

RM6160: Non Clinical Temporary and Fixed Term Staff (Short Form)

Order Form Template (Short Form)

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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	Health and Safety Executive
Contracting Authority Contact	
Contracting Authority Address	Redgrave Court Merton Road Bootle L20 7HS
Invoice Address (if different)	

Supplier Name	Venn Group Recruitment
Supplier Contact	Thomas Rees
Supplier Address	Cottons Centre Hays Lane London SE1 2QP

Framework Ref	RM6160: Non Clinical Temporary and Fixed Term Staff
Framework Lot	2 - Corporate
Order reference number	1.11.4.3957
Date order placed	22 June 2021
Call off Start Date	28 June 2021
Call-Off Expiry Date	31 March 2022
Extension Options	
GDPR Position	Independent Controller (default unless specified)
Job role / Title	Project Manager – Operating Model
Temporary or Fixed Term Assignment	Temporary
Hours / Days required	37 Hours Per Week – 195 Working Days
Unsocial hours required – give details	
High cost area supplement details (NHS only)	1. None 2. Inner London 3. Outer London 4. Fringe
Immunisation requirements? (Fee type 1 only)	

Pay band (use rate card to determine this)	10A	
Fee Type	1. Patient Facing 2. 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	N/A	
Charge rates	Pre-AWR	Post-AWR (post 12 weeks)
	£714.50 (/Day)	£711.27 (/Day)
Method of payment	BACS	
Discounts applicable		

Criminal records check required	Yes
BPSS required	Yes
State any other required clearance and/or background checking	
State any skills, mandatory training and qualifications necessary for the role	 BSR Project Manager Job Descrip

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
 IR35.pdf

PERFORMANCE OF THE DELIVERABLES

Key Staff
Key Subcontractors
[Insert name of key sub-contractors if required]

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:		Date:	