

School of Social Sciences

Best Interests Assessor Application MA Advanced Social Work Practice

Continuous Professional Development (CPD) Courses
for Qualified Social Workers



BIA Confirmation of Eligibility Statement

In order to confirm that you are eligible to undertake Best Interests Assessor training please complete and sign this form and return it to **SOC.CPD@ntu.ac.uk**.

1 Please confirm that you are a currently registered member of at least one of the following professional groups and that you are not suspended from that register:

- | | | | | |
|------------------------------|-----|--------------------------|----|--------------------------|
| a) a social worker | yes | <input type="checkbox"/> | no | <input type="checkbox"/> |
| b) a first level nurse | yes | <input type="checkbox"/> | no | <input type="checkbox"/> |
| c) an occupational therapist | yes | <input type="checkbox"/> | no | <input type="checkbox"/> |
| d) a chartered psychologist | yes | <input type="checkbox"/> | no | <input type="checkbox"/> |

2 Please confirm that you will have at least two years post qualifying experience in one of the professions mentioned prior to the date of the first day of the course.

yes no

3 If you are paying for this course independently, please confirm that you understand that it is your responsibility to arrange for sufficient practice experience, which must include shadowing at least two BIA assessments, during the course of your study.

yes no not applicable as I am sponsored

If you are being sponsored by a Local Authority, please complete and return the Data Sharing form that will be sent to you by the course administrators after you have submitted this application.

We will reserve a place on the course for you once we have checked this information.

Print name:

Signature:

Date:

Candidates applying for the Best Interests Assessor module will also need to provide the following:

Please provide a statement from a line manager or registered professional who is suitably placed to verify your experience and ability to work to the requirements of the Mental Capacity Act.

Name:

Professional Role:

Relationship to applicant:

Contact email/ telephone number:

Please outline the applicant's suitability to train as a Best Interests Assessor and their experience of working with the Mental Capacity Act?

Finally, you are required to complete the following short written statement. This will be used by the University to check that you have sufficient working familiarity with the Mental Capacity Act 2005 and the ability to benefit from studying at postgraduate level.

Use 750 – 1,000 words to describe how the following expression may apply to your practice, in terms of the Mental Capacity Act's requirement to assess capacity before acting in someone's best interests – “Do not allow the tail of best interests to wag the dog of capacity”.

Please illustrate your answer with a practice situation that you have been involved in. You should aim to incorporate at least a couple of references to law and reading within your statement.

Please attach additional sheets if required.

School of Social Sciences

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