

Establishment Control Form

Releasing A Vacancy

For Office Use Only ECF Ref: 25 0907

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.

• Dorporate HR, Operations Team, will check the form this will then be sent on to Finance.

• Dinance 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.

• Dnce 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	Safeguarding Admin							
Recruiting Manage	r/Author Name	Hayley Guatella/Julie Bailey							
Recruiting Manage	ers Contact Number	15193	43114	Date:	28/03/2025				
Employmee Status Post Service Conditions If approved who is the Line Manger Sefton Local Gov (NJC) Hayley Guatella/ Julie Bailey 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 this permanent vacancy as previous worker Gabrielle Higgins has been successful in another									
	n's social care. Request to rele	•	-						
Name of Previo	us Role Holder if applicable		Gabr	rielle Higgins					
Term of post: F	Permanent	If temporary	fixed term end d	late :					
Position No: 1	Pos	n Title: Busi	ness Support Ass	sistant					
Posn Location	Magdalen House	Position	Allowances	N/A					

Hours	18.00]	Grade		D		SCP	5				
PART TWO -	For Addition	al adv	vice c ontact your F	inance O	fficer BEFORE	completir	ng 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 YS41												
Full Explanation of Funding Source. I.E. Central/Core/External funding etc												
Core.												
Current Year 2023 - 2024 n/a			Will any additional Savings be made? No									
Next Year	xt Year 2024 - 2025 n/a			If Yes , amount?								
Top of Grade	e 20?? - 2	0??	n/a									
Is a change t	o the Gross F	ost B	udgeted Hours red	quired?	No	If Yes	, Post Number:	N/A				
New Gross	Post Budgete	ed Ho	urs N/A		Reason							
Effective Dat	te of Hours C	nange	e N/A		If Temporary, What is the end date? N/A							
Authorisations:												
Decision of I	Finance											
Print Name	Sophie Britn	ell			Date	18.06.25						
Approval	🖂 App	roved	□ Not /	Approved			nce officer must e					
	S.Britnell						codes and costs a fore sending on to					
Signature	5.britien					eir approva						
Reason for rejection												
Decision of	Executive/ A	ssista	Int Director of Ser	vice								
Print Name	Risthardh H	are			Date	19/06/202	25					
Approval Approved Not Approved						. ,						
		lovcu										
Signature	Rother H	l en e										
Deserve (see												
Reason for r	ejection											
For Office Us	se Only:											
Approved	Yes	٦	Date 19/0	06/2025		Post Num	ber	POST				
PART THREE	- Establishm	ent C	ontrol to complete	e with an	v additional ir	oformation	for THR					
PART THREE - Establishment Control to complete with any additional information for THR												
THR / Payroll Instruction: Please release vacancy to POSN418107												