

# *Cambridge Joint Playschemes*

Registered Charity Number 1045987

Suzie Davies  
Cambridge Joint Playschemes  
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Thank you for your interest in working with children with learning disabilities. I enclose a job description for Holiday Clubs, and application pack.

If you could return completed forms as soon as possible to the CJP Office address.

Once your application is received, we can consider your application and if you are shortlisted call you for interview.

Please note that all applicants must undergo a Disclosure and Barring Service Check and that we must receive two references, one of which must be from your present or most recent employer or a professional.

Please check out our website [www.camjointplay.org.uk](http://www.camjointplay.org.uk)

I look forward to hearing from you.

Yours sincerely

Suzie Davies  
Playscheme Manager

Enc.

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## **Background to the Charity**

Our first playscheme, CHAS (Cambridge Holiday Activity Scheme), ran in 1992. Childsplay followed in 1993 and the two charities merged and became a registered charity in 1995. Cambridge Joint Playschemes (CJP) merged with another specialist playscheme, Kaleidoscope, in 2000.

CJP was founded by parents and professionals involved in the care of children with learning disabilities, who recognised that both the children and their families would benefit from specialist holiday activities.

Over the years CJP expanded and ran five different playschemes in the Summer, two at Christmas and three at Easter. We now provide holiday playschemes for one week during Easter Holidays and 2 weeks during the summer break. Our Saturday Clubs are currently not operating but we hope to run them in future.

CJP has two aims: Firstly, to give children with learning disabilities the chance to join in stimulating activities and to socialise in a safe environment. Secondly, to give their families respite from caring, and the chance to do things with their other children that they may otherwise be unable to do.

As a voluntary organisation CJP is run by a Management Committee. The trustees come from a variety of backgrounds. Many of trustees have children who attend the schemes or have done so in the past. They also have a wide variety of professional experience in relevant fields.

Feedback from users, carers and professionals confirm that CJP meets a real need for holiday activities for children with disabilities. Flexible timetables of appropriate activities and outings and a high staff ratio on all schemes mean that individual needs are met and the children are enabled to participate.

Our staff all attend training sessions to ensure that they are equipped to provide an excellent standard of care.

A large proportion of our time is spent raising the funding for the playschemes to operate.

Meeting the demand for places is expensive and parental contributions only go a short way towards the costs. We rely on grants and donations from a variety of sources to run the schemes and to update our equipment so that we can expand the choice of activities on offer.

## ***Cambridge Joint Playschemes***

### **Child Protection & Safe Guarding Policy**

- 1 Cambridge Joint Playschemes recognises its duty to children and the need to respect them as individuals and protect their vulnerability.
- 2 The Cambridge Joint Playschemes recognises the part it has to play in the field of child protection and our duty to prevent the physical, sexual or emotional abuse or neglect of all children with whom we come in contact. We are committed to providing a safe environment for any child in our care.
3. We will ensure that any concerns in relation to the safety of a child involved with any activity organised by the Cambridge Joint Playschemes committee will be treated seriously and those concerns passed onto the appropriate agency so that these concerns can be assessed and appropriate action taken if necessary.
- 4 We also recognise the necessity of ensuring that any agency providing staff to work on the Playschemes has an appropriate child protection policy and procedures in place and that they are registered with the appropriate authority and that their staff have been through the necessary checking procedures. We also recognise that if any concerns about a child or a member of staff of any agency providing staff, are raised, that the agency needs to report or deal with the issues appropriately.
- 5 We will ensure that a member of the committee of the Cambridge Joint Playschemes is designated a "Child Protection Co-ordinator" and that they receive or have received appropriate training. The Designated Child Protection Worker will act as the first point of reference for any child protection issues.
- 6 We will ensure that all committee members have a copy of the Child Protection Policy and are aware of any procedures that would need to be undertaken.
7. We will produce a procedure to deal with any child protection issues involving the Cambridge Joint Playschemes.

**Children have a right to be safe.**

<b>Policy Adopted</b>	<b>1 March 2005</b>
<b>Updated &amp; Reviewed</b>	<b>October 2015</b>
<b>Updated and Reviewed</b>	<b>May 2020</b>

# *Cambridge Joint Playschemes*

## Equality and Diversity Monitoring Form

**Please note that this form will be removed prior to shortlisting. The information that you provide will be strictly confidential.**

This data will assist CJP in monitoring the effectiveness of its equal opportunities policy, comply with statutory requirements under the Sex Discrimination Act 1975, the Race Relations Act 1976 and the Disability Discrimination Act 1995, as well as other employment legislation and good employment practices.

This information will only be used as part of the ongoing analysis of our service, to assess the effectiveness of existing policies and develop new ones.

**Position applied for** .....

**Name (Mr/Ms/Mrs/Miss)** .....

**Date of birth** ..... **Male / Female**

**Do you have a disability** YES / NO

If yes, Please describe the nature of your disability .....

.....

**What is your ethnic group?**

a) White (British / Other - please specify).....

b) Mixed (please specify).....

c) Asian (British / Indian / Pakistani / Bangladeshi / Other - please specify)

.....

d) Black (British / Caribbean / African / Other - please specify)

.....

Signed ..... Date .....

Print name .....

**Thank you**

# *Cambridge Joint Playschemes*

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## **Job Description Support Worker – Saturday Clubs and Holiday Playschemes**

Cambridge Joint Playschemes is a local registered charity running Saturday Clubs and holiday playschemes for children with learning disabilities, some of whom may also have physical disabilities.

- Title:** Support worker or volunteer
- Salary:** £11.50 hour which includes an element of holiday pay.
- Responsible to:** The Activity Club/Playscheme Manager who has overall responsibility for the charity.
- Dates:** Saturday morning and occasional afternoons, as notified by the Play Scheme manager, for Activity Clubs. Staff work on a sessional basis. Full day during playschemes
- Location:** Various locations around Cambridge and surrounding areas and Granta School, Linton
- Hours:** Saturdays Variable according to need. Holiday Playschemes 09:30 am-3:30 pm Work is on a sessional basis.
- Training** Staff will attend 'In-House' training sessions to ensure that they are equipped to provide an excellent standard of care. This will include safeguarding responsibilities. They will be paid for this time.
- Children:** All children who attend are aged between 8 – 19 years of age and have severe to moderate learning disabilities.

### **Purpose of the job:**

As part of the team of helpers, you will enable the children to participate in a mainstream activity. It is our intention that all children should have a stimulating, fun and enjoyable time.

### **Principal Duties and Responsibilities:**

1. To participate in the outing as part of the team of Helpers under the guidance of the Co-ordinator.
2. To be responsible for one or more named children as a key worker, and to be aware of their individual needs such as behaviour strategies and dietary requirements.
3. To help children with personal care where necessary eg. Taking children to the toilet, dressing children after swimming or helping children at meal times.
4. To liaise with parents or carers as necessary
5. To be conversant with the guidelines and policies of Cambridge Joint Playschemes and to act in accordance with them at all times.
8. To attend meetings and training sessions as required in addition to the core hours.

(You will be paid for any such extra hours you are required to work.)

### **Reporting, Authority and Responsibility**

Normally, you will be under the authority of the Group Co-ordinator. The Playscheme Manager is involved in the day to day running of the schemes and will have overall responsibility for all staff.

### **Uniform**

The Management Committee has adopted a polo shirt or sweat shirt as a uniform for all those working on the playschemes. This has been done to help children, parents, visitors and others, particularly when the children are out on trips, recognise who the staff are. You are required to wear the uniform provided and to return it at the end of your employment. If it is not returned at the end of your period of employment the cost of replacing the shirt will be deducted from your final salary payment.

**Confidentiality:** You are required not to disclose any confidential information relating to the playscheme or to any child attending the playscheme. The use of mobile phones for recording images of the children/young people is strictly prohibited.

**This Job Description is intended for the guidance of applicants and may be amended to incorporate more specific requirements appropriate to individual schemes. Exact details will be confirmed on appointment.**

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## **Personal Specification - Playworker**

The work is demanding but rewarding. We wish to appoint a well-motivated and enthusiastic team of staff. The following notes are intended as information for prospective applicants.

### **Essential:**

Candidates should

- i) be over 16 years of age.
- ii) have energy and enthusiasm, and initiative.
- iii) have a willingness to take part in all activities
- iv) be willing to undertake in-service training as appropriate.

### **Desirable:**

- i) Have previous experience of children, and preferably with disabilities, although training will be given.
- ii) An understanding of disability issues

### **Personal Qualities:**

- i) Good rapport with children and sensitivity to the wishes and feelings of their families.
- ii) Flexibility and self-confidence, a hands on person.
- iii) Good written and verbal skills.

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## Application for employment as: Playworker

All Applications will be considered on merit regardless of sex, marital status, ethnic origin or disability

### Please Complete in full

PERSONAL DETAILS	
Surname:	Previous Name (If applicable):
First name(s):	Date of birth:
Full Postal Address: (if you are a student please give your home and college addresses and the relevant dates when you can be contacted at each)	
Home	
Mobile Tel No :	Home Tel.:
Email:	College
	Work/College Tel.:

SECONDARY EDUCATION AND TRAINING			
Schools/Colleges attended	from	to	Qualifications obtained (if any) Date
Grade			
(please state if part-time)			



**DETAILS OF RELEVANT TRAINING COURSES ATTENDED:**

Course attended	from	to	Qualifications obtained (if any)
Date	Grade		

**PRESENT OR MOST RECENT EMPLOYER** (if a student give details of institution and course of study):

Name	Address	Position	Length of Service
Please give an outline of your duties:			

**PREVIOUS EMPLOYMENT / Relevant Experience in the Voluntary Sector** (most recent first)

Name of Employer and business for leaving (or voluntary group)	Post held	From	To	Reason
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**DO YOU HOLD A CURRENT Enhanced Disclosure from the Criminal Records bureau?**

YES/NO

Date of Issue

**FURTHER INFORMATION**

Please use this space to tell us why you want this job. Please describe any previous experiences or abilities that are relevant to your application e.g. outside interests, jobs, family or personal experience, voluntary work, hobbies etc. Continue on a separate sheet if necessary.

**REFERENCES**

Please give the Names and addresses of two people we can contact for a reference. Referees must not be a relative. One of your referees must hold a professional position or be your present or most recent employer.

Name and address relationship to you	Tel.	Occupation or
1.		
2.		

Because of the nature of the work for which you are applying, under the Rehabilitation of Offenders Act 1974, Exemptions Order 1975, you are required to disclose any criminal convictions you have had.

**HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE?**

YES /NO (please delete as applicable) If YES please give details:

Only relevant convictions will be taken into account in considering your application but the discovery of withheld information at a later date may lead to disciplinary action or dismissal.

**HEALTH**

Please indicate your general state of health and give details of any condition which might limit your involvement in certain activities, e.g. swimming:

Are there any tasks that you are unable to carry out? YES/NO (please delete as applicable)  
If YES please specify:

**DECLARATION**

The information given in this application is to the best of my knowledge true and accurate.

Signed: ..... Date:  
.....

**Please return this form to: [camjointplay@btconnect.com](mailto:camjointplay@btconnect.com)**

# *Cambridge Joint Playschemes*

Fitness for Work – Medical Questionnaire

**STRICTLY PRIVATE AND CONFIDENTIAL**

Mr/Mrs/Miss (other)..... First name(s).....

Surname..... Previous or maiden surname.....

Date of birth..... Sex (M/F) .....

Address.....

.....

Post code.....Tel.....

**MEDICAL INFORMATION**

**A.** If you have ever suffered from any of the following please write 'YES' in column A and give the date in column B. If the answer is no please write 'NO' in column A. **Every question should be answered YES or NO.**

	<b>ILLNESS</b>	<b>A (yes/no)</b>	<b>B (yes/no)</b>
1	Asthma, hay fever or other allergic conditions		
2	Bronchitis, pleurisy, pneumonia		
3	Rheumatism, arthritis		
4	Disease of the heart or lungs		
5	Hernia		
6	Epilepsy, convulsions, blackouts, attacks of fainting or dizziness		
7	Back trouble or injury		
8	Significant ailments of the stomach, bowels or digestive system		
9	High blood pressure		
10	Diabetes		
11	Any form of mental illness		
12	Any other severe illness, serious injury, disability or need for medical attention		

**B.** If there is an answer YES to any of the other previous questions, please provide further details, e.g. duration of illness, nature of treatment, date of return to work, any further attack etc. (use separate sheet if necessary).

.....

.....

If space for writing is inadequate, please continue on separate sheet.

**C.** Are you in good health at the present time? YES [ ] NO [ ]

.....

**D.** Are you taking any medicine or tablets or having any treatment regularly supplied by your doctor or hospital? YES [ ] NO [ ]

.....

.....

**E.** Do you expect to have any surgical treatment in the near future? Please give details YES [ ] NO [ ]

.....

.....

**F.** Have you during the last five years had any absences from work/study because of illness (including injury/other disability) totalling ten days or more in any one year? Please give details. YES [ ] NO [ ]

.....

.....

**G.** Have you had to leave any job on medical grounds? YES [ ] NO [ ] Give brief details

.....

.....

**H.** Are there any other relevant facts you feel you should give?

.....

.....

**I.** Please give the name and address of your own General Practitioner

.....

.....

**J.** Are you immune to TB by virtue of having been immunised against it or having a mantoux Tine or Heaf test? YES [ ] NO [ ]

**K.** Have you been immunised against:

Poliomyelitis YES [ ] NO [ ] Year..... Tetanus YES [ ] NO [ ] Year.....

Rubella YES [ ] NO [ ] Year..... Hepatitis B YES [ ] NO [ ] Year....

**DECLARATION**

I declare that I have answered all the above questions honestly and fully and that I am not otherwise aware of any physical or mental disability which will, or may affect my working capacity. I realise that, if appointed, any false or incomplete statement on my part will render me liable to dismissal.

I agree to notify Cambridge Joint Playschemes of any changes that may necessitate the completion of a further health declaration.

I agree to make myself available for a medical examination by a medical practitioner at the charity’s expense if it is felt that the details disclosed in this document warrant further investigation in the light of the post for which I am being considered. I do / do not (delete as appropriate) authorise the charity to contact my family practitioner if this is considered necessary. I do / do not require access to the report by the medical practitioner before it is passed to my employer.

Signature.....Date.....

Print Name.....

Please return this form to Cambridge Joint Playschemes via email

To Suzie Davies  
Cambridge Joint Playschemes at  
camjointplay@btconnect.com