

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

**Order Form Template (Short Form)**  
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**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 & Social Care acting as part of the Crown (Department of Health and Social Care)
<b>Contracting Authority Contact</b>	Redacted inline with FOIA
<b>Contracting Authority Address</b>	39 Victoria Street, SW1H 0EU Redacted inline with FOIA
<b>Invoice Address (if different)</b>	Redacted inline with FOIA

<b>Supplier Name</b>	NHS Professionals
<b>Supplier Contact</b>	Redacted inline with FOIA
<b>Supplier Address</b>	NHS Professionals Ltd, Suites 1A & 1B, Breakspear Park, Breakspear Way, Hemel Hempstead, HP2 4TZ

<b>Framework Ref</b>	RM6160: Non Clinical Temporary and Fixed Term Staff
<b>Framework Lot</b>	2- Corporate Functions
<b>Call-Off (Order) Ref</b>	
<b>Order Date</b>	Redacted inline with FOIA
<b>Call off Start Date</b>	01/01/2022
<b>Call-Off Expiry Date</b>	31/03/2022
<b>Extension Options</b>	Extension as required
<b>GDPR Position</b>	Joint Controller

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<b>Number of roles required:</b>	1
<b>Number of CV's required:</b>	N/A
<b>Job role / Title</b>	Programme Manager
<b>Temporary or Fixed Term Assignment</b>	Temporary
<b>Hours / Days required</b>	37.5 per week
<b>Unsocial hours required – give details</b>	Redacted
<b>High cost area supplement details</b>	1. None 2. Inner London 3. Outer London 4. Fringe
<b>Immunisation requirements? (Fee type 1 only)</b>	

<b>Pay band</b>			
<b>Fee Type</b>	Redacted		
<b>Expenses to be paid or benefits offered</b>	Redacted inline with FOIA		
<b>Expenses to be paid by Temporary Worker</b>	Redacted inline with FOIA		
<b>Charge rates</b>	<table border="1"> <tr> <td>Redacted inline with FOIA</td><td>Redacted inline with FOIA</td></tr> </table>	Redacted inline with FOIA	Redacted inline with FOIA
Redacted inline with FOIA	Redacted inline with FOIA		
<b>Method of payment</b>	Redacted		
<b>Discounts applicable</b>	N/A		

<b>Criminal records check</b>	Not Applicable – completed for original hire
<b>BPSS required</b>	Not Applicable - completed for original hire
<b>State required clearance and background checking</b>	DBS / BPSS completed for original hire
<b>Skills, mandatory training and qualifications necessary for the role</b>	

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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**

The requirement

**PERFORMANCE OF THE DELIVERABLES**

Key Staff
Redacted inline with FOIA
Key Subcontractors
N/A

For and on behalf of the Supplier:		For and on behalf of the Contracting Authority:	
Signature	Redacted inline with FOIA	Signature:	Redacted inline with FOIA
Name:		Name:	
Role:		Role:	
Date:		Date:	