

Establishment Control Form Releasing A Vacancy

For Office Use Only
ECF Ref: 25 0701

Use this form to fill a vacant established post including apprentices or agency staff.

The Establishment Control Form Process Steps:

- Managers must complete Parts 1 and 2 of the form and submit to Cor@sefton.gov.uk
- At the start of the ECF process, a reference number will be sent to you by HR, this EC ref number must be quoted if you need to follow up on progress during the process.
- Corporate HR, Operations Team, will check the form this will then be sent on to Finance.
- Finance must check details and complete any missing cost fields, if the form is approved by Finance, it will pass on to the Executive/Assistant Director of the Service for approval.
- The Executive/Assistant Director must review and consider for approval. Returning the completed form to the EC Team.
- If there are any queries during the process, you may contact HR who track the process.
- You will be notified if the form is rejected, this will include any reasons given by Finance or the Executive/AD.
- Once approved, notification will be sent to you by Establishment Control.

IMPORTANT: Please use a new ECF form for each new submission. DO NOT save and overtype old ECF forms.

Please note - ALL sections of this form must be completed

Answer each of the questions highlighted below by clicking on the select boxes and selecting the answer from the drop down lists. Once an answer has been selected the highlighted areas will revert to white.

PART ONE

| | | | |
|--|-------------------------|------------------------------------|-------------------|
| Assistant Director /Executive Director | | Risthardh Hare | |
| Service | Childrens_Social_Care | Section | Assessment Team 4 |
| Recruiting Manager/Author Name | | Paula Davies | |
| Recruiting Managers Contact Number | 1519342516 | Date: | 06.03.2025 |
| Employee Status | Post Service Conditions | If approved who is the Line Manger | |
| Sefton | Local Gov (NJC) | Paula Davies | |

Sometimes additional information is required for staff on some contracts, e.g. Soulbury, HAY etc... Establishement Control will contact you, the recruiting manager, directly if this is the case.

Reason for Releasing the vacancy.

(Be as clear, precise and as brief as possible. A maximum of 1000 characters are available)

Permission to release a permanent position for a Social worker within our Assesment team 4, as worker has now left. Agency already covered by L Molyneux.

| | | | |
|--|----------------|------------------------------------|---------------|
| Name of Previous Role Holder if applicable | | Atinuke Adenola | |
| Term of post: | Permanent | If temporary fixed term end date : | |
| Position No: | | Posn Title: | Social worker |
| Posn Location | Magdalen House | Position Allowances | N/A |

| | | | | | |
|-------|-------|-------|---|-----|----|
| Hours | 36.00 | Grade | I | SCP | 31 |
|-------|-------|-------|---|-----|----|

PART TWO - For Additional advice contact your Finance Officer BEFORE completing this section.

If approving this ECF will have an impact on the Gross Post Budgeted Hours of another Post, please explain this in the text box below.

Expenditure Code YS11

Full Explanation of Funding Source. I.E. Central/Core/External funding etc...

Core. Part of costed establishment.

| | | | | |
|--|-------------|-------------------------------------|--------------------------------------|-----|
| Current Year | 2023 - 2024 | n/a | Will any additional Savings be made? | No |
| Next Year | 2024 - 2025 | n/a | If Yes , amount? | |
| Top of Grade | 20?? - 20?? | n/a | | |
| Is a change to the Gross Post Budgeted Hours required? | | No | If Yes, Post Number: | N/A |
| New Gross Post Budgeted Hours | N/A | Reason | | |
| Effective Date of Hours Change | N/A | If Temporary, What is the end date? | N/A | |

Authorisations:

Decision of Finance

| | | | |
|----------------------|--|------|----------|
| Print Name | Sophie Britnell | Date | 26.03.25 |
| Approval | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved | | |
| Signature | S.Britnell | | |
| Reason for rejection | | | |

NB: The Finance officer must ensure that expenditure codes and costs are fully identified before sending on to the AD for their approval

Decision of Executive/ Assistant Director of Service

| | | | |
|----------------------|--|------|------------|
| Print Name | Risthardh Hare | Date | 27/03/2025 |
| Approval | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Not Approved | | |
| Signature | | | |
| Reason for rejection | | | |

For Office Use Only:

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|----------|-----|------|------------|-------------|------|
| Approved | Yes | Date | 27/03/2025 | Post Number | POST |
|----------|-----|------|------------|-------------|------|

PART THREE - Establishment Control to complete with any additional information for THR

THR / Payroll Instruction:

Release Vacancy POSN413025