Framework Schedule 6a (Short Order Form Template and Call-Off Schedules)

Order Form

CALL-OFF REFERENCE: GSS25289

THE BUYER: UK Research and Innovation

BUYER ADDRESS Polaris House, North Star Avenue, Swindon, SN2

1FL

THE SUPPLIER: Involved Solutions Limited

SUPPLIER ADDRESS: 1 The Green, Richmond, TW9 1PL

REGISTRATION NUMBER: 07719659

DUNS NUMBER:

SID4GOV ID: N/A

This Order Form, when completed and executed by both Parties, forms a Call-Off Contract. A Call-Off Contract can be completed and executed using an equivalent document or electronic purchase order system.

If an electronic purchasing system is used instead of signing as a hard-copy, text below must be copied into the electronic order form starting from 'APPLICABLE FRAMEWORK CONTRACT' and up to, but not including, the Signature block.

APPLICABLE FRAMEWORK CONTRACT

This Order Form is for the provision of the Call-Off Deliverables and dated 11th April 2025.

It's issued under the Framework Contract with the reference number RM6277 for the provision of Non Clinical Staff.

CALL-OFF LOT(S):

Lot 2 - Corporate Functions

Framework Ref: RM6277 Project Version: v1.0 Model Version: v3.8

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CALL-OFF INCORPORATED TERMS

This is a Bronze Contract.

The following documents are incorporated into this Call-Off Contract. Where numbers are missing we are not using those schedules. If the documents conflict, the following order of precedence applies:

- This Order Form.
- Joint Schedule 1 (Definitions and Interpretation) RM6277
- 3. The following Schedules in equal order of precedence:
 - Joint Schedules for RM6277
 - Joint Schedule 2 (Variation Form)
 - Joint Schedule 3 (Insurance Requirements)
 - Joint Schedule 4 (Commercially Sensitive Information)
 - Joint Schedule 7 (Financial Difficulties including Annex 5 Optional Terms for Bronze Contracts)
 - Joint Schedule 10 (Rectification Plan)
 - Joint Schedule 11 (Processing Data)
 - Call-Off Schedules for RM6277
 - Call-Off Schedule 1 (Transparency Reports)
 - o Call-Off Schedule 2 (Staff Transfer)
 - Call-Off Schedule 3 (Continuous Improvement)
- CCS Core Terms (version 3.0.11)
- Joint Schedule 5 (Corporate Social Responsibility) RM6277

No other Supplier terms are part of the Call-Off Contract. That includes any terms written on the back of, added to this Order Form, or presented at the time of delivery.

CALL-OFF START DATE: 14th April 2025

CALL-OFF EXPIRY DATE: 31st October 2025

CALL-OFF DELIVERABLES

The provision of Non Clinical Temporary staff or any other temporary staff or fixed term workers.

Job Role/Title	Mulesoft Developer -	
Assignment Type	Temporary	

Framework Ref: RM6277 Project Version: v1.0

Model Version: v1.0

Hours/Days required	Full Time –			
Detail on unsocial hours required	N/A			
High cost area supplements that may	None			
apply				
Immunisations required	N/A			
Fee Type	Fee Type 3: Non-Patient Facing (No			
	Disclosure)			
Equivalent Agenda for Change (NHS)	10A			
Pay band (as determined by the rate				
card)				
Expenses to be paid or benefits offered	Expenses shall be paid in alignment			
	with the UKRI Travel Policy			
Expenses to be paid by Temporary	No			
Worker	***			
Disclosure and Barring Service check	N/A			
requirements	V			
BPSS required	Yes N/A			
State any other required clearance and/or background checking	N/A			
State any skills, mandatory training and	Demonstrable experience of			
qualifications necessary for the role	building integration solutions			
(those defined by the Framework	using Mulesoft in a hybrid cloud			
Specification apply be default)	environment			
Specification apply to delidary	(AWS/Azure/Oracle/Salesforce)			
	Practical knowledge of industry			
	standard integration patterns			
	Experience configuring and			
	maintaining the Mulesoft platform			
	including capacity planning			
	Appropriate Mulesoft technical			
	certifications			
	 Ability to communicate effectively 			
	with both technical and non-			
	technical colleagues			
	 A self-starter with a track record 			
	of delivery and good teamwork			
	 Methodical approach to creating 			
	professional, maintainable			
	solutions			
	 Experience working in agile 			
	delivery teams			
Supplier to provide ID badges?	For the avoidance of doubt the Photo ID Badge in compliance with Framework			
	Schedule 1 (Specification) Clause 7.26			
	Constitute 1 (Opecinication) Clause 1.20			

	shall be provided by the Contracting	
	Authority.	
[Temporary Worker Compliance	Temporary Workers in Central	
Requirements (NON-NHS	Government will be checked to Baseline	
CUSTOMERS ONLY)]	Personnel Security Standard plus any	
	additional checks detailed below.	
	N/A	

GDPR POSITION

Independent Controller

The Parties acknowledge that for the purposes of the Data Protection Legislation, under these Call Off Terms the Parties are independent Data Controllers of Personal Data. For the avoidance of doubt, Joint Schedule 11 Clauses 3 – 17 shall not apply.

MAXIMUM LIABILITY

Each Party's total aggregate liability in each Contract Year under each Call-Off Contract (whether in tort, contract or otherwise) is no more than the greater of £1 million or 150% of the Estimated Yearly Charges.

CALL-OFF CHARGES

Pay to Worker				
Total Charge				
The total contract value shall not exceed				
£82,336.80 excluding VAT as per the				
breakdown below:				
It is the viewpoint of the Contracting				
Authority that the job role above is in scope				
of the intermediary's legislation (IR35).				
of the intermediary site	gisiation (irvoo).			
All workers are subject	to 20 working days'			
All workers are subject to 20 working days'				
notice period.				

AWR Compliant

Discounts under Framework Schedule 1 Clause 13.24 and 13.25 will only be discounted to standard Framework Agreement Charges

PAYMENT METHOD

The supplier shall issue electronic invoices weekly in arrears following customer approval of the workers timesheet. The customer shall pay the supplier within thirty (30) calendar days upon receipt and acceptance of a valid invoice.

Invoice to include purchase order number and contract reference shall be sent to

BUYER'S INVOICE ADDRESS:		
BUYER'S AUTHORISED REPRESENTATIVE		
SUPPLIER'S AUTHORISED REPRESENTATIVE		
SUPPLIER'S CONTRACT MANAGER		

OFFICIAL

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For and on b	ehalf of the Supplier:	For and on b	ehalf of the Buyer:
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:		Date:	