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**Provision of Mobile Processing Project**

 **TO**

 **Department of Health and Social Care**

**From**

**Program Planning Professionals Limited**

 **Contract Reference: CCCC21A90**

12/08/2013

**FRAMEWORK SCHEDULE 4**

**CALL OFF ORDER FORM**

PART 1 – CALL OFF ORDER FORM

SECTION A

This Call Off Order Form is issued in accordance with the provisions of the Framework Agreementfor the provision of Mobile Processing Project dated **04 September 2018**.

The Supplier agrees to supply the Services specified below on and subject to the terms of this Call Off Contract.

For the avoidance of doubt this Call Off Contract consists of the terms set out in this Template Call Off Order Form and the Call Off Terms.

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| --- | --- |
| Order Number | To be confirmed at Contract Award |
| From | Test and Trace Department of Health and Social Care("CUSTOMER") |
| To | Program Planning Professionals Limited("SUPPLIER") |
| Date  | 6th May 2021("DATE") |

SECTION B

1. call off contract period

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| --- | --- |
|  | **Commencement Date**: This contract is deemed to have commenced 29th April 2021 |
| * 1.
 | **Expiry Date**:End date of Initial Period: 23rd July 2021There shall be no expressed extension provision for this contract beyond this date |

1. Services

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| --- | --- |
| 2.1.  | **Services required**: To provide oversight and direction for the Mobile Processing projects which represent a step change in capability and a key element of future strategy. Scope of work includes direction of four different mobile processing projects which will be provide Four Nations coverage and a strategic reserve to be used in outbreak response and to reduce turnaround times. These projects have now entered the pilot stage and, if successful, subject to business cases which will need to be submitted in Q2, will be further expanded. Role may also include the development of mobile resources for sequencing. |

1. PROJECT Plan

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| **3.1.**  | **Project Plan**: In Call Off Schedule 4 (Project Plan) |

1. contract performance

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| **4.1.**  | **Standards**:Not Applicable |
| **4.2** | **Service Levels/Service Credits**:Not applied |
| **4.3** | **Critical Service Level Failure**:Not applied |
| **4.4** | **Performance Monitoring:** Not applied |
| **4.5** | **Period for providing Rectification Plan:** In Clause 39.2.1(a) of the Call Off Terms  |

1. personnel

|  |  |
| --- | --- |
| **5.1** | **Key Personnel**: Customer- Rachid MellitiSupplier-Laura willson |
| **5.2** | **Relevant Convictions** (Clause 28.2 of the Call Off Terms):In Clause 28.2 of the Call Off Terms |

1. PAYMENT

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| **6.1** | **Call Off Contract Charges** (including any applicable discount(s), but excluding VAT): In Annex 1 of Call Off Schedule 3 (Call Off Contract Charges, Payment and Invoicing) |
| **6.2** | **Payment terms/profile** (including method of payment e.g. Government Procurement Card (GPC) or BACS):For the avoidance of doubt, the total contract value will not exceed £64,800.00 exc. VAT.**REDACTED** |
| **6.3** | **Reimbursable Expenses**: Not permitted |
| **6.4** | **Customer billing address** (paragraph 7.6 of Call Off Schedule 3 (Call Off Contract Charges, Payment and Invoicing)):REDACTED |
| **6.5** | **Call Off Contract Charges fixed for** (paragraph 8.2 of Schedule 3 (Call Off Contract Charges, Payment and Invoicing)):For the term of the Call OffContract from the Call Off Commencement Date |
| **6.6** | **Supplier periodic assessment of Call Off Contract Charges** (paragraph 9.2 ofCall Off Schedule 3 (Call Off Contract Charges, Payment and Invoicing))will be carried out on:Not Applied |
| **6.7** | **Supplier request for increase in the Call Off Contract Charges** (paragraph 10 of Call Off Schedule 3 (Call Off Contract Charges, Payment and Invoicing)):Not Permitted |

1. LIABILITY and insurance

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| **7.1** | **Estimated Year 1 Call Off Contract Charges**:The sum of £64,800.00 (exc VAT) |
| **7.2** | **Supplier’s limitation of Liability** (Clause 37.2.1 of the Call Off Terms);In Clause 37.2.1 of the Call Off Terms |
| **7.3** | **Insurance** (Clause 38.3 of the Call Off Terms):In Clause 38.3 of the Call Off Terms |

1. TERMINATION and exit

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| **8.1** | **Termination on material Default** (Clause 42.2 of the Call Off Terms)):In Clause 42.2.1(c) of the Call Off Term |
| **8.2** | **Termination without cause notice period** (Clause 42.7 of the Call Off Terms):In Clause 42.7 of the Call Off Terms |
| **8.3** | **Undisputed Sums Limit**:In Clause 43.1.1 of the Call Off Terms |
| **8.4** | **Exit Management:** Not applied  |

1. supplier information

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| **9.1** | **Supplier's inspection of Sites, Customer Property and Customer Assets:**Not Applied |
| **9.2** | **Commercially Sensitive Information**:Not Applied |

1. OTHER CALL OFF REQUIREMENTS

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| **10.1** | **Recitals** (in preamble to the Call Off Terms):Recital A |
| **10.2** | **Call Off Guarantee (Clause 4 of the Call Off Terms):**Not required |
| **10.3** | **Security**:Short form security requirements |
| **10.4** | **ICT Policy:**As per Department for Health and Social Care standard policy |
| **10.6** | **Business Continuity & Disaster Recovery**: Not applied |
| **10.7** | **NOT USED** |
| **10.8** | **Protection of Customer Data** (Clause 35.2.3 of the Call Off Terms):Not Applicable |
| **10.9** | **Notices** (Clause 56.6 of the Call Off Terms):Customer’s postal address and email address:**Department of Health and Social Care,****39 Victoria Street,****Westminster,****London,****SW1H 0EU**Supplier’s postal address and email address:**Program Planning Professionals Limited****3-5 Crutched Friars****London****EC3N 2HT** |
| **10.10** | **Transparency Reports**In Call Off Schedule 13 (Transparency Reports) |
| **10.11** | **Alternative and/or Additional Clauses from Call Off Schedule 14 and if required, any Customer alternative pricing mechanism:**Not Applicable |
| **10.12** | **Call Off Tender**:In Schedule 15 (Call Off Tender) |
| **10.13** | **Publicity and Branding (Clause 36.3.2 of the Call Off Terms)**Not Applicable |
| **10.14** | **Staff Transfer**Annex to Schedule 10, List of Notified Sub-Contractors (Call Off Tender). |
| **10.15** | **Processing Data**Call Off Schedule 17 |
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| **Contract Reference:** | **CCCC21A90** |  |  |
| **Date:**  | **6th May 2021** |  |  |
| **Description Of Authorised Processing** | **Details** |  |  |
| Identity of the Controller and Processor | The Parties acknowledge that for the purposes of the Data Protection Legislation the Parties are independent controllers of Personal Data under this Framework Agreement.  |  |  |
| Use of Personal Data | Managing the obligations under the Call Off Contract Agreement, including exit management, and other associated activities,  |  |  |
| Duration of the processing | For the duration of the Framework Contract plus 7 years.  |  |  |
| Nature and purposes of the processing |  |  |  |
| Type of Personal Data | Full nameWorplace addressWorkplace Phone Number Workplace email address Names Job TitleCompensation

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| --- |
| Tenure InformationQualifications or Certifications |
| Nationality |
| Education & training history |
| Previous work history |
| Personal Interests |
| References and referee details |
| Driving license details |
| National insurance number |
| Bank statements |
| Utility bills |
| Job title or role |
| Job application details |
| Start date |
| End date & reason for termination |
| Contract type |
| Compensation data |
| Photographic Facial Image |
| Biometric data |
| Birth certificates |
| IP Address |
| Details of physical and psychological health or medical condition |
| Next of kin & emergency contact details |
| Record of absence, time tracking & annual leave |

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| Categories of Data Subject |  |  |  |

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**FORMATION OF CALL OFF CONTRACT**

**BY SIGNING AND RETURNING THIS CALL OFF ORDER FORM (which may be done by electronic means) the Supplier agrees to enter a Call Off Contract with the Customer to provide the Services in accordance with the terms Call Off Order Form and the Call Off Terms.**

**The Parties hereby acknowledge and agree that they have read the Call Off Order Form and the Call Off Terms and by signing below agree to be bound by this Call Off Contract.**

**In accordance with paragraph 7 of Framework Schedule 5 (Call Off Procedure), the Parties hereby acknowledge and agree that this Call Off Contract shall be formed when the Customer acknowledges (which may be done by electronic means) the receipt of the signed copy of the Call Off Order Form from the Supplier within two (2) Working Days from such receipt.**

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| **For and on behalf of the Supplier:** |
| Name and Title | REDACTED |
| Signature | REDACTED |
| Date |  |
| **For and on behalf of the Customer:** |
| Name and Title | REDACTED |
| Signature | REDACTED |
| Date |  |