



MedSource Locum Application Form 1

MedSource Medical Services Ltd has been established to facilitate the sourcing of Locum's by Medical Practices both for their day and Out of Hours commitments.

APPLICANT INFORMATION

Surname:	First Name:	Date:
Address:		
Town/City:	County:	Postcode:
Home Phone No:	Mobile No:	PPS No:
Email:	Date of Birth:	
Emergency Contact:	Relationship to Locum:	Contact No:

COMPANY INFORMATION (if applicable)

Company Name:	
Company Registration No:	Date & Country of Incorporation:
Company Registered Address:	
Directors:	
Company Revenue Tax Registration No:	

COMPANY or PRIVATE BANK ACCOUNT INFORMATION

IBAN Bank Account No:	BIC Sort Code:
Name & Address of Bank Branch:	

Are you an Irish Citizen? YES NO

If not, do you have a permit to work in Ireland? YES NO Expiry date of Permit: _____

Have you ever received sanction from any medical regulatory authority? e.g. MC, GMC, Other, YES NO

If "YES" please provide details on a separate sheet.

Do you have a Garda Vetting Certificate? YES NO

Do you have a criminal record? YES NO If yes, explain: _____

Are you interested in: Day Practice Placement? YES NO G.P. Out of Hours? YES NO

Signed: _____ Date: _____

By signing the MedSource Company Locum Application Form I acknowledge that I have read the attached Terms and Conditions of MedSource Medical Services Ltd Locum GP Placement Services and agree to abide by the Terms & Conditions as stated therein.



MedSource Locum Application Form 2

I Dr. _____ of _____ wish to apply to be admitted to the register of Locum Doctors with MedSource Medical Services Ltd.

Signed: _____

Proposed by G.P.: _____

Seconded by G.P.: _____

Witnessed: _____

Details of GP experience/medical practice: _____

Details of Medical insurance are as follows: _____

Medical Registration Number: _____

Please also supply with this application the following:

- Up to date copy of your Medical Council registration
- Up to date copy of your medical indemnity
- Colour photocopy of your passport or Irish drivers licence
- Up to date copy of your Curriculum Vitae
- Two GP references from GPs with whom you have worked
- Names, address & contact number of two GP Referees
- Copy of Garda/Police clearance certificate (if you are not an Irish national)
- Details of any sanction received from a Medical Regulatory Authority (Medical Council, General Medical Council, Other).
- Company Certificate of Incorporation (if applicable).
- Up to date Tax Clearance Certificate.

All applicants will require Garda Clearance. A copy of the Garda Clearance form is attached and must be completed and returned with this application form.

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Terms and Conditions

The Contractor and or Agent its directors, employees or its agents will abide by the Health & Safety practices adopted by the engaging practice or Out of Hours service.

The Contractor and or Agent its directors, employees or its agents will be notified a minimum of 5 days in advance where possible of the availability by the Medical Practice or Out of Hours service requirement for cover.

Therefore, it is important that availability is confirmed immediately. MedSource will endeavour to allocate suitable locations within a practical commute for the Agent.

A notice period of 30 days is required should the contractor and or Agent wish to be removed from the register of locums.

Once the shift has been accepted it must not be cancelled. If unexpected circumstances arise, please notify MedSource at your earliest convenience by telephone or email.

IT IS HERBY AGREED AS FOLLOWS:

The Contractor and or Agent it's directors, employees or agents has extensive experience and skills in medicine of which the engaging practice or Out of Hours service patient's wishes to avail.

THE SERVICES:

The engaging practice or GP Out of Hours service hereby engages the Contractor and or Agent to provide medical services to their patients as a contractor and or agent of the engaging practice or GP Out of Hours Service. The Contractor and or Agent agrees to provide the medical services on the instruction of and for the account of the engaging practice or GP Out of Hours Service but in the Contractor and or Agent's own name, upon the terms and conditions set out in this document.

CONTRACTOR OR AGENT'S OBLIGATIONS.

The Contractor and or Agent shall perform the medical services with all due professional care and skill and to the best of the Contractor's and or Agent's ability.

INDEMNITY

The Contractor and or Agent undertakes and agrees to take out and maintain at all times sufficient professional indemnity insurance (to cover clinical interactions) for its directors, employees or agents and such other insurances as may be required from time to time. . If circumstances of professional indemnity insurance change for whatever reason then it is the responsibility of the Contractor and or Agent to inform MedSource Medical Services Ltd of any such change with immediate effect.

The Contractor and or Agent will at the request of MedSource Medical Services Ltd furnish reasonable evidence of the existence of such insurance policies and of their renewal.

The Contractor and or Agent shall indemnify MedSource Medical Services Ltd against any damage or loss suffered by the Company by any negligence or other wrongful act or omission on the part of the Contractor and or Agent, its directors, employees or agents.

REFEREES AND QUALIFICATIONS

MedSource Medical Services Ltd, the Engaging Practice or the GP Out of Hours Service reserves the right to contact referees named by the Contractor and or Agent in order to obtain information in respect of the experience, competence or any other relevant matter in regard to the Contractor and or Agent's employees, directors or agents.

The Contractor and or Agent's directors, employees or agents who provide medical services to patients of an Engaging Practice or GP Out of Hours Services shall be registered as medical practitioners in the Register of Medical Practitioners established under section 26 of the Medical Practitioners Act 1978 and shall maintain this registration and comply with such other requirements as may be specified by MedSource Medical Services Ltd. If circumstances of Medical Registration change for whatever reason then it is the responsibility of the Contractor and or Agent to inform MedSource Medical Services Ltd of any such change with immediate effect. The Contractor and or Agent represents that there are no claims pending or outstanding in relation to the provision of professional medical services or other related services against any of its directors, employees or agents.

GENERAL

Nothing in these Terms and Conditions shall constitute a partnership or joint venture nor establish a relationship of agency between the parties.

Payment for the Contractor and or Agent:

The Contractor and or Agent its directors, employees or its agents shall be paid an Out of Hours fee of €65.00 per hour gross for hours between 1800 and 2400 Monday to Friday, €70 per hour gross for Sat and Sun weekends and €80 per hour gross for Bank Holidays –0800-2400 and €70 to €80.00 per hour gross (depending on the Out of Hours Service provider) for designated Redeye shift hours between 2200 and 0800 Monday to Sunday, to be invoiced by your Company (if applicable) to the Out of Hours service provider on a month end basis or paid via a PAYE payroll process whichever is agreed.

The Contractor and or Agent shall be paid a mutually agreed negotiated fee for practice full day sessional placement work or 4 hour half day sessional work to be invoiced by your company or paid via a PAYE payroll process whichever is agreed with the engaging practice. Other fees for longer term day practice work will be agreed on an individual basis where the need arises. All the above agreed negotiated fees are a gross fee and inclusive of vat.

Note: No additional amounts will apply for any unsocial hours, travel, accommodation etc. No discussion or engagement with the engaging practice or Out of Hours service provider is permitted about the terms and conditions of this agreement as laid out herein. All placement is subject to availability. The above fees are a gross fee and inclusive of vat or personal income tax where relevant whether through your own limited company or PAYE payroll depending on the customer.

Communication:

All communications with the applicant will be by electronic mail. MedSource Medical Services Ltd reserves the right to alter the terms and conditions of this application/agreement without notice. An updated copy of this agreement can be requested at any time by contacting MedSource Medical Services Ltd at info@medsource.ie or by calling 046 9241533.

On completion of Registration forms, the Contractor and or Agent its directors, employees or its agents (i.e. Doctor Director) will be required to attend the offices of MedSource Medical Services for induction and photo ID registration.

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