

Daughterly Care Community Services (DCCS) Hourly Caregivers are paid for their time spent driving from their first job to the immediately successive second, third, fourth jobs as well as for kms driven.

Immediately successive means that you drive from your first job directly to your second job and start your second job immediately.

The time taken to drive between 'immediately successive clients' is determined by an estimate using Google Maps by our *MyCarePortal App*. No employee in Australia gets paid mileage or time to travel from their home to their job, nor from their job back to their home.

Mileage is paid at 99 cents/km. You must drive the most direct route between jobs. Regardless of the route you actually drive, *MyCarePortal* pays mileage and time based on an estimate.

Shift break Allowance

When your second, third or fourth job is NOT immediately after the job prior, then we do NOT pay time or mileage, instead the Award requires us to pay a *Flat Shift Break Allowance* of **\$20.12** for the first shift break in a day and **\$6.51** for the second shift break allowance on the same day.

We don't need your agreement to roster the first shift break however we do require your agreement to roster the second shift break allowance. Don't decline a job because it involves payment of a second Shift Break Allowance because there could be a change to your roster prior to actually working that job and your 2nd shift break might become your first shift break! Or your second shift break might disappear due to a new job or a job extending.

You don't want to give up 2 hours, or more of work, because of the lower second shift break allowance. Instead have a 'cup half full' attitude.

SALARY PACKAGING

Increase your take home pay by signing up to Salary Packaging. This is one of the benefits of working with *DCCS* as we are a registered Not-For-Profit Charity. **This means you can apply to Salary Package your income and pay LESS INCOME TAX.**

Every Australian employee who earns less than \$18,200 per annum does not pay tax.

Once you earn over \$18,200 you start paying tax. However, because you will be employed with *DCCS*, the ATO has offered you to earn an additional \$18,747pa before you pay any income tax.

This means, you will be able to work for DCCS and earn up to @\$36,747pa before you pay any tax to the ATO.

Should you be accepted for employment, as part of the orientation process, we will explain this to you in detail and set you up. You can choose to apply for Salary Packaging.

You must have extensive paid experience to work as a Liv experience). This role is looking after our High-Care clients client's home for 3 or 4 days in a row each week (howeve	(24 hou	r presei	nce) wh	ere you	will sto	ay at yo	our
	Mon	Tue	Wed	Thu	Fri	Sat	Su
Tick which consecutive days are you available for LIC:							
8. Your availability as an HOURLY CARER (low of needed, we will train you with personal care, manual has service is @2-3 hours each and you will drive from client to	andling, c	dement	ia, med				
mileage. Tick which days are you available for Hourly work:	Mon	Tue	Wed	Thu	Fri	Sat	Sui
o I CAN work on these days							
o I MIGHT be able to work on these days if asked first							
o I can START working from ??? time							
o I need to FINISH working from ??? time							
o I CANNOT work on these days							
More information we would like to know as an Hourly C	arer:						
o Ideally, I would like to work XXX hours each day							
o Ideally, I would like to work XXXX as the MAXIMUM hours o	of work pe	er week					
o Ideally, I would like to work XXXX as the MINIMUM hours o	f work pe	r week					
o I am on the pension and have a limit of hours I can work	□ No □	⊐ Yes, w	hat is yo	our limit	per we	ek:	
Locations of work – are you prepared to drive to the following l	ocations [.]	for Hou	rly work	(2-3 hou	ır servic	es):	
☐ Mosman ☐ Hornsby & Upper North Shore ☐ Chatswo	ood & Lo	wer Nor	th Shore	e 🗆 N	lorther	n Beach	es
How far are you prepared to drive to work from your home for a	a 2 hour jo	ob?		(klms), e	g 10 klr	ms; 20 k	lms
9. Upcoming Holidays – do you have any hol	lidays į	olann	ed?				
□ No							
☐ Yes - please provide dates — even if it is every school holiday:	s or one-	off days	you can	't' work.			

DEMENTIA experience	No. of Years		
Total number of years you have been paid to care for older people with dementia			
Total number of years you have cared for family members (unpaid) with dementia			
FEMALE Personal Care (paid) experience	Have experience	No experience but willing to be trained	NOT comfortable doing
Supervise FEMALE clients going to the toilet; showering; dressing, etc			
Assist FEMALE clients to shower (client can wash some parts of their body, you may need to wash their back and areas they cannot reach)			
Assist FEMALE clients to go to the toilet (walking the client to the bathroom, assisting the client to sit on the toilet, helping the client to stand up, help the client pull up their pants. Your client may need assistance wiping themselves)			
MALE Personal Care (paid) experience	Have experience	No experience but willing to be trained	NOT comfortable doing
Supervise MALE clients going to the toilet; showering; dressing, etc			
Assist MALE clients to shower (client can wash some parts of their body, you may need to wash their back and areas they cannot reach)			
Assist MALE clients to go to the toilet (walking the client to the bathroom, assisting the client to sit on the toilet, helping the client to stand up, help the client pull up their pants. Your client may need assistance wiping themselves)			
HIGH CARE client (paid) experience	Have experience	No experience but willing to be trained	NOT comfortable doing
Complex Personal Care (paid) experience		I	ı
o Toileting - full assistance with FEMALE client			
o Toileting - full assistance with MALE client			
o Full Shower assistance: FEMALE client (cannot wash any parts of their body)			
o Full Shower assistance: MALE client (cannot wash any parts of their body)			
Changing urine catheter bags			
Transfers (paid) experience		1	1
Able to help client transfer			
 Able to help client by hoist – full hoist and standing hoist, i.e. knowledge of different slings & standing hoist 			
o Experienced using Pelican Belt			
Experienced rolling, turning client in bed using a slide sheet			

Basic Palliative Ca	re (paid) experience	Have experience	exper but wi be tra	ience ling to	NOT comfortable doing
o Oral hygiene, e.g.	mouth swabs				
 Providing pressure pressure is kept or 	e area care, eg rubbing cream on skin and ensuring ff the area				
o Provide a sponge	bath in bed				
Clients you will not	care for				
Will you work with clie	ents who have pets in the home?			□ Ye	es 🗖 No
Are you allergic to any	pets you will not work with? If Yes:			□ Y€	es 🗖 No
What type of client wo	on't you work with?				
Dementia question	ns – please answer the following:				
If a client repeats themselves constantly, how do you handle that?					
If you were told the main role of your service was to provide a meal for a client and ensure they eat the meal, however the client refused to eat saying they have eaten (but you know they haven't), what would you do?					
If a client living in the community refused to let you in for a service, what might you say to the client to get in to do the service?					

11	11. Other skills and qualifications							
Μι	Musical abilities							
Car	☐ Yes	□No						
Car	☐ Yes	□ No						
	you have any special skills, interests, hobbies, passions the es, please state:	at mi	ght help us match you to clients?	☐ Yes	□No			
	ease tick ONLY IF you can provide a Certificate on all certificates to your interview: refer back to Pg 5):	ıs pı	oof as this may affect your pa	y rate				
	Manual Handling training		Certificate III in Community Service	2S				
	Dementia Essentials – Provide support to people living with a Dementia (CHCAGE005)							
	MOOC – Understanding Dementia with UTAS	.63 (611622013)						
	MOOC – Preventing Dementia with UTAS	MOOC − Preventing Dementia with UTAS □ Diploma of Nursing (HLT54115) □ Certificate III Assistant in Nursing						
	Diploma of Community Services (Case Management)		Registered Nurse (registration curr	ent)				
	Certificate IV in Ageing Support		Ex-Registered Nurse (registration r	ot current))			
	Certificate IV in Leisure and Health		Enrolled Nurse (registration curren	,				
	Certificate IV in Community Services		Ex-Enrolled Nurse (registration not	current)				
	Certificate IV in Disabilities		Any other than Qualifications you h	nave (don't	need			
	Certificate III in Individual Support (Ageing)		to be aged-care related):	,				
	Certificate III in Individual Support (Disability)							
	Certificate III in Health Services Assistance (Assisting in Nursing Work in Acute Care)							
	Certificate III in Allied Health Assistance							
	Certificate III in Aged Care							

12. Any previous convictions?	
Are you being investigated for, have pending charges, have been found guilty for theft, fraud, serious driving offences or any form of aggression towards another person? Please do not apply for a position with us. We will not employ you.	☐ Yes ☐ No
NOTE: To be employed with DCCS, you must have a current Police Certificate (3 months valid from date) and DCCS will organise it at our cost providing you complete a form and issue relevant ID documentation to enable DCCS to upload and apply.	
Once employed with DCCS, if any police investigations, charges or criminal records arise within the 3 year period of the Police Certificate you must notify the office ASAP and resign.	
Are you under investigation for breach of the new <i>Code of Conduct for Aged Carers</i> that started on 1 December 2022? Please do not apply for a position with us. We will not employ you.	☐ Yes ☐ No
Have you been advised that you HAVE or WILL be added to the <i>Banning Orders Register</i> for Aged Carers? Please do not apply for a position with us. We will not employ you.	☐ Yes ☐ No
Have you been subject to disciplinary proceedings for misconduct or terminated by an employer? If yes, please provide details:	☐ Yes ☐ No
Are you under investigation by an Employer or Police investigation or do you have police charges pending (or dropped) for theft, drugs, fraud, poor driving, and drink driving or aggravated assault to another person? If yes, please provide details:	☐ Yes ☐ No
13. Your Declaration	
I confirm the details in this application are correct and I have informed you of all matters of significance	
I do not have a criminal record or any past/pending charges for theft, fraud, serious driving offences or aggression towards another person. I am not under Police Investigation or have police pending charges for theft, drugs, fraud, driving and drink driving or aggravated assault to another person.	-
I understand that providing false information, including omitting relevant information in my application result in instant dismissal.	form will
I authorise investigation of all statements in this application form and for you to contact my referees.	
Name: Signature:	

14. The Next Step – send your application back to us

Please **email** your completed employment application form to: recruitment

recruitment@daughterlycare.com.au

Alternatively please mail your employment application form to:

Vera Hannan, Recruitment Manager Daughterly Care Community Services Ltd PO Box 670, Narrabeen NSW 2101

Our phone number is (02) 9970-7333 for a confidential discussion about the role you are applying for.