

# **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.

<b>Contracting Authority Name</b>	Secretary of State for Health and Social Care acting as part of the Crown (Department of Health and Social Care)
<b>Contracting Authority Contact</b>	[REDACTED] [REDACTED]
<b>Contracting Authority Address</b>	Quarry House Quarry Hill Leeds West Yorkshire LS2 7UE
<b>Invoice Address (if different)</b>	[REDACTED]

<b>Supplier Name</b>	Michael Page
<b>Supplier Contact</b>	[REDACTED]
<b>Supplier Address</b>	Name: 1 Whitehall Riverside, Leeds, LS1 4BN [REDACTED] [REDACTED]

<b>Framework Ref</b>	RM6160: Non Clinical Temporary and Fixed Term Staff
<b>Framework Lot</b>	2
<b>Order reference number (e.g. purchase order number)</b>	
<b>Date order placed</b>	[REDACTED]
<b>Call off Start Date</b>	1 <sup>st</sup> January 2023
<b>Call-Off Expiry Date</b>	30 <sup>th</sup> June 2023
<b>Extension Options</b>	[REDACTED]
<b>GDPR Position</b>	Independent Controller (default unless specified); or Controller to Processor; or Joint Controller
<b>Job role / Title</b>	Deputy Head - Finance Operations

Temporary or Fixed Term Assignment	Temporary
Hours / Days required	TBC
Unsocial hours re-quired – give details	To meet deadlines this may be required
High cost area supple-ment details (NHS only)	1. None 2. Inner London 3. Outer London 4. Fringe
Immunisation requirements? (Fee type 1 only)	N/A

Pay band (use rate card to determine this)	G6
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	Travel to work
Charge rates	Pre-AWR Post-AWR
Method of payment	
Discounts applicable	

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

## CALL-OFF INCORPORATED TERMS

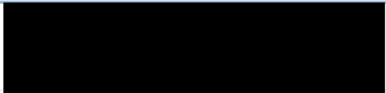

The Call-Off Contract, Core Terms and Joint Schedules' for this Framework Contract are available on the CCS website. Visit the **Non Clinical Temporary and Fixed Term Staff** web page and click the 'Documents' tab to view and download these.

## CALL-OFF DELIVERABLES

The requirement
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

## PERFORMANCE OF THE DELIVERABLES

Key Staff	
Key Subcontractors	

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature:		Signature:	
Name:		Name:	
Role:		Role:	
Date:	19.12.22	Date:	30.12.22