

**Terms and Conditions**

Registering with Expert Locums shall be deemed as acceptance of these terms and conditions

Definitions

**Locum** means locum pharmacists or dispenser registered with Expert Locums

**Client** means the individual, company or organisation from which the locum accepts a placement

**Booking** is the position allocated to the locum by the client

Terms and Conditions

1. I understand that I am under no obligation whatsoever to accept any locum engagement offered to me through Expert Locums, but once I have given my verbal acceptance of a locum engagement offered, this is a binding contract unless agreement to terminate or cancel is given by the client. I also understand that any breach of the agreement by the Employer engaging me is not the responsibility of Expert Locums, on whom I have no claim. Any claim for loss of earnings is to be made by me directly with the Employer.
2. I understand that Expert Locums is not responsible for the payment of my fee, which is payable directly to me by the Client. The rate at which I will charge the client will be the rate at the time of the booking.
3. When a client cancels a booking that has been previously been confirmed with Expert Locums the loss of earnings or any other losses incurred as a result of the cancellation will not be the liability of Expert Locums.
4. All information given to me by Expert Locums regarding vacancies is strictly confidential and is not to be passed on to any other locum. Similarly, all information regarding any establishment at which I have been engaged is also private and confidential.
5. I understand that locum bookings are secured by Expert Locums in good faith. If any loss is incurred be it financial or otherwise due to an act of omission of the client then Expert Locums are in no way liable. I understand that Expert Locums accepts no liability for inaccuracy or omission in information it has provided in good faith.
6. Following a booking, in the case of non-appearance of Locum the client may seek compensation. The responsibility for paying the compensation rests with me and not Expert Locums.
7. When completing a booking with a client I agree to abide by all company security rules and health and safety legislation.
8. Whilst on a booking I agree to abide by the rules set down in the Royal Pharmaceutical Society’s code of ethics and relevant legislation. I will also dress in a manner which befits the professional status.
9. As a self-employed Pharmacist I am responsible for my own tax and National Insurance contributions and am not an employee of Expert Locums
10. It is my responsibility to ensure that I have professional indemnity insurance whilst working at a booking made through Expert Locums.
11. If I engage in work as a locum or permanent staff by a client with whom I have been placed by Expert Locums during the previous six months then I must inform Expert Locums otherwise Expert Locums will be entitled to recover lost booking fees from me directly.



**Locum Declaration**

I confirm that

1. I am a qualified pharmacist, duly authorised by [The General Pharmaceutical Council] {Pharmaceutical Society of Northern Ireland} (“the Society”) to practice as a pharmacist, has not been suspended or removed from the register maintained by the Society (of pharmacists authorised to practice) and is not subject to any disciplinary or investigatory proceedings by the Society.
2. I have no criminal convictions other than those relating to minor traffic offences; in accordance with the declarations made as part of the registration for fitness to practice.
3. I have the experience and/or qualifications and accreditations to provide essential services as defined according to schedule 1 of the NHS (Pharmaceutical Services) regulation 2005 terms of service plus other such accreditations as will be notified at the time of booking.
4. Am entitled to work in the UK as a pharmacist in compliance with all relevant laws and regulations and in particular the Asylum & Immigration act
5. Have adequate and current professional indemnity insurance.
6. I acknowledge that the information provided at registration may form the basis of a computerised personnel system to which I have access as determined by the Data Protection Act 1984.
7. I declare that the facts I have entered on registration are accurate and undertake to notify Expert Locums immediately in any change.

Signed ……………………………………… Date ………………………………………………………….

Print Name ………………………………………