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| Recruitment use only:Ref No:..............................................................Date Approved:.................................................Signature:.......................................................... |

**R&S - APPENDIX 5A**



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| VACANCY MANAGEMENT FORM |

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| **Recruitment Use Only****FORM R1a (eESS)** |
| **Reference No** |  |
| **Bulletin Insert Date** |  |
|  |
| **This form must be completed in full prior to any post being advertised** **Original hard copy sign off is required by all signatories** |
|  |
| **POST DETAILS** |
| Division/ Corporate Directorate: |  | Directorate: |  |
| Department/Ward: |  | Location: |  |
| Post Title: |  | Banding: |  |
| Hours & Work Pattern: |  | WTE: |  |
| Contract Type:  | Permanent **[ ]**  | Fixed Term **[ ]**  | Duration: | Bank **[ ]**  |
| Reason for fixed term contract:  |  |
| **Please note fixed term contracts will only be advertised for a maximum duration of 21 months.**Please be mindful of the implications of fixed term contracts and your managerial responsibilities for managing contracts of this nature. |
|  |
| **REASON FOR VACANCY** |
| Replacement | **[ ]**  | Secondment | **[ ]**  | Development \* | **[ ]**  |
| Sickness | **[ ]**  | Maternity Leave | **[ ]**  | Establishment Change | **[ ]**  |
| \*If the reason for the vacancy **is a development where new funding is to be received or a new post**, you are required to complete an R1B form which should be authorised by the appropriate EDG member and submitted with the Vacancy Management Form**Is an R1B Required for this post Yes [ ]  No [ ]  If yes, is it attached Yes [ ]  No [ ]**  |
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| **Case for vacancy (please state why this post should be filled and include full details of any skills mix changes):** |

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|  |
| Previous Postholder (as known to payroll):  |  | Final Date of Employment: |  |
| Pay No:Banding: |  | WTE: |  |
| Contract Type: | Permanent **[ ]**  | Fixed Term **[ ]**  | Duration: |  |

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| --- | --- |
| Is this post open to NHS Fife internal candidates only?If yes, please provide reasons…………………………………………………………………………………………Does this post involve shift or weekend working? | **Yes [ ]  No [ ]** **Yes [ ]  No [ ]**  |
| **DISCLOSURE / REGULATED WORK REQUIREMENTS** |
| Does this post require a Standard Disclosure check as defined by NHS Fife policy?Does this post involve regulated work with children, vulnerable adults or both?*If yes PVG Membership is required, please circle the category required* | **Yes [ ]  No [ ]** **Yes [ ]  No [ ]** Children/Vulnerable adults /Both |
| **RECRUITING MANAGER DETAILS** |
|  |  |
| Name(as known to payroll): |  | Base: |  |
| Designation: |  | Telephone: |  |
| Email Address: |  |  |  |
| Do you want shortlisting to be sent to the recruiting manager? **Yes [ ]  No [ ]** If no who should it be sent to? ……………………………………………………………Would you like an email to be sent to the recruiting manager / contact when shortlisting is available for collection / post? **Yes [ ]  No [ ]**  Would you like to arrange to collect shortlisting rather than it going in the internalmail? **Yes [ ]  No [ ]**  |
|  |
| **ADVERTISING INFORMATION** |
| *All posts will be placed in the NHS Fife Vacancy Bulletin, on SHOW, Job Centre Plus and other associated websites*. |
| If the advert is to be placed in an external publication please give details of publication and reason for requesting external advert |
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| **AUTHORISATION** |
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| **Recruiting Manager:** |
|  |
| I confirm that the information given is correct and that I have considered all options and alternatives to recruitment. I have ensured vacancy approval is obtained and where an R1B is required for a new post I have included this. I have attached all relevant documentation including: |
|  |  |  |  |  |
|  | Person Specification | **[ ]**  | Advert Form | **[ ]**  |
|  | Job Description | **[ ]**  |  |  |
| Signed: ……………………………………………………… | Date: …………………………… |
| Name: ……………………………………………………… | Designation: …………………………… |
|  |
|  |
| **Directorate Manager/Divisional General Manger/Other Authorised Signatory:** |
|  |
| I confirm that the recruitment to this post is consistent with the service requirements of the Division/Corporate Directorate. |
| Signed: ……………………………………………………… | Date: …………………………. |
| Name: ……………………………………………………… | Designation: …………………………… |

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| **Executive Director Group (EDG) Member Authorised Signatory:** |
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| I confirm this post has been approved and I am satisfied with the requirements to recruit to the post |
| Signed: ……………………………………………………… | Date: …………………………. |
| Name: ……………………………………………………… | Designation: …………………………… |
|  |

**NOTE:**

**On completion this form should be forwarded to the Finance Directorate inbox:**

**Fife-UHB.FinanceVMFs@nhs.net**

**and the Human Resources Directorate Inbox:** [**fife-uhb.HRVMF@nhs.net**](https://web.nhs.net/OWA/redir.aspx?C=ukhrmzfSE0yDQY-fzxrZInjRE5fW2NBIPg_c2NbntwQ24LRvjRZHGs2Lxze00nImQ-VZM9bKvL4.&URL=mailto%3afife-uhb.HRVMF%40nhs.net)

**along with the appropriate advertisement, Job Description and Person Specification.**

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| **Directorate or Community Services Accountant Authorised Signatory:** |
| Financial Code: ……………………………………………… |
| I confirm that there is funding available for this post or it is a new post with an R1B attached |
| Signed: ……………………………………………………….. | Date: …………………………… |
| Name: ……………………………………………………… | Designation: …………………………… |

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| **eESS System Administrator:** |
| Core Position Number: ………………………. Main Cost Centre…………………………….. |
|  |
| Post Descriptor: ……………………………… GCPP………………………………………….. |  |