

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 Pheonix 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	Will be advised
Call off Start Date	TBA
Call-Off Expiry Date	Three months with a possibility to extend if required
Extension Options	To be exercised if needed

Order Form Template (Short Form)
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GDPR Position	Independent Controller
Job role / Title	
Temporary or Fixed Term Assignment	Temporary
Hours / Days required	
Unsocial hours required – give details	No
High cost area supplement details (NHS only)	1. None
Immunisation requirements? (Fee type 1 only)	None required

Pay band (use rate card to determine this)	6
Fee Type	1. Patient facing / remote working via video conference
Expenses to be paid or benefits offered	N/A
Expenses to be paid by Temporary Worker	N/A
Charge rates	
Method of payment	Payment within 30 days of invoice
Discounts applicable	N/A

Criminal records check required	Yes / No
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
<div style="background-color: black; height: 15px; width: 100%;"></div> <div style="background-color: black; height: 15px; width: 40%;"></div>
<p>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.</p> <p>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</p> <p>For further details about what can and cannot be included here please email - info@crownccommercial.gov.uk</p>

PERFORMANCE OF THE DELIVERABLES

Key Staff
<div style="background-color: black; height: 15px; width: 100%;"></div> <div style="background-color: black; height: 15px; width: 30%;"></div> <div style="background-color: black; height: 15px; width: 20%;"></div>
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:	
	25 October 2021		25 October 2021