

Collaborating for a Sustainable Workforce

National Framework for the Provision of Clinical and Healthcare Staffing

Annex 1: Order Form

FROM:

| CONTRACTING AUTHORITY | Department for Health and Social Care |
|--------------------------------|---------------------------------------|
| CONTRACTING AUTHORITY | 39 Victoria Street |
| ADDRESS | London |
| | SW1H 0EU |
| | England |
| INVOICE ADDRESS (if different) | REDACTED@nhs.net |
| | Payment and Invoicing |
| | 39 Victoria Street |
| | Westminster |
| | London |
| | SW1H 0EU |
| CONTRACTING AUTHORITY | REDACTED |
| AUTHORISER NAME | Deputy Chief Scientist |
| | REDACTED |
| | REDACTED@genomicsengland.co.uk |
| ORDER NUMBER | To be completed post Award |
| ORDER DATE | To be completed post Award |
| COMMENCEMENT DATE | Tuesday 4th May 2021 |
| ANTICIPATED END DATE | Sunday 31st October 2021 |

TO:

| SUPPLIER | Maxxima Limited |
|-----------------------------|-----------------------------------|
| SUPPLIER'S ADDRESS | Caledonia House |
| | 223 Pentonville Road |
| | London |
| | N1 9NG |
| ACCOUNT MANAGER | Name: REDACTED |
| | Tel: REDACTED |
| | E-mail: REDACTED@acaciumgroup.com |
| PART 1: SERVICE REQUIREMENT | |

PART 1.1: SERVICE AND DELIVERABLES REQUIRED:

Temporary Worker Requirements:

For the Avoidance of doubt, the total Contract Value shall not exceed £77,976.16 (excluding VAT) and will be charged in accordance with the table below:





| Role | Rate | Units required | Discount applied |
|---|--|-------------------------------|--|
| Charged days | | | , |
| T&T7912 PH and Clinical Advisor REDACTED Start from 04/05/2021 Complete by 31/10/2021 | Total rate: £987.04 Contractor rate: REDACTED Agency margin: REDACTED | 79 days | Margin reduced down from REDACTED hour to REDACTED /hour - REDACTED discount |
| | | | |
| | | | |
| Investment Days (not charged) | | <u> </u> | |
| Total excl. VAT | | £77,976.16 | |
| Total incl. VAT | | £93,571.33 | |
| LOT: (If Lots 1-5, please inc | dicate if Master | Lot 3 | |
| Vendor) | • | | |
| NUMBER OF ROLES REQUIRED: | | 1 (one) | |
| NUMBER OF CVS REQUIRED: | | 1 (one) | |
| JOB ROLE/TITLE: | | PH and Clinical Advisor | |
| PAY BAND/GRADE: | | N/A | |
| HOURS/DAYS REQUIRED: | | 79 days / 8 hours a day No | |
| ANY UNSOCIAL HOURS REQUIRED? (GIVE DETAIL) | | NO | |
| RELEVANT RISK | RELEVANT RISK | | |
| ASSESSMENT/SAFEGUARDING | | | |
| REQUIREMENTS | | NI/A | |
| IMMUNISATION REQUIREMENTS | | N/A | |
| HIGH COST AREA SUPPLEMENT? | | No High Cost Are | a |
| SKILLS, TRAINING AND | | | linical experience. |
| QUALIFICATIONS NECESSARY TO PERFORMANCE OF THE ROLE: | | | |





| PERSON AND DEPT TO WHOM WORK- | REDACTED |
|---------------------------------------|--|
| SEEKER SHOULD REPORT AT START: | |
| EXPENSES | Not Applicable |
| ADDITIONAL REQUIREMENTS: | Not Applicable |
| SHIFT START DATE: | Monday 4 th May 2021 |
| PART 1.2: PAYMENT PROFILE WILL BE 'ON | N COMPLETION OF WORKS' AS PER |
| PARAGRAPH 9.3 OF SCHEDULE 2 OF THE | SE CALL-OFF TERMS AND CONDITIONS. |
| DISCOUNTS APPLICABLE: | REDACTED /hour to REDACTED /hour - |
| | REDACTED discount agreed. |
| METHOD OF PAYMENT | REDACTED@nhs.net for electronic submission |
| | or Postal invoices to: Department of Health & Social Care Payment and Invoicing 39 Victoria Street Westminster London SW1H 0EU |

PART 1.3: ACCEPTANCE PRIOR TO PAYMENT

Completion of an assignment checklist by Service Provider

PART 2: CONTRACTING AUTHORITY CONTRACTUAL REQUIREMENTS & DELIVERABLES

The contractual requirements covered under this agreement will be for the following:

- To ensure appropriate clinical and PH advice, assurance and leadership to Pillar 2 of the NHS Test and Trace programme, so that NHS test and Trace is able to operate in a clinically coherent way with maximum effectiveness
- To ensure the provision of clinical and PH advice in the establishment and overall assurance of clinical governance arrangements for Pillar 2 and the mass testing programme, in order that appropriate arrangements are in place for the overall clinical governance of NHS Test and Trace
- To provide ongoing clinical and PH professional advice on asymptomatic testing policy, strategy and implementation, so that testing activity is appropriately used to find cases of COVID19 as part of the overall test and trace programme, ensure relevant surveillance is in place to monitor progress, and to mitigate the risks of COVID19 in populations known to be at higher risk
- To provide clinical and PH advice in the development of guidance for professionals and the public on the interpretation and practical implications of COVID-19 test results, in order that test results are correctly interpreted and relevant actions are taken in line with current government advice





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- To ensure all relevant clinical and PH advice is used in the identification, investigation
 and overall management of clinical incidents relating to the test and trace programme,
 so that incidents are properly managed, risks are mitigated, and lesson are learned
- To contribute to the overall health and wellbeing of the PHCO department by an awareness and understanding of equal opportunities, respect for colleagues' views and opinions, and the promotion of practical policies and behaviours which contribute to the social, psychological and physical wellbeing of all members of PHCO

PART 3: FURTHER-COMPETITION ORDER - ADDITIONAL REQUIREMENTS (IF APPLICABLE)

Not Applicable

| PART 3.1: SUPPLEMENTARY |
|--|
| REQUIREMENTS IN ADDITION TO CALL- |
| OFF TERMS AND CONDITIONS: |

Not Applicable

PART 3.2: VARIATIONS TO CALL-OFF TERMS AND CONDITIONS:

The Parties agree that the following changes to the Call Off Terms and Conditions shall apply to the provision of Services by the Service Provider under this Order Form, and shall replace those clauses in the Call Off Terms and Conditions as applicable; Clause 16.3 shall be amended as follows:-

16.3.1 Either party has the right to terminate this Contract at any time without reason or liability by giving other party at least thirty (30) days' notice and if the Contract is so terminated by the Contracting Authority, clause 17 of this Schedule 2 applies.

16.3.2 Termination in Relation to Framework Agreement

Either party may terminate this Call Off Contract by providing written notice to the other party if the Framework Agreement is terminated for any reason whatsoever.

16.3.3 Termination in Relation to Variation

Either party may terminate this Call Off Contract by providing written notice to the other party for failure of the Parties to agree





| | or implement a Variation in accordance with |
|------------------------------------|--|
| | |
| | the Variation Procedure. |
| | |
| | |
| PART 4: PERFORMANCE OF THE SERVICE | S AND DELIVERABLES |
| PART 4.1: KEY PERSONNEL OF THE | REDACTED |
| SERVICE PROVIDER TO BE INVOLVED IN | |
| THE SERVICES AND DELIVERABLES: | |
| PART 4.2: SUB-CONTRACTORS TO BE | Not Applicable |
| INVOLVED IN THE SERVICES AND | |
| DELIVERABLES: | |
| PART 5: CONFIDENTIAL INFORMATION | |
| PART 5.1: THE FOLLOWING | The proposal submission (if any) and pricing |
| INFORMATION SHALL BE DEEMED | shall be classed as commercially sensitive |
| COMMERCIALLY SENSITIVE | information, in addition to names, email |
| INFORMATION OR CONFIDENTIAL | addresses and contact details otherwise not |
| INFORMATION: | available in the public domain. |

BY SIGNING AND RETURNING THIS ORDER FORM THE SUPPLIER AGREES to enter a legally binding contract with the Contracting Authority to provide to the Contracting Authority the Services specified in the Service Order Requirements set out in this Order Form [(together with where completed and applicable, the further-competition order (additional requirements)] incorporating the rights and obligations in the Call-Off Terms and Conditions set out in the Framework Agreement between the Supplier and the Authority.

FOR AND ON BEHALF OF THE SUPPLIER:

| NAME: | |
|------------|--|
| TITLE: | |
| SIGNATURE: | |
| DATE: | |

FOR AND ON BEHALF OF THE CONTRACTING AUTHORITY:

| NAME: | |
|------------|--|
| TITLE: | |
| SIGNATURE: | |
| DATE: | |





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