

APPENDIX 1

Compliance Action Plan – Administering Authority (October 2019)

Compliance Area	Ref.	TPR/SAB Requirement	Compliance Level: April 2019	Recommendations	LBL Actions	Due By Date	Resp. Officer	Progress/ Additional Comments
Knowledge and Understanding	B1	Are there policies and arrangements in place to support pension board members in acquiring and retaining knowledge and understanding?	Partially Compliant	<ol style="list-style-type: none"> 1. The Knowledge and Understanding policy should include the objectives of the policy. 2. Specify how training will be recorded and monitored. 3. Date the policy and make available online. 	Update policy per recommendations.	Q1 2020	RB	
Knowledge and Understanding	B2	Has a person been designated to take responsibility for ensuring the framework is developed and implemented?	Partially Compliant	<ol style="list-style-type: none"> 1. Identify and name a designated person in the policy. 	Update policy to name the Chair as the designated person, with delegated authority to a designated officer supported by the Principal Accountant. Take back to PB for review and adoption.	Q1 2020	RB	
Knowledge and Understanding	B6	Have all pension board members got access to copies of the scheme rules and relevant Fund documentation?	Partially Compliant	<ol style="list-style-type: none"> 1. The Fund needs to put in place a Governance Compliance Statement. 2. Not all policies are available online. A review of this should be undertaken and any missing policies added. 3. The Full Scheme guide on the Fund's website is out of date and needs updating. 	<p>Draft Governance Compliance Statement.</p> <p>Upload policies to Fund website where missing.</p> <p>Update scheme guide on Fund website.</p>	<p>Q2 2020</p> <p>Q1 2020</p> <p>Q1 2020</p>	RB	
Knowledge and Understanding	B9	Does the Fund offer pre-appointment training for new pension board members or mentoring by existing members?	Partially Compliant	<ol style="list-style-type: none"> 1. Ensure approach for new members is documented in formal Knowledge and Understanding Policy, and is monitored and adhered to. 	<p>Document induction practices in Knowledge Policy and append an induction pack.</p> <p>Add training log as a standing item on agenda.</p>	<p>Q1 2020</p> <p>Q4 2019</p>	RB	<p>Contents of induction pack discussed and agreed with Chair & Adam Bowles.</p> <p>Complete</p>

Conflicts of Interest	C1	Does the Fund have a conflict of interest policy and procedure, which includes identifying, monitoring and managing potential conflicts of interest?	Partially Compliant	1. Date the policy and make available on the Fund's website. 2. Consider extending the reach of the policy to cover both PIC and Officers as well as the Pension Board.	Update policy per recommendations.	Q2 2020	RB	Consider if we need a separate policy for AA and PB? Does existing policy cover the PB or do we need to split it out? RB to investigate
Conflicts of Interest	C9	Do those involved know how to report a conflict of interest?	Partially Compliant	1. Make it clear in the policy who conflicts should be reported to.	Update policy to make it clear that decisions are reported to the Chair and to a designated officer for record-keeping purposes.	Q2 2020	RB	
Publishing Information About Schemes	D2	Does the Administering Authority Publish other useful related information about the Pension Board?	Non-compliant	1. Add additional information from Code of Practice paragraph 96 about the Pension Board and Committee members onto the Fund website.	Update Fund website per recommendations.	Q1 2020	RB	
Publishing Information About Schemes	D3	Is all the information about the Pension Board kept up-to-date?	Partially Compliant	1. Ensure public information about the Board is kept fully up-to-date and correct.	Update Fund website per recommendations.	Q1 2020	RB	
Managing Risk and Internal Controls	E1	Is there an agreed process for identifying and recording scheme risks?	Non-compliant	1. Develop a Risk Policy. 2. Consider developing Fund objectives which help drive the content on the risk register. 3. Ensure that the Fund's risk register contains all areas of the administration and management of the Fund, not just investment related items.	Create a Risk Management Policy (to be approved by PIC). Develop/identify a set of Fund objectives. Update risk register	Q4 2019 Q1 2020 Q1 2020	RB	Complete – to be approved by PIC in November 2019 Currently underway.
Managing Risk and Internal Controls	E6	Is there a standing item on the Pension Board agenda to review scheme risks?	Non-compliant	1. The Board should consider risks at each meeting and the Fund should consider adding a standing agenda item to consider risk.	Add as a standing item to the Board agenda.	Q4 2019	RB	Partially complete; item added to agenda for October to consider Risk Policy, and going forward will consider the updated risk register.

Managing Risk and Internal Controls	E7	Does the Administering Authority have adequate systems, arrangements and procedures in place for the administration and management of the Fund and are they documented?	Partially Compliant	1. Create an Administration Policy. 2. Create internal process notes documenting the various procedures specific to Lewisham.	Create policy and process notes per recommendations. Admin Policy to document relationship with AVC providers (terms of engagement etc.).	Q2 2020	CE	
Maintaining Accurate Member Data	F9	Is a data improvement plan in place which is being monitored with a defined end date?	Non-compliant	1. Create a Data Improvement Plan to address areas where data is incomplete/potentially inaccurate	Create plan per recommendations.	Q2 2020	CE	
Maintaining Contributions	G8	Is there a satisfactory process in place to assess the materiality of any payment failures and ensure that those which are material are reported to the Regulator within a reasonable period?	Non-compliant	1. The Fund should formalise their reporting and monitoring processes in formal procedure notes, in the Fund's Administration Policy, and in the Breaches Procedure (when drafted), as appropriate.	Update Admin Policy once created to document procedures for payment failures and reporting processes.	Q2 2020	CE	See TPR Code/guidance and legislation as a reference to determine processes for assessing payment failure and documenting processes to deal with. Determine levels of materiality for different circumstances, and take account of/assess impact of cumulative failures.
Providing Information to Members and Others	H2 & H4	Do active and deferred Annual Benefit Statements (ABS) meet legal requirements in relation to the format?	Partially Compliant	1. Review active and deferred ABS to ensure compliance with HMT Directions	Review ABS per recommendation.	Q2 2020	CE	
Providing Information to Members and Others	H12	Does the Administering Authority aim to design and deliver communications in a way that ensures scheme members are able to engage with their pension provision?	Non-compliant	1. Improve and monitor customer engagement; publish statistics on the Fund's website.	RB to check if Hymans can prepare analytics on website usage/visitor numbers/pages being looked at/when are they visiting/geographic location of visitors. Consider adding to tender documentation as	Q2 2020	RB	

					a requirement of hosted website.			
Internal Dispute Resolution	I2 & I3	Does the Administering Authority's internal dispute resolution procedure highlight or consider whether a dispute is exempt? Does the procedure clearly state the process to apply for a dispute to be resolved?	Non-compliant	<ol style="list-style-type: none"> 1. Update the IDRP to include exemption wording 2. Update IDRP to include: <ul style="list-style-type: none"> - who it applies to - who the specified person is - the timescales involved - the information that an applicant must include - the process by which decisions are reached 	Update policy per recommendations.	Q2 2020	RB	
Internal Dispute Resolution	I8	Does the Administering Authority regularly assess the effectiveness of its arrangements?	Non-compliant	<ol style="list-style-type: none"> 1. Review the IDRP to ensure it is fully in line with current requirements and upload to Fund website. 2. State how often it will be reviewed. 	Update policy per recommendations.	Q2 2020	RB	
Reporting Breaches of the Law	J1 & J2	Is the Administering Authority satisfied that those responsible for reporting breaches under the legal requirements and TPR guidance understand the requirements? Are appropriate procedures in place to meet legal obligations for identifying and assessing breaches?	Non-compliant	<ol style="list-style-type: none"> 1. A Breaches Policy should be in place. 2. Appropriate breaches training should be provided. 3. Set out appropriate procedures as required within the Breaches Policy. 	<p>Create policy per recommendation.</p> <p>Arrange/suggest suitable training for the Board regarding breaches of the law.</p>	Q2 2020	RB	
Scheme Advisory Board Guidance	K12	A Local Pension Board should understand the Administering Authority's requirements, controls, and policies for FOIA compliance so that the Board is aware of them and can comply with them.	Partially Compliant	1. The Fund should ensure the Board is aware of requirements in this area.	Prepare a paper explaining LA's FOI policy and compliance statistics.	Q2 2020	RB	Check with FOI team if any stats can be provided on compliance

