

RM6160: Non Clinical Temporary and Fixed Term Staff (Short 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.

Contracting Authority Name	Department for Health and Social Care
Contracting Authority Contact	REDACTION REDACTION
Contracting Authority Address	Department for Health & Social Care 39 Victoria Street London SW1H 0EU
Invoice Address (if different)	Email: REDACTION for electronic submission Or Postal invoices to: REDACTION REDACTION REDACTION REDACTION Quoting valid PO number

Supplier Name	Investigo Limited
Supplier Contact	REDACTION REDACTION REDACTION
Supplier Address	10 Bishop Square Spitalfields E1 6EG

Framework Ref	RM6160: Non Clinical Temporary and Fixed Term Staff
Framework Lot	Lot 2: Corporate Functions
Order reference number (e.g. purchase order number)	To be confirmed following contract commencement
Date order placed	As per date of final contract signature
Call off Start Date	1 February 2021
Call-Off Expiry Date	31 August 2021* <i>* The Contracting Authority will reserve the right to terminate on completion of the work within this timeframe.</i>
Extension Options	None
GDPR Position	Independent Controller
Job role / Title	Data and Reporting Lead
Temporary or Fixed Term Assignment	Temporary
Hours / Days required	A maximum of 50 Working Days
Unsocial hours required – give details	Not Applicable
High cost area supplement details (NHS only)	None
Immunisation requirements? (Fee type 1 only)	Not Applicable

Order Form Template (Short Form)

Crown Copyright 2019

Pay band (use rate card to determine this)	REDACTION	
Fee Type	Non-Patient Facing (No Disclosure required)	
Expenses to be paid or benefits offered	REDACTION	
Expenses to be paid by Temporary Worker	REDACTION	
Charge rates	Pre-AWR	Post-AWR
	REDACTION	£ REDACTION (Day)
Method of payment	via BACs or alternative payment method as agreed between the Contracting Authority and the Agency.	
Discounts applicable	None	

Criminal records check required	None
BPSS required	None
State any other required clearance and/or background checking	None
State any 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
<p>Provision of a Data Validation and Assurance Lead whose scope of work will extend to the provisions detailed below.</p> <p>The Contracting Authority is committed to the Diagnostic phase of the requirement. However, exact details of any subsequent in-scope work packages will be developed and agreed during the contract, and will be drawn down and managed against a maximum of fifty working days resource.</p> <ul style="list-style-type: none">• Diagnostic – The contractor will review and validate existing excel spreadsheets sets; define user requirements; propose high level solutions and implementation plan. (10 days)• Work package 1 – The contractor will identify and rectify existing duplications and errors in naming conventions for products, suppliers and allocations methodology. (5 days)• Work package 2 – The contractor will develop and test product configurator (5 days)• Work package 3 – The contractor will develop and test new data templates (10 days)• Work package 4 – The contractor will align data sets with power BI dashboards (5 days)• Work package 5 – The contractor will undertake product validation (5 days)• Work package 6 – To be confirmed (5 days)• Work package 7 – Project Close Out and Handover to Business As Usual (5 days) <p>Call-Off Schedule 9 (Security): The Part B: Long Form Security Requirements will apply to this Contract.</p>

PERFORMANCE OF THE DELIVERABLES

Key Staff
Contractor (Data & Reporting Lead): REDACTION REDACTION Email - REDACTION Tel - REDACTION
Key Subcontractors
None

Order Form Template (Short Form)
Crown Copyright 2019

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:	REDACTION	Signature:	REDACTION
Name:	REDACTION	Name:	REDACTION
Role:	REDACTION	Role:	REDACTION
Date:	26.01.2021	Date:	28/01/21