

**RM6160: Non Clinical Temporary and  
Fixed Term Staff  
(Short Form)**

**For help with completing this Order Form please refer to the Short Order Form FAQ's [here](#)**

**Guidance:**

This Order Form, when completed and signed by both you (the Contracting Authority) and the Supplier, forms a Call-Off Contract from CCS framework RM6160, Non Clinical Temporary and Fixed Term Staff. Signing the Order Form ensures that both parties are able to compliantly use the terms and conditions agreed from the procurement exercise.

You can complete and execute a Call-Off contract by using an equivalent document or electronic purchase order system. If an electronic purchasing system is used, the text below must be copied into the electronic order form.

**Order Form Template**

This Order Form is for the provision of the Call-Off Deliverables. It is issued under the **Framework Contract RM6160**: Non Clinical Temporary and Fixed Term Staff.

<b>Contracting Authority Name</b>	Secretary of State for Health and Social Care acting as part of the Crown  Oscar number: PS1391
<b>Contracting Authority Contact</b>	██████████ Senior Business Management Lead Managed Quarantine Service 39 Victoria Street, London, SW1H 0EU E: ██████████
<b>Contracting Authority Address</b>	Department of Health and Social Care 39 Victoria Street Westminster Victoria London SW1H 0EU
<b>Invoice Address (if different)</b>	██

<b>Supplier Name</b>	Hays Specialist Recruitment Limited (company number 00975677)
<b>Supplier Contact</b>	██████████
<b>Supplier Address</b>	4th Floor, 20 Triton Street, London, NW1 3BF

<b>Framework Ref</b>	RM6160: Non Clinical Temporary and Fixed Term Staff
<b>Framework Lot</b>	2
<b>Call-Off (Order) Ref</b>	C63350
<b>Order Date</b>	10 December 2021
<b>Call off Start Date</b>	10 <sup>th</sup> December 2021
<b>Call-Off Expiry Date</b>	31 <sup>st</sup> January 2022

<b>Extension Options</b>	To be agreed
<b>GDPR Position</b>	Independent Controller
<b>Job role / Title</b>	██████████ Senior response Officer (SEO)
<b>Temporary or Fixed Term Assignment</b>	Temporary Worker
<b>Hours / Days required</b>	38 Days
<b>Unsocial hours required – give details</b>	As agreed at point of supply
<b>High cost area supplement details</b>	1. None
<b>DBS REQUIRED (FEE TYPE 1 AND 2 ONLY)</b>	1. Basic
<b>Immunisation requirements? (Fee type 1 only)</b>	None

<b>Pay band</b>	8D	
<b>Fee Type</b>	2. Non-Patient Facing (Disclosure)	
<b>Expenses to be paid or benefits offered</b>	N/A	
<b>Expenses to be paid by Temporary Worker</b>	TBC	
<b>Charge rates</b>	██████████	██████████
	██████████	████████████████████
	██████████	████████████████████
<b>Method of payment</b>	<p>Total Value £17,974</p> <p>The candidate will submit a weekly timesheet for approval. Acceptance will be indicated through the approval of a timesheet by Contracting Authority.</p> <p>Invoices will be issued weekly with charges as per the Framework Agreement.</p> <p>██</p> <p>██</p> <p>██</p>	
<b>Discounts applicable</b>	<p><u>For Lots 1 and 2</u></p> <p>██</p> <p>██</p> <p>██</p>	

<b>Table 1</b>				
Lot 1	Band	Middle of Salary Band	With Disclosure Supplier Fee	Discounted Supplier Fee
Admin & Clerical				

<b>Table 2</b>				
Lot 2	Band	Middle of Salary Band	With Disclosure Supplier Fee	Discounted Supplier Fee
Corporate Services				


Criminal records check	Yes - Basic
BPSS required	Yes
State required clearance and background checking	None
Skills, mandatory training and qualifications necessary for the role	None

### CALL-OFF INCORPORATED TERMS

The Call-Off Contract, Core Terms and Joint Schedules' for this Framework Contract are available on the CCS website. Visit the **Non Clinical Temporary and Fixed Term Staff** web page and click the 'Documents' tab to view and download these.

### CALL-OFF DELIVERABLES

The requirement
The Supplier will provide a Temporary Worker to perform the Assignment as detailed above

### VARIATIONS TO CALL-OFF TERMS AND CONDITIONS

(i)	<div><div></div><div></div><div></div></div> <div><div></div><div></div><div></div></div> <div><div></div><div></div><div></div></div>
(ii)	<div><div></div><div></div><div></div></div>

(iii)

[Redacted content]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

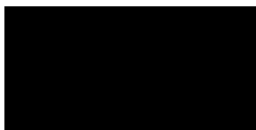
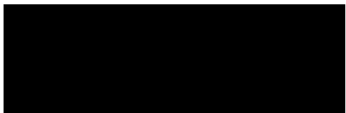




(v) [REDACTED]

[REDACTED]

## PERFORMANCE OF THE DELIVERABLES

<b>Key Staff</b>
██████████
<b>Key Subcontractors</b>
N/A

**Order Form Template (Short Form)**  
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For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:	12.1.2022	Date:	18/01/2022