

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





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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	Department of Health and Social Care		
Contracting Authority Contact	Redacted inline with FOIA		
Contracting Authority Address	Quarry House Quarry Hill Leeds West Yorkshire LS2 7UE		
Invoice Address (if different)	Redacted inline with FOIA		

Supplier Name	Michael Page
Supplier Contact	Redacted inline with
Supplier Address	Name: 1 Whitehall Riverside, Leeds, LS1 4BN Redacted inline with FOIA

Framework Ref	RM6160: Non Clinical Temporary and Fixed Term Staff		
Framework Lot	2		
Order reference number (e.g. purchase order number)			
Date order placed	Redacte		
Call off Start Date	1 st October 2022		
Call-Off Expiry Date	31st December 2022		
Extension Options	Redacted inline with FOIA		
GDPR Position	Independent Controller (default unless specified); or Controller to Processor; or Joint Controller		
Job role / Title	Finance Operations lead		
Temporary or Fixed Term Assignment	Temporary		
Hours / Days required	TBC		
Unsocial hours re-	Redacted inline with FOIA		
quired – give details			
High cost area supple-	1. None		
ment details	2. Inner London		
(NHS only)	3. Outer London		
	4. Fringe		

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Immunisation requirements?	N/A
(Fee type 1 only)	

Pay band (use rate card to determine this)	G7		
Fee Type	1. Patient Facing		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Non-Patient Facing (Disclosure required)		
	3. Non-Patient Facing (No Disclosure required)		
Expenses to be paid or benefits offered	N/A		
Expenses to be paid by Temporary Worker	Redacted inline		
Charge rates*	Redacted inline with		
	TFOIA		
	Redacted inline with FOIA		
	Redacted Redacted		
Method of payment	PAYE with inline with		
Discounts applicable			
Redacted inline with FOIA			

Yes / No Criminal records check required Yes / No **BPSS** required State any other re-BPSS: Eligible to work checks required quired clearance and/or background checking Basic DBS check 3 years worth of references Qualification Check State any skills, manda-**Qualified Accountant** tory training and qualifications necessary for the role

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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



PERFORMANCE OF THE DELIVERABLES

Key Staff	Redacted inline with
Key Subco	ntractors

	ehalf of the Supplier:	For and on bel	half of the Contracting Authority:
Signature:	Redacted inline with FOIA	Signature:	Redacted inline with FOIA
Name:		Name:	
Role:		Role:	
Date:	27.9.22	Date:	30/09/22