

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.

Contracting Authority Name	NHS Midlands & Lancashire Commissioning Support Unit
Contracting Authority Contact	██████████
Contracting Authority Address	████████████████████
Invoice Address (if different)	NHS Midlands & Lancashire CSU OCX PAYABLES M385 Phoenix House Topcliffe Lane Wakefield West Yorkshire WF3 1WE

Supplier Name	Woodrow Mercer Healthcare Limited
Supplier Contact	██████████
Supplier Address	7 th Floor Edmund House 12-22 Newhall Street Birmingham B3 3EF

Framework Ref	RM6160: Non Clinical Temporary and Fixed Term Staff
Framework Lot	Lot 3
Order reference number (e.g. purchase order number)	Will be sent on completion of the process
Date order placed	To be advised
Call off Start Date	03 October 2022
Call-Off Expiry Date	Three months with a possibility to extend if required
Extension Options	To be exercised if needed
GDPR Position	Independent Controller

Order Form Template (Short Form)

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Job role / Title	CHC/IPA Nurse Assessor
Temporary or Fixed Term Assignment	Temporary
Hours / Days required	Maximum 37.50 / five days per week: Monday to Friday
Unsocial hours required 	
  	 
 	

Pay band (use rate card to determine this)	
Fee Type	1. 
Expenses to be paid or benefits offered	N/A
Expenses to be paid by Temporary Worker	N/A
Charge rates	
Method of payment	
Discounts applicable	N/A

Criminal records check required	Yes
BPSS required	Yes / No
State any other required clearance and/or background checking	N/A
State any skills, mandatory training and qualifications necessary for the role	

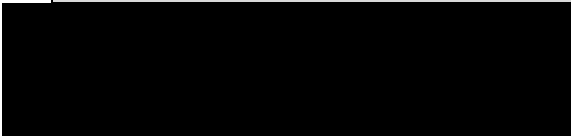
CALL-OFF INCORPORATED TERMS

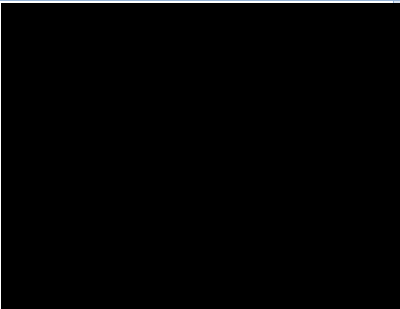
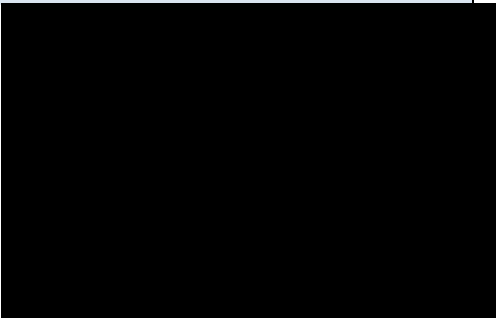
The Call-Off Contract, Core Terms and Joint Schedules' for this Framework Contract are available on the CCS website. Visit the [Non Clinical Temporary and Fixed Term Staff](#) web page and click the 'Documents' tab to view and download these.

CALL-OFF DELIVERABLES

The requirement
MLCSU require the services of a suitably experienced and qualified Band 6 CHC/IPA Nurse Assessor for a three-month assignment, this may be extended.
Confirmation is required from the agency on RM6160 that all the relevant clinical checks as per the Clinical Framework CSS have been completed before a candidate can be agreed. Copies of this confirmation will be retained for audit purposes.
Or you could simply state the requirements to be delivered by the Supplier to the Contracting Authority in accordance with the Framework Specification during the specified Call-Off Period
For further details about what can and cannot be included here please email - info@crownccommercial.gov.uk

PERFORMANCE OF THE DELIVERABLES

Key Staff

Key Subcontractors
N/A

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:		Date:	
	23 September 2022		23 September 2022