

HOME CARE REGISTRATION FORM

Please complete the form below, providing as much detail as possible.

Name of organisation

Name of service

SECTION 1: ELIGIBILITY

1. Are you operational in Leeds? Yes No

Please note that you must be operational in Leeds to feature on the Leeds Directory website.

2. Do you agree to the Leeds Directory Terms & Conditions? Yes No

SECTION 2: GREEN TICK

1. Do you use contractors? Yes No

2. Have you ever operated under a different name? Yes No

3. If so, what was the previous name(s) you operated under?

4. Please indicate if you are regulated by or have an agreement with any of the following:

| Please tick where applicable | Organisation | Your registration number |
|------------------------------|-------------------------|--------------------------|
| | CQC | |
| | General Optical Council | |
| | HCPC | |

In order to complete your Green Tick registration, we will require some evidence from you. The team will be in touch with you over the next 5-10 working days.

Please see our [Green Tick Criteria and Guidance Notes](#) for more information about the Green Tick process.

SECTION 3: FURTHER DETAILS

1. Number of employees

2. Date organisation established:

3. How did you hear about the Leeds Directory?

4. Is this a Leeds City Council commissioned service?

Yes

No

5. Is this a Leeds City Council Service?

Yes

No

6. Please provide a description of your service:

SECTION 3: FURTHER DETAILS—CONTINUED

7. Please provide contact details for your service:

Address of service:

Postcode of service:

Phone number of service:

Contact email for service:

Website:

Mobile phone:

Facebook:

Twitter:

Instagram:

Contact name:

Contact job title:

8. When is the service available?

9. Cost (e.g. £15 per hour):

SECTION 4: ATTRIBUTES

1. To ensure that users can find your service quickly and easily, please select from the attributes below. Please only select the attributes that are relevant to your service.

Postcodes covered

- BD11
- BD4
- Citywide
- LS1
- LS10
- LS11
- LS12
- LS13
- LS14
- LS15
- LS16
- LS17
- LS18
- LS19
- LS2
- LS20
- LS21
- LS22
- LS23
- LS24
- LS25
- LS26
- LS27
- LS28
- LS29
- LS3
- LS4
- LS5
- LS6
- LS7
- LS8
- LS88
- LS9
- LS99
- WF10
- WF3

Who do you support?

- All adults
- Older people
- People on the Autism spectrum
- People who are frail
- People with brain injury
- People with dementia
- People with learning disabilities
- People with long term health conditions
- People with mental health conditions
- People with past or present addiction
- People with physical disabilities
- People with sensory impairment

What type of organisation are you?

- Agency
- Ltd Company
- Partnership
- Social Enterprise
- Sole Trader
- Other

Services offered:

- Assisted outings
- Bathing & showering
- Budgeting
- Catheter / colostomy care
- Companionship
- Continence care
- Decluttering
- Dog walking
- Domestic help
- Dressing
- Eating & drinking
- End of life care
- Gardening
- Hospital discharge
- Live in help
- Meal preparation / cooking
- Medicine assistance
- Money management
- Night care
- Nursing care
- Oral care
- Outings
- Peg feeding care
- Pension collection
- Personal Assistants
- Personal care
- Pet care
- Shopping
- Sitting service
- Socialising
- Support to participate in community life
- Support workers
- Toileting assistance
- Transport / Drivers

SECTION 4: ATTRIBUTES—CONTINUED

Who do you support?

- All adults
- Older people
- People on the Autism spectrum
- People who are frail
- People with brain injury
- People with dementia
- People with learning disabilities
- People with long term health conditions
- People with mental health conditions
- People with past or present addiction
- People with physical disabilities
- People with sensory impairment

Professional Body

- Care England
- Leeds Care Association
- National Care Forum
- National Care Home Association
- Registered Nursing Home Association

What type of organisation are you?

- Agency
- Ltd Company
- Partnership
- Social Enterprise
- Sole Trader
- Other