

# **Collaborating for a Sustainable Workforce**

## National Framework for the Provision of Clinical and Healthcare Staffing

## **Annex 1: Order Form**

## FROM:

CONTRACTING AUTHORITY	NHS Midlands & Lancashire Commissioning Support Unit		
CONTRACTING AUTHORITY ADDRESS	Heron House 120 Grove Road Fenton Stoke on Trent Staffordshire ST4 4LX		
INVOICE ADDRESS (if different)			
CONTRACTING AUTHORITY			
AUTHORISER NAME			
ORDER NUMBER	To be advised		
ORDER DATE	To be advised		
COMMENCEMENT DATE	14 February 2022 (or as soon as possible after)		
ANTICIPATED END DATE	Three month assignment with potential to extend		

TO:

SUPPLIER	Coyle Recruitment				
SUPPLIER'S ADDRESS	Hygeia,				
	66-68 College Road,				
	Harrow,				
	Middlesex HA1 1BE				
ACCOUNT MANAGER	Name:				

PART 1: SERVICE REQUIREMENT		
PART 1.1: SERVICE AND DELIVERABLES REQUIRED: Temporary Worker Requirements:		
LOT: (If Lots 1-5, please indicate if	3	
Master Vendor)		
NUMBER OF ROLES REQUIRED:	1	





NUMBER OF CVS REQUIRED:  CVs of suitably qualified and experienced candidate welcomed  JOB ROLE/TITLE:  CHC Nurse Assessor  PAY BAND/GRADE:  6  HOURS/DAYS REQUIRED:  Up to a maximum of 37.5 hours per week, Monday				
PAY BAND/GRADE: 6	I			
	CHC Nurse Assessor			
HOURS/DAYS REQUIRED: Up to a maximum of 37.5 hours per week Monday				
TOOKODATO KEGOIKED. Op to a maximum of 57.5 hours per week, Worlday	to			
Friday				
ANY UNSOCIAL HOURS REQUIRED? None				
(GIVE DETAIL)				
RELEVANT RISK Yes				
ASSESSMENT/SAFEGUARDING	3.7			
REQUIREMENTS				
IMMUNISATION REQUIREMENTS  None required				
HIGH COST AREA SUPPLEMENT? 1. None				
SKILLS, TRAINING AND  Suitably qualified and experienced CYP professional				
QUALIFICATIONS NECESSARY TO				
PERFORMANCE OF THE ROLE:				
PERSON AND DEPT TO WHOM WORK- Personalised Healthcare				
SEEKER SHOULD REPORT AT				
START:				
EXPENSES No				
ADDITIONAL REQUIREMENTS: None				
SHIFT START DATE:				
PART 1.2: PAYMENT PROFILE WILL BE 'ON COMPLETION OF WORKS' AS PER				
PARAGRAPH 9.3 OF SCHEDULE 2 OF THESE CALL-OFF TERMS AND CONDITIONS.  DISCOUNTS APPLICABLE:				
METHOD OF PAYMENT				
PART 1.3: ACCEPTANCE PRIOR TO PAYMENT				
Completion and approval of an assignment time sheet by Service Provider				
Completion and approval of an assignment time sheet by service Provider				
PART 2: CONTRACTING AUTHORITY CONTRACTUAL REQUIREMENTS &				
DELIVERABLES				
Purchase order will be raised for each individual				
PART 3: FURTHER-COMPETITION ORDER - ADDITIONAL REQUIREMENTS (IF				
APPLICABLE)				
PART 3.1: SUPPLEMENTARY N/A				
REQUIREMENTS IN ADDITION TO				
CALL-OFF TERMS AND CONDITIONS:				
PART 3.2: VARIATIONS TO CALL-OFF N/A				
TERMS AND CONDITIONS:				





PART 4: PERFORMANCE OF THE SERVICES AND DELIVERABLES			
PART 4.1: KEY PERSONNEL OF THE	N/A		
SERVICE PROVIDER TO BE INVOLVED			
IN THE SERVICES AND			
DELIVERABLES:			
PART 4.2: SUB-CONTRACTORS TO BE	N/A		
INVOLVED IN THE SERVICES AND			
DELIVERABLES:			
PART 5: CONFIDENTIAL INFORMATION			
PART 5.1: THE FOLLOWING			
INFORMATION SHALL BE DEEMED			
COMMERCIALLY SENSITIVE			
INFORMATION OR CONFIDENTIAL			
INFORMATION:			

BY SIGNING AND RETURNING THIS ORDER FORM THE SUPPLIER AGREES to enter a legally binding contract with the Contracting Authority to provide to the Contracting Authority the Services specified in the Service Order Requirements set out in this Order Form [(together with where completed and applicable, the further-competition order (additional requirements)] incorporating the rights and obligations in the Call-Off Terms and Conditions set out in the Framework Agreement between the Supplier and the Authority.

### FOR AND ON BEHALF OF THE SUPPLIER:

NAME:	
TITLE:	
SIGNATURE:	DocuSigned by:
DATE:	21/02/2022

#### FOR AND ON BEHALF OF THE CONTRACTING AUTHORITY:

	2	
NAME:		
TITLE:		
SIGNATURE:		
DATE:		

### Order Form FAQs

When should I use this order form? – this form should be completed when you have agreed to source Temporary Worker/s from a Supplier using either a direct award or following completion of a further competition.

Who should I send the form to? – Once you have filled out the form it should be sent to the Supplier for signature. Both you and the Supplier should keep a signed copy of the form.





Delivered by

Who is the Contracting Authority? - This is your organisation. Whoever is paying the invoices should be entered here

Who is the Supplier? - The Recruitment Agency you are hiring the Temporary Worker from.

What is a Call-Off Contract? - is an individual contract between a Supplier and Contracting Authority for the provision of services, goods or works (deliverables) under the terms and conditions of the overarching framework contract. A Call-off from a framework is that final part Suppliers and Contracting Authority's need to complete to begin working with each other.

What are "deliverables"? - This is a statement of what the Contracting Authority requires as part of the contract.

What should I enter in "Order number"? - A specime reference given/accigned by yea, the contracting Authority, that clearly identifies work undertaken as

What should I enter in "Order Date"? - The date that the terms of the call off are agreed.

What is the "Commencement Date"? - When supply is agreed to commence. This can be different from the order date e.g. the start of the next term.

What is the "Anticipated end date"? - This is a date defined by the Contracting Authority and can be any duration, 6 months etc. to suit the Contracting Authority's needs. Note: the period should be long enough to ensure fair provision of services by the Supplier/s and that it gives reasonable time for any Contracting Authority conclusions to be made. Include here any contract extension options detailing how the call off may be continued after the Anticipated End Date.





