<table>
<thead>
<tr>
<th>Client Name &amp; Address</th>
<th>Worker Name (in full)</th>
<th>Worker Signature:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Time Sheet

#### Agency Copy

<table>
<thead>
<tr>
<th>Date</th>
<th>Start Time e.g. 08:00</th>
<th>Finish Time e.g. 17:00</th>
<th>Break Time Start</th>
<th>Break Time End</th>
<th>Total Hrs Worked</th>
<th>Ward or Patient Name</th>
<th>Job Profile Title &amp; Band</th>
<th>Expenses</th>
<th>Client Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### To Be Completed by Client

I certify that, having received the terms and conditions of Nurseplus, the hours shown above have been worked by the named operative and should be invoiced accordingly.

Signed:............................................................................................

Position:.................................................................................. Date:..........................

Total Hrs (in Words):........................................................................

#### For Office Use Only

<table>
<thead>
<tr>
<th>Client Code:</th>
<th>Title</th>
<th>Hrs</th>
<th>Pay</th>
<th>Chg</th>
<th>Exps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Worker ID:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

W/E (Sunday):

Auth By:

Date:..........................

ANY ALTERATIONS MUST BE COUNTERSIGNED BY THE CLIENT
<table>
<thead>
<tr>
<th>Client Name &amp; Address</th>
<th>Worker Name (in full)</th>
<th>Worker Signature:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Start Time</th>
<th>Finish Time</th>
<th>Break Time Start</th>
<th>Break Time End</th>
<th>Total Hrs Worked</th>
<th>Ward or patient name</th>
<th>Job Profile Title &amp; Band</th>
<th>Expenses</th>
<th>Client Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>e.g. 08:00</td>
<td>e.g. 17:00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TO BE COMPLETED BY CLIENT**

I certify that, having received the terms and conditions of Nurseplus, the hours shown above have been worked by the named operative and should be invoiced accordingly.

Signed: ........................................................................................................................

Position: ........................................................................... Date: .......................................

Total Hrs (in Words): ..................................................................................................

**FOR OFFICE USE ONLY**


ANY ALTERATIONS MUST BE COUNTERSIGNED BY THE CLIENT
TERMS AND CONDITIONS OF EMPLOYMENT BUSINESS FOR THE SUPPLY OF TEMPORARY WORKERS

1. In these terms and conditions the following expressions shall have the following meanings:

   “Temporary Worker” Any health or social care worker introduced and/or supplied by Nurseplus to render services to the Client.
   “The Client” The person, firm or corporate body together with any subsidiary or associated person, firm or corporate body (as the case may be) to whom the Temporary Worker is introduced and/or supplied.

2. These terms and conditions are effective from 20th June 2011 and supersede all previous terms and conditions. All Temporary Workers are introduced and/or supplied by Nurseplus to the Client upon these terms and conditions.

3. No variations of these terms is valid or shall be binding by Nurseplus unless confirmed in writing with the authority of a director.

4. Nurseplus’s invoices are payable within 14 days of the date of the invoice.

5. Nurseplus reserves the right to charge Interest on all invoices raised from the due date of payment until the date payment is actually received by Nurseplus.

6. Nurseplus may, without prejudice to it’s other rights, suspend the services of a Temporary Worker to a Client.

7. Whilst every effort is made by Nurseplus to give satisfaction to the Client by ensuring reasonable standards of skills, integrity and reliability from Temporary Workers and further provide them in accordance with the Client’s booking details, Nurseplus is not liable for any loss, expense, damage, or delays arising from any failure to provide any Temporary Worker for all or part of the period of booking or from the negligence, dishonesty, misconduct or lack of skill of the Temporary Worker. For the avoidance of doubt, Nurseplus does not exclude liability for death or personal injury arising from its own negligence.

8. By asking Nurseplus to introduce and/or supply a Temporary Worker the Client is deemed to have accepted these terms of business. For the purpose of this clause the word “introduce” shall be deemed to include without limitation the provision by Nurseplus directly or indirectly of any details (whether provided in writing or verbally) of a Temporary Worker to a Client.

9. The charge made by Nurseplus for the Worker’s services will be in accordance with the scale of charges advised to the Client at the time of booking. The charge includes the Temporary Workers pay plus WTD plus Employers National Insurance contribution plus Commission. Expenses will be charged and invoiced as agreed with the Client along with any additional statutory payments that may become applicable. No refunds are payable by Nurseplus in respect of the charges.

10. VAT is payable, where applicable, at the prevailing rate.

11.1 The Client undertakes to supervise the Temporary Worker to ensure the Client’s satisfaction with the Temporary Worker’s standards of workmanship. If the Client reasonably considers that the services of the Temporary Worker are unsatisfactory, the Client may terminate the Assignment by instructing the Temporary Worker to leave the Assignment immediately and notifying Nurseplus immediately or by directing Nurseplus to remove the Temporary Worker. Nurseplus may, in such circumstances reduce or cancel the charges for the time worked by that Temporary Worker, provided that the Assignment terminates before the end of the first day of the Assignment or within two hours of the start of the Assignment if the Temporary Worker is to be used for less than 12 hours in any one week.

11.2 A Client may terminate an Assignment only upon giving 24 hours notice in writing to Nurseplus failing which it shall be entitled to terminate an Assignment but it may do so only upon payment of a sum equal to eight times the hourly rate for the Temporary Worker.

12. The Client is responsible for ensuring that the Temporary Worker’s ability, qualifications and skills are adequate to operate any equipment, machinery and/or vehicles that the Temporary Worker may be called upon to operate and the Client will be solely responsible for any liability whatsoever which may arise from the Temporary Worker’s performance of his/her duties.

13. Temporary Workers introduced and/or supplied by Nurseplus are engaged under contracts for services. They are not the employees of Nurseplus but are deemed to be under the Client’s supervision, direction and control of the Client from the time they report to take up duties and for the duration of the Assignment. The Client agrees to be responsible for all acts, errors or omissions of the Temporary Worker, whether wilful, negligent or otherwise as though the Temporary Worker was on the payroll of the Client. The Client will also comply in all respects with all statutes including, for the avoidance of doubt, the regulations and health and safety legislation including, in particular, the provision of Employer’s and Public Liability Insurance cover for the Temporary Worker during all Assignments.

14. The Client shall indemnify and keep indemnified Nurseplus against any costs, claims or liabilities incurred by Nurseplus arising out of any non compliance by the Client of clause 13 and/or as a result of any breach of these terms and conditions by the Client.

15. The Client shall notify Nurseplus immediately upon engaging or otherwise making use of a Temporary Worker.

16. If within 8 weeks of the end of a Temporary Worker’s Assignment or 14 weeks after the start of the temporary Worker’s first Assignment (whichever is the later) the Client agrees to employ or make use of the Temporary Worker in any capacity whether temporary, permanent or self-employed otherwise than directly through Nurseplus or the Client refers the Temporary Worker to an associated or subsidiary company of the Client or to any third party who so employs or makes use of the Temporary Worker the Client will be liable to pay Nurseplus an introduction fee of 200x the Worker’s hourly charge rate. Nurseplus will be entitled to invoice the Client for such fee which invoice shall be payable in accordance with Nurseplus’s terms of payment contained in these terms and conditions. Alternatively the Client may elect by notice of 4 weeks to extend a Temporary Worker’s Assignment by 6 weeks on no less favourable terms after which time the Temporary Worker may be employed directly without further charge.

17.1 The Client will sign the timesheet and such signature or other formal confirmation of completion of Assignment shall be deemed conclusive evidence:

   (a) that the Client is satisfied with the work done by the Temporary Worker concerned
   (b) that the Client will pay the charges for the hours on the timesheet in full without dispute or deduction.

17.2 Failure by the Client to sign any timesheet shall not preclude charging by Nurseplus in full or in part or the Client or to any third party who so employs or makes use of the Temporary Worker in any capacity whether temporary, permanent or self-employed otherwise than directly through Nurseplus.

18. Because of the nature of Nurseplus’s business the Client acknowledges and agrees that it makes no warranty for Nurseplus to give any warranty as to the suitability of a Temporary Worker and shortcomings in the performance of his/her duties by the Temporary Worker shall not entitle the Client to withhold or delay (in part or in full) payment of Nurseplus’s invoices (save and except where the Client has given notice in accordance with Clause 11 of these terms and conditions).

19. In any event, the liability of Nurseplus in contract and/or tort in respect of the introduction and/or supply of a Temporary Worker to the Client shall be limited to the profit element of Nurseplus’s charges to the Client in respect of the Temporary Worker.

Service Users in their own home will be exempt from clauses 12, 13 and 14 of these Terms and Conditions.
## TIME SHEET  EMPLOYEE COPY

**Andover:** 01264 335007  
**Canterbury:** 01227 782070  
**Eastbourne:** 01323 430267  
**Northampton:** 01604 439205  
**Salisbury:** 01722 331139  
**Ashford:** 01233 633350  
**Cheltenham:** 01242 260734  
**Exeter:** 01392 423445  
**Norwich:** 01603 487881  
**Shrewsbury:** 01743 442787  
**Aylesbury:** 01296 381877  
**Chester:** 01244 343248  
**Folkestone:** 01303 250200  
**Nottingham:** 0115 845 6504  
**Southampton:** 02380 638232  
**Basingstoke:** 01256 332070  
**Chichester:** 01243 787477  
**Gosport:** 01329 848150  
**Oldham:** 0161 204 3934  
**St. Helens:** 01925 225033  
**Bedford:** 01234 889738  
**Colchester:** 01206 845069  
**Hastings:** 01424 716200  
**Orpington:** 01689 857850  
**Swindon:** 01793 496744  
**Bolton:** 01204 869769  
**Coventry:** 01267 243611  
**Hull:** 01482 338188  
**Peterborough:** 01733 852030  
**Taunton:** 01823 325013  
**Boston:** 01205 875456  
**Crawley:** 01293 873692  
**Leeds:** 0113 426 5588  
**Plymouth:** 01752 266802  
**Truro:** 01872 276444  
**Bournemouth:** 01202 294402  
**Derby:** 01332 296855  
**Leicester:** 0116 296 2385  
**Preston:** 01772 628482  
**Wakefield:** 01924 900590  
**Bury St Edmunds:** 01284 705528  
**Dorchester:** 01305 757555  
**Newcastle-U-Lyme:** 01782 634631  
**Reading:** 0118 9512184  
**Worcester:** 01905 20684  
**Cambridge:** 01223 423315  
**Dover:** 01304 273300  
**Newton Abbot:** 01626 337352  
**Sale:** 0161 302 9992  

### Client Name & Address

<table>
<thead>
<tr>
<th>Date</th>
<th>Start Time e.g. 08:00</th>
<th>Finish Time e.g. 17:00</th>
<th>Break Time Start</th>
<th>Break Time End</th>
<th>Total Hrs Worked</th>
<th>Ward or patient name</th>
<th>Job Profile Title &amp; Band</th>
<th>Expenses</th>
<th>Client Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**I certify that, having received the terms and conditions of Nurseplus, the hours shown above have been worked by the named operative and should be invoiced accordingly.**

**Signed:** .................................................................

**Position:** .................................................................  **Date:** ...........................................

**Total Hrs (in Words):** .................................................................

---

### FOR OFFICE USE ONLY

**Client Code:**

<table>
<thead>
<tr>
<th>Title</th>
<th>Hrs</th>
<th>Pay</th>
<th>Chg</th>
<th>Exps</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Worker ID:**

<table>
<thead>
<tr>
<th>W/E (Sunday):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Auth By:**

<table>
<thead>
<tr>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

---

**ANY ALTERATIONS MUST BE COUNTERSIGNED BY THE CLIENT**