**NHS Greater Glasgow and Clyde**

**Vacancy Request Form**

This Vacancy Request form (VRF) must be fully completed with all supporting evidence in Sections 1 and 2 by the Hiring Manager who is responsible for recruiting to the vacant post(s). For guidance on the Vacancy Management Process please refer to HR Connect information. Please attach job description and person specification for both replacement and new posts.

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| **Declaration:** The post has been considered at all appropriate levels of vacancy management control as detailed in the Recruitment Business case section of this form and has been signed by all appropriate levels of Finance and Senior Manager / Executive authorisation. | | |
| Hiring Manager: | Signature: | Date : |

**Section 1: Vacancy details**

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| **Hiring Manager details** | | | |
| Name of Hiring Manager |  | | |
| Hiring Manager job title |  | | |
| Hiring Manager email |  | | |
| Hiring Manager contact telephone number | Mobile |  | |
| Landline |  | |
| Are you the budget holder for the post being recruited to? | Yes | No | *If no, please provide details of the budget holder:* |

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| **Vacancy details** | | | | | | | | | | |
| Post title |  | | | | | | | | | |
| Grade / AfC Pay Band |  | | | | | | | | | |
| Number of posts |  | | | Whole Time Equivalent (WTE) | | |  | | | |
| Number of hours per week |  | | | | | | | | | |
| Directorate / HSCP |  | | | | | | | | | |
| Department / Service |  | | | | | | | | | |
| Unit / Team |  | | | | | | | | | |
| Base location (incl. postcode) |  | | | | | | | | | |
| Cost Centre Code |  | | | *Failure to include a valid cost centre will result in the VRF being rejected.* | | | | | | |
| Contract status | Permanent | |  | Reason for Fixed-term contract *(if applicable)* | | | | | | |
| Fixed Term | |  | Maternity cover | | | |  | | |
| Bank | |  | Secondment cover | | | |  | | |
| Other *(please state below)* | |  | Substantive vacancy cover | | | |  | | |
|  | | | Sickness absence | | | |  | | |
| Specific project | | | |  | | |
| Planned service change | | | |  | | |
| Is this a clinical post? | Yes | No | | Duration of Fixed-Term contract *(if applicable)* | | | |  | | |
| Is this post a Health Care Support worker?  (Any role at Band 2 – 7 not requiring professional registration) | | | | | | | | Yes | |  |
| No | |  |
| **Reason for vacancy request** | | | | | | | | | | |
| Is this a post within the current staff establishment? | Yes, this is a replacement post | | | |  |  | | | | |
| No, this is a new post | | | |  |
| Name of previous postholder  *(if applicable)* |  | | | | | Shift Pattern | | |  | |
| Grade of previous postholder  *(if applicable)* |  | | | | | Date post vacant from  *(if applicable)* | | |  | |
| If this is a new post, when did it complete Job Evaluation? |  | | | | | | | | | |

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| **For Medical and dental posts only** | | | |
| Specialty |  | Sub-specialty |  |
| Duration of post |  | Grade |  |
| Name of Educational Supervisor *(both Medical & Dental)* |  | | |
| For medical consultant posts only  *Please confirm the job plan for this post has been fully reviewed and is consistent with organisational needs.* | | | |
| Signature |  | | |
| Name |  | Date |  |

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| **Recruitment Process and Professional regulation** | | | | | | | | | | |
| Advertising source  *(*[*https://apply.jobs.scot.nhs.uk*](https://apply.jobs.scot.nhs.uk)*)* | Internal | | |  | Date of interview  *(if known)* | | |  | | |
| Internal & external | | |  |
| Other  (please detail) | | |  | | | | | | |
| Use this section to provide your **advert.**  *(Refer to* [*HR Connect*](https://www.nhsggc.scot/staff-recruitment/hrconnect/the-recruitment-service/recruitment-process-guidance-for-hiring-managers/) *for guidance on compiling an effective recruitment advert)* | | | | | | | | | | |
| *Include information about:*  *The department*  *The role/opportunity: key responsibilities, essential and desirable criteria (skills, knowledge, and experience) that the successful candidate must have. You can include what a typical day/week can look like and any opportunities for development and learning.*  *Any specific requirement such as professional registration, driving licence etc* | | | | | | | | | | |
| Informal contact detail to be included within the recruitment advert | Name | |  | | | Contact telephone number |  | | | |
| Post title | |  | | | Email address |  | | | |
| Does this post require registration with a professional regulatory body for the health and care sectors | Yes |  | If yes, please specify which regulatory body *(e.g. NMC, GMC, HCPC etc.)* | | | | | | | |
| No |  |
| Does the post holder require a disclosure check | | | | | | | | | Yes |  |
|  | | | | | | | | | No |  |
| Does the postholder’s normal duties involve regular, unsupervised contact with children and/or protected adults for the purpose of the provision of care, treatment, advice, teaching or training? | | | | | | | | | Yes |  |
| No |  |
| [The Protecting Vulnerable Groups Scheme (PVG)](https://www.mygov.scot/pvg-scheme/) is a scheme managed by Disclosure Scotland. It helps ensure people who are unsuitable to work with children and or protected adults cannot do regulated work with these vulnerable groups.  If you require further guidance around what regulated work is, or to check if the post falls into this category, you can find out more at  [mygov.scot/pvg-scheme/](https://www.mygov.scot/pvg-scheme/) | | | | | | | | | | |

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| **Access to NHS Scotland National Recruitment System (Jobtrain)** | | | | |
| Use the table below to outline who will require access to the Jobtrain recruitment system to access details of the post and candidate application forms. | | | | |
| Panel member name | Job title | Email address | Shortlisting  (Yes / No) | Interviewing  (Yes / No) |
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**Section 2: Recruitment Business Case**

Hiring Managers must provide a detailed and robust business case to support their request to fill the vacancy. Any VRFs submitted without a fully completed business case will not be considered for authorisation.

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| 1. **Vacancy and current staffing establishment** | | | | | |
| What is the primary purpose of this role? |  | | | | |
| Please provide the number of equivalent posts aligned to delivering the main duties and tasks of this post (I.e. how many WTE of the same post title and grade) |  | | | | |
| How long has the post been vacant?  If longer than 3 months please detail current cover arrangements. Have you assessed any impact upon service delivery during this time? |  | | | | |
| Why does this post need to be filled now?  Please detail the impact to service delivery of not filling this post. |  | | | | |
| Please highlight the risks of not filling this post: | Yes | No | | Notes | |
| Patient safety, quality or workload performance |  |  | |  | |
| Health and Safety |  |  | |  | |
| Is NHSGGC at risk of statutory failure? |  |  | |  | |
| Must the post remain at the same grade? |  |  | |  | |
| Could the functions of this post be absorbed within your wider service or department? |  |  | |  | |
| Have you assessed alternative methods to deliver the duties and responsibilities of this post? |  |  | |  | |
| Have options for service redesign / changes to structure or skill mix been considered? |  |  | |  | |
| Has consideration been given to a shared post job, part time, or share arrangement? |  |  | |  | |
| Does the post need to be filled within the current financial year? Provide explanation |  |  | |  | |
| What are the contingency arrangements if this post if not authorised or if recruitment is delayed? |  | | | | |
| 1. **Business Support** | | | | | |
| **For new posts only:** Does this post require business support, for example, business support or admin support? If yes, please provide details | Yes |  |  | | |
| No |  |
| Description of business support post |  | | | | |
| AfC Band of business support post |  | | | | |
| WTE of business support post |  | | | | |
| Please provide justification for business support, including future options for sharing resources |  | | | | |
| 1. **Financial position – please review with relevant Head of Finance** | | | | | |
| Are there any financial efficiencies created by filling this vacancy? If yes, please provide details | Yes |  | | |  |
| No |  | | |
| How will the post be funded?  e.g. existing staff pay budget / establishment, new internal funding, new external funding.  For new roles please explain funding source. |  | | | | |
| If the post is externally funded, and time limited, how will you manage the risk associated with a removal of funding? (i.e. where the post holder is likely to accrue more than 24 months service) |  | | | | |

**Section 3: Vacancy Approvals and Signatures**

Hiring Managers must review the management guidance (available on [HR Connect](https://www.nhsggc.scot/staff-recruitment/hrconnect/the-recruitment-service/recruitment-process-guidance-for-hiring-managers/)), prior to submitting their Vacancy Request Form for approval.

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| **Budget Holder / Line manager** | | | | | |
| Name |  | | | | |
| Post title |  | | | | |
| Email |  | | | | |
| Contact telephone number | Mobile |  | | | |
| Landline |  | | | |
| Outcome | Approval to Recruitment to vacancy | |  | Date |  |
| Vacancy not authorised | |  |
| Rational for decision |  | | | | |
| Signature |  | | | | |

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| **Head of Finance / Chief Financial Officer *(refer to HR Connect for the relevant finance officer)*** | | | | | | |
| Please confirm the position on:   * staff pay * associated non-pay budgets * any impact filling the post now will have on budget position for the remainder of the FY and following FYs. | | |  | | | |
| If this post is above staffing budget, please confirm how it is proposed the excess is funded? | | |  | | | |
| Please use this section to provide:   * other supporting financial implication * risk to the staff pay budget in current or future FYs. * risk to the non-pay budget in current or future FYs. | | |  | | | |
| Name |  | | | | | |
| Post title |  | | | | | |
| Email |  | | | | | |
| Contact telephone number | Mobile |  | | | | |
| Landline |  | | | | |
| Outcome | Approval to Recruitment to vacancy | | |  | Date |  |
| Vacancy not authorised | | |  |
| Rational for decision |  | | | | | |
| Signature |  | | | | | |

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| **Local Vacancy Management Group** | | | |
| Name of Group |  | | |
| Group Members |  | | |
| Date Submitted |  | | |
| Date Considered |  | | |
| Outcome | Approval to Recruitment to vacancy |  |  |
| Vacancy not authorised |  |
| Rational for decision |  | | |
| Group Chair Name |  | | |
| Signature |  | | |

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| **Director / Chief Officers (HSCPs)** | | | | | |
| Name |  | | | | |
| Post title |  | | | | |
| Email |  | | | | |
| Contact telephone number | Mobile |  | | | |
| Landline |  | | | |
| Outcome | Approval to Recruitment to vacancy | |  | Date |  |
| Vacancy not authorised | |  |
| Rational for decision |  | | | | |
| Signature |  | | | | |
| *All VRFs for new posts within Acute Services will require the Depute Director Human Resources and Chief Operating Officer oversight* | | | | | |

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| **Director / Chief Officers (HSCPs) - 8A & Above Mandatory Completion Required** | |
| Comprehensive Business Case Analysis |  |
| Signature |  |

The following levels of approval will be required for the following categories of posts:

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| **Professional Leadership Roles** | | | | |
| All Nursing & Midwifery or Allied Health Professional posts at Band 8A and above must be approved by the Executive Director of Nursing or the Director of Allied Health Professionals | | | | |
| Outcome | Approval to Recruitment to vacancy |  | Date |  |
| Vacancy not authorised |  |
| Rational for decision |  | | | |
| Name |  | | | |
| Post Title |  | | | |
| Signature |  | | | |

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| **All NHSGGC funded Medical and Dental posts will require Deputy Medical Director sign off** | | | | |
| Outcome | Approval to Recruitment to vacancy |  | Date |  |
| Vacancy not authorised |  |
| Rational for decision |  | | | |
| Name |  | | | |
| Post Title |  | | | |
| Signature |  | | | |

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| **All Executive & Senior Manager Grades and all Agenda for Change posts Band 8A to**  **Band 9 will require NHSGGC Chief Executive Approval**  Please send these requests directly to: [vacancy.authorisation@ggc.scot.nhs.uk](mailto:vacancy.authorisation@ggc.scot.nhs.uk)  If approved, posts will then be sent on to the Recruitment Service |

Once fully approved and authorised, please forward this Vacancy Request Form to the NHSGGC Recruitment Service at: [recruitment.vacancies@ggc.scot.nhs.uk](mailto:recruitment.vacancies@ggc.scot.nhs.uk) using ‘Vacancy Request Form’ as the subject.