

# 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>	DHSC
<b>Contracting Authority Contact</b>	Redacted in line with Section 40 of The FOIA
<b>Contracting Authority Address</b>	Secretary of State for Health and Social Care acting as part of the Crown Department of Health and Social Care 39 Victoria Street London SW1H 0EU
<b>Invoice Address (if different)</b>	Department of Health and Social care 39 Victoria Street London SW1H 0EU

<b>Supplier Name</b>	Insight Executive group
<b>Supplier Contact</b>	Redacted in line with Section 40 of The FOIA
<b>Supplier Address</b>	Northern & Shell Building, 10 Lower Thames Street, London, EC3R 6AF

<b>Framework Ref</b>	RM6160: Non-Clinical Temporary and Fixed Term Staff
<b>Framework Lot</b>	Lot 1
<b>Call-Off (Order) Ref</b>	
<b>Order Date</b>	19/08/2021
<b>Call off Start Date</b>	17/08/2021

**Order Form Template (Short Form)**  
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<b>Call-Off Expiry Date</b>	29/10/2021
<b>Extension Options</b>	Potential for extension but cannot be confirmed until nearer the time
<b>GDPR Position</b>	Independent Controller (default unless specified); or Controller to Processor; or Joint Controller
<b>Number of roles required:</b>	1
<b>Number of CV's required:</b>	3
<b>Job role / Title</b>	HEO Project Support Officer
<b>Temporary or Fixed Term Assignment</b>	Temporary
<b>Hours / Days required</b>	5 days per week / 7.5 hours per day
<b>Unsocial hours required – give details</b>	None
<b>High cost area supplement details</b>	1. None 2. Inner London 3. Outer London 4. Fringe
<b>Immunisation requirements? (Fee type 1 only)</b>	N/A

<b>Pay band</b>	SEO
<b>Fee Type</b>	1. Patient Facing 2. Non-Patient Facing (Disclosure) 3. Non-Patient Facing (No Disclosure)
<b>Expenses to be paid or benefits offered</b>	None
<b>Expenses to be paid by Temporary Worker</b>	Travel to work
<b>Charge rates</b>	Redacted in line with Section 43 of The FOIA
<b>Method of payment</b>	
<b>Discounts applicable</b>	None

<b>Criminal records check</b>	Yes / No / Not Applicable – Disclosure Type & Number, Date Issued: DD/MM/YY  If the DBS update service has been used, date of last check: DD/MM/YY
<b>BPSS required</b>	Yes / No / Not Applicable
<b>State required clearance and background checking</b>	BPSS – all pre-employment checks to be completed by Insight Executive Group

<b>Skills, mandatory training and qualifications necessary for the role</b>	Project and Programme Delivery management and support
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## 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
Redacted in line with Section 40 of The FOIA
Redacted in line with Section 43 of The FOIA
For further details about what can and cannot be included here please email - Redacted in line with Section 40 of The FOIA

## PERFORMANCE OF THE DELIVERABLES

Key Staff
Redacted in line with Section 40 of The FOIA
Key Subcontractors
N/A

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:	Redacted in line with Section 40 of The FOIA	Signature:	Redacted in line with Section 40 of The FOIA
Name:		Name:	
Role:		Role:	
Date:	20 <sup>th</sup> August 2021	Date:	20 <sup>th</sup> August 2021