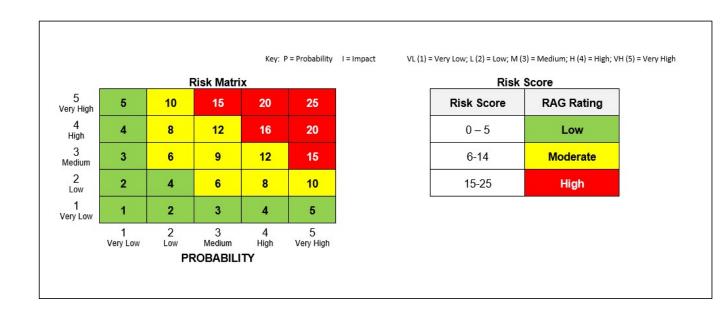
## South Yorkshire Pensions Authority Risk Register As At

13 October 2021



## Risks currently under particular focus are:

Risk No	Risk Type	Risk Title	Current Score	Risk Change at Review
13	Investment and Funding	Failure to implement effective arrangements for the oversight of investment management functions being undertaken by Border to Coast Pensions Partnership.	6	Removed
16*	Investment and Funding	Contribution rates for employers are unaffordable due to business interruption	6	Ļ
05	Operational	Disruption to services due to failure to complete the works required to Oakwell House on time and on budget	9	No change
P1	People	Failure to maintain a suitably qualified and experienced workforce which reflects the community which the Authority serves.	12	1

Key:

## SOUTH YORKSHIRE PENSIONS AUTHORITY RISK REGISTER AS AT 13/10/2021

Risk No	Risk Type	Risk Title	Risk Consequences	Risk Owner	Existing Control Measures	Current Score	Probability & Impact	Target Score	Probability & Impact	Risk Mitigation Action	Owner	Risk Change at Review	Last Review Date
G1	Governance	Failure to ensure that the elected Members knowledge and understanding of pensions related activities is robust and meets the statutory requirements in terms of Section 248a of the Pensions Act 2004.	Leading to Improper scrutiny and challenge by elected Members; Mistakes, errors and omissions and non-compliance with statutory requirements; Failure to ensure contributions are collected; Failure to ensure benefits are calculated properly; Failure to ensure surplus monies are properly and prudently invested; Reputational damage in terms of censure from regulators.	Clerk to the Authority	Induction training provided to new Members which comprises a three day external training course; Programme of internal seminars; Periodic awareness presentations delivered to Members; A self-assessment framework for Members and Chairs is in operation but needs refining – this should assist in identifying training requirements; Lead member for training identified; Working to the spirit of CIPFA Code of Practice (Code of Practice on Public Sector Pensions Finance, Knowledge and Skills, revised in 2013 Production of Annual Report which includes commentary on Members training activities; External training augmented by internal training.	9	I = M P =M	2	I = L P = VL	Review of Member self-assessments. Addition of the Regulator's on line toolkit as a mandatory training requirement. Strengthen learning and development strategy <i>Comment 12/10/2021: Given other resource</i> <i>constraints the intention is for the Independent</i> <i>Advisor to the Pensions Board to conduct interviews</i> <i>with each Authority member to identify specific</i> <i>individual learning needs. This will lead to</i> <i>consolidated learning plan. No justification for a</i> <i>change in the score at this stage.</i>	Clerk to the Authority Clerk to the Authority Clerk to the Authority / Director		12/10/2021
G2	Governance	Failure to ensure that the Local Pension Board is effective in carrying out its role.	Leading to Ineffective scrutiny of the way in which the Scheme Manager (the Authority) exercises its responsibilities Action by the Regulator.	Clerk to the Authority and Director	Induction training and commitment to an ongoing programme of learning and development for all members. Introduction of an independent element to ensure that the Board is not "officer led". Stabilisation of Board membership.	6	I=M P=M	2	I=L P=VL	Additional learning development opportunities being provided. Self-assessment exercise conducted highlighting areas for improvement Comment 12/10/2021: Given other resource constraints the intention is for the Independent Advisor to the Pensions Board to conduct interviews with each Authority member to identify specific individual learning needs. This will lead to consolidated learning plan. No justification for a change in the score at this stage.	Clerk to the Authority / Director		12/10/2021
G3*	Governance	Disruption and reduction in the effectiveness of the control environment	Remote working makes operation of baseline control arrangements more difficult or impossible Covid 19 infections reduce the numbers of staff available so that current controls cannot be operated	Senior Management Team	Adaptation of previous control arrangements to a remote working scenario to ensure that controls continue to operate in the first instance. Electronic workflows that accommodate staff absence in dealing with sign offs Ensuring that more than one person is capable of performing any task within a control process Ongoing review of staff absences at regular SMT meetings allowing risks to be highlighted early	6	I=M P=L	6	I=L P=M	Gradual extension of the number of processes where electronic workflows are used. Identification of staff who could be trained to provide cover in areas where resilience is lower than others <i>Comment 12/10/2021: There is no evidence from</i> <i>Internal Audit that there has been a deterioration in</i> <i>control arrangements. Work is continuing to</i> <i>implement new major systems and as that comes to</i> <i>fruition there may be the opportunity to reduce the</i> <i>score further.</i>			12/10/2021

Risk No	Risk Type	Risk Title	Risk Consequences	Risk Owner	Existing Control Measures	Current Score	Probability & Impact	Target Score	Probability & Impact	Risk Mitigation Action	Owner	Risk Change at Review	Last Review Date
11	Investment and Funding	Failure to ensure that the Authority has appropriate access to its cash resources to meet its commitments to make payments. (Liquidity and credit risk.)	Leading to Financial loss; Negative impact on overall financial viability of the Scheme; Inability to meet pensioner payroll costs and investment commitments. Reputational damage.	Director	The Fund has immediate access to its cash holdings with the majority of cash being deposited for no longer than a week. Levels of cash holding are monitored daily. Treasury activity reviewed weekly by management and twice yearly by elected members with an annual review of limits. Treasury Management Strategy sets limits for the duration and risk profile of deposits with financial institutions. Triennial actuarial review considers contribution rates and cash flow requirements. New software available from the Actuary to assist with cashflows and funding level.	3	I = M P = VL	4		Introduction of quarterly reporting of treasury activity to elected members. Consideration being given to splitting frictional cash (required for day to day purposes from cash awaiting investment). Comment 12/10/2021: No change from the previous assessment. Cash holdings remain below their peak level, and lower than has previously been the case, with a regular flow of income being captured to ensure the level of "float" remains stable.	Director		12/10/2021
12	Investment and Funding	Failure to maintain the gains in funding levels achieved since the 2016 valuation, either as a result of falls in the market value of investments or an increase in the value of liabilities.	Leading to The need to maintain high (and possibly unaffordable) levels of deficit contributions. The need to increase future service contribution rates which may create financial difficulties for employers given the economic environment in which they operate. Critical review by the Government Actuary as part of their s 13 Valuation.	Director/ Head of Investment Strategy	The Investment Strategy already looks to shift out of more volatile "growth" assets into less volatile income earning assets.	8	l = H P = L	4		First principles review of the Investment Strategy to be undertaken alongside the triennial valuation from April 2019 for implementation from April 2020. Options for containing or reducing liabilities (e.g. a trivial commutation review) will be examined following the actuarial valuation. However, in the meantime data cleansing activity will be focussed on areas that impact the value of liabilities. <i>Comment 12/10/2021: No change from the previous</i> <i>assessment. The strong performance of equity</i> <i>investments has resulted in a regular process to</i> <i>rebalance away from equities in effect taking profit</i> <i>and investing it in other asset classes. However, the</i> <i>pace of build up of these other investments is</i> <i>generally less than the rate of growth in the equity</i> <i>portfolio thus the level of risk remains unchanged.</i>	Director/ Head of Investment Strategy		12/10/2021
13	Investment and Funding	the oversight of investment	able to fulfil the Investment	Head of Investment Strategy	Border to Coast is an FCA regulated body and as such is expected to adhere to the Stewardship Code and work within stipulated guidelines as set out in prospectus. These guidelines were set with discussion with underlying funds. Alignment of policies with underlying fund policies Ensured that Border to Coast have sub funds to allow SYPA to fulfil its strategy. Ongoing collaboration about policy. Ongoing collaboration regarding potential changes to Authority strategy. Analysis of investment performance on a monthly/quarterly basis with detailed analysis on an annual basis.	6	I = M P = L	6			Head of Investment Strategy		12/10/2021
14		Failure to secure products through Border to Coast which address the requirements of the Fund's investment strategy.	Leading to Failure to achieve required investment return. Erosion of the overall value of the Fund. Negative impact on contribution rates at valuation points.	Head of Investment Strategy	Ongoing dialogue with both Border to Coast and partner funds in order to influence product development. Monitoring of developments in the market place and where appropriate championing these within discussions with Border to Coast and partner funds.	4	I = H P = VL	3	I = M P = VL	Engagement with Border to Coast as an "implementation partner" in the development of the investment strategy. Comment 12/10/2021: No change from the previous assessment. Any change will depend on the finalisation of the property proposition	Head of Investment Strategy		12/10/2021

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15	Investment and Funding	Impact of Climate Change on the value of the Fund's investment assets and its liabilities. Changes in the liability profile of the Fund.	Leading to An increased gap between the value of assets and liabilities. Reduction in the level of investment income as companies failing to adapt to a low carbon economy become less able to pay dividends. Changes in the liability profile of the Fund.	Director and Head of Investment Strategy	Climate Change Policy in place in addition to the Responsible Investment Policy, supported by engagement activity with investee companies to encourage a planned and more rapid transition to a low carbon economy. Ongoing monitoring of the carbon intensity of equity portfolios every other year in place Lower carbon tilt adopted within the equity portfolios and continued by Border to Coast. Investment in the extended opportunity set provided by the move to a low carbon economy targeted within the Alternatives portfolio, particularly infrastructure. Ongoing monitoring of demographic data by the actuary in place	15	I = VH P = M	9		Product from the Border to Coast Climate working party including providing more regular measurement of the carbon intensity of portfolios. Consideration of alternative investment approached as part of the Investment Strategy Review. Scenario planning within the context of the ongoing development and review of investment strategies. Adoption of a "net zero by 2030" goal together with improvements in impact reporting to fully understand the scale of emissions. Comment 12/10/2021: No change in assessment. Updated data for the equity funds indicates significant reductions in emissions. However these do not put the fund overall on a trajectory to meet the Net Zero Goal and consideration will need to be given to the additional levers available beyond the work on the investment process for the equity funds already in hand.	Head of Investment Strategy Head of Investment Strategy Director Director		12/10/2021
16*	Investment and Funding		Employers (particularly TAB's and CAB's) unable to meet their liabilities due to not receiving income as a result of the interruption of their business due, for example, to school closures.	Administration	Existing assessment of employer risk and covenant identifying higher risk employers Ongoing communication and dialogue with employers and the Fund Actuary to identify possible options.	6	I = L P = H	8		Identification of the applicability of the policy responses for private sector DB schemes to LGPS and engagement with the Scheme Advisory Board Implementation of new regulations allowing interim valuations and increased flexibility around exits <i>Comment 12/10/2021: Experience during the</i> <i>pandemic suggests that there are no new specific</i> <i>employer concerns and it remains the case that no</i> <i>further requests for assistance in terms of ongoing</i> <i>contributions have been received from employers.</i> <i>On this basis the risk score has been reduced from 8</i> <i>to 6.</i>	Head of Pension Administration		12/10/2021
17*			Employers unable to submit monthly data returns on time which from April 2020 will generate the input for direct debit payments. Disruption to Fund cash flow	Administration and Head of	Ongoing dialogue with employers to identify problems early. Maintenance of significant available cash balances through the Treasury Management portfolio	3	I = VL P = M	4	P = L	Enhanced monitoring of contribution receipt and cash flow Redirection of Engagement Officer resource to maintain contact with employers to provide early warning of issues Focussed support to employers with the greatest difficulties, for example support with data submissions Comment 12/10/2021: There has been a slight deterioration in timelines of employer submissions which is being managed proactively on an employer by employer basis. At this stage no reduction in score can be justified.	Head of Finance and Corporate Services Head of Pension Administration Head of Pensions Administration		12/10/2021

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Ola	Operational	Failure to ensure the Authority protects the data it owns and the data it handles against inadvertent release	Leading to Loss of personal information resulting in reputational damage and censure by Information Commissioner; Loss of trust from partner organisations; Successful attacks by hackers or third parties; Disruption and delays.	Director	Data backup undertaken daily and backed up information removed from site; Disaster Recovery Procedures and Business Continuity Plan in place; External audit by third party organisations the Authority works with; Reporting of Incidents to Information Commissioner; Information Governance training included in the training programme; Independent Data Protection Officer established ; Contract management arrangements regarding the software provided by SY Pensions to third parties includes performance management consideration; Physical security of offices improved following relocation to Gateway Plaza	8	I = H P = L	6	P = L	Bi Annual review of Business Continuity Plan. Data breaches reported to Local Pension Board quarterly for scrutiny. Data Protection Officer Assurance programme introduced. Reduction of in-house 'manual' mailing of personal data. Move to secure online communications with members where possible (e.g. Annual Benefit Statements). Comment 12/10/21 - additional checking procedures introduced for return of documents to minimise data risk.	Head of Pensions Administration		12/10/2021
016	Operational	Failure to ensure the Authority protects the data it owns and the data it handles against cyber- security threats.	Cyber risk – the risk of loss, disruption or damage to the Authority or its staff/members due to its information technology systems and processes failing. Including risks to information, data security, as well as assets and both internal risks from staff and external risks from hacking and computer misuse.	Director	Cloud based email management platform including targeted threat protection against email borne threats such as malicious URL's, malware, impersonation attacks and internally generated threats; ICT Security Policy and an effective system of governance in place; Mandatory GDPR/data protection and cyber security training for all staff; Comprehensive Patch Management Policy covering all desktop and server hardware/software; Annual ICT health checks and penetration testing via a CREST certification body; Cyber Essentials Plus Accreditation; Police vetting clearance for ICT staff; The principle of least privilege applied to all user accounts.	8	I = H P = L	6		Cyber Security training identified for all staff; Develop an incident response plan to deal with incidents and enable the Authority to swiftly and safely resume operations; Establish an Incident Response Retainer; Migration to advanced cloud based Anti-Virus/End Point Protection solution; Database encryption of sensitive data. Penetration testing using mock "spearfishing" attacks being undertaken SMT approved additional training and implementation of new password policies <i>Comment 12/10/2021: Since the last review the</i> <i>following actions have been</i> <i>implemented/established:</i> <i>New Cyber Security Reporting Policy and Incident</i> <i>Management Policy</i> <i>New password policies and guidance</i> <i>Simulated spear phishing campaigns to test users.</i> <i>Other new control measures also include:</i> •Utilise 2FA for VPN/Cloud accounts •Implement a DMARC (Domain-based Message Authentication, Reporting and Conformance) policy •Implement an automated Vulnerability Scanning <i>service.</i> Despite all of the above measures the impact of an Other new control measures also include: •Utilise 2FA for VPN/Cloud accounts •Implement a DMARC (Domain-based Message Authentication, Reporting and Conformance) policy •Implement an automated Vulnerability Scanning <i>service.</i> Despite all of the above measures the impact of an Other new control measures also include: •Utilise 2FA for VPN/Cloud accounts •Implement a DMARC (Domain-based Message Authentication, Reporting and Conformance) policy •Implement an automated Vulnerability Scanning <i>service.</i> Despite all of the above measures the impact of an attack would still be high and as a result there is not justification to lower the score at this stage.	Corporate ICT & Digital Manager		12/10/2021

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02	Operational	Failure to meet statutory requirements for disclosure of information to scheme members.	Leading to Poor customer service and reputational damage. Censure and potential fines from the Pensions Regulator and other statutory bodies; Potential for inaccurate data to flow into the 2019 actuarial valuation process and to impact the correct calculation of member benefits.	Head of Pensions Admin	Production of the ABS is dependent on receipt of timely returns from employers. The updated Administration Strategy from March 2018 incorporates SLA's and improves upon them in terms of fines being levied for employers who are non- compliant; Production process for 2018 was brought forward to ensure sufficient contingency time; Joiner/leaver processes configured to meet statutory disclosure requirements.	6	I = M P = L	2	I = L P = VL	Introduction of monthly data collection from April 2018 removes reliance on year-end returns so production process will begin in June rather than July from 2019; ABS's to be issued online from 2019 which further reduces the production schedule and process can be managed fully in house; Administration performance reporting to Authority to focus on statutory compliance. Data Quality Improvement Plan to be implemented. Review of ABS process in light of 2020 issues including the quality (as opposed to timeliness) of monthly data submissions. <i>Comment 12/10/2021: ABS exercise completed in 2021 with 100% compliance following implementation of 'lessons learnt' from 2020 exercise. Responsibility for data preparation passed from Systems to Benefits Team to improve capacity for future.</i>			12/10/2021
03	Operational	Closure of Government Guaranteed Minimum Pension service and reconciliation exercise.	Leading to Significant under/overpayments of existing pensions in payment causing member hardship and reputational damage; Workload pressures of adjustment to excess volumes of member records. Failure to maintain adequate records going forward.	Head of Pensions Admin	Reputable external provider appointed to meet initial HMRC deadline of 31 October 2018; External provider currently handling responses finally received from HMRC to all mismatch queries raised. The final report from HMRC will allow the external provider to carry out a full final reconciliation across the database before we move to rectification. The final reconciliation is expected to be a two month project.	12	I = H P = M	6	I = M P = L	Liaison with LGPS funds to aim to ensure consistent approach to rectification once reconciliation finalised. Assurance work to be commissioned once HMRC issue final liability report Comment 12/10/2021: External provider selected to assist with completion of rectification exercise. Eight month project commencing November 2021.	Head of Pensions Administration		12/10/2021

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04*	Operational	Significant reduction in productive capacity due to impact of the virus on sickness levels	Creation of backlogs of work and potential for missing key deadlines. Potential for backlogs of retirements to result in financial hardship and large arrears payments. Potential for backlogs of death cases to result in the need to recover large overpayments Failure to meet statutory deadlines for case processing and for issue of Annual Benefit Statements.	Team	Monitoring of sickness levels and productivity through regular SMT Business Continuity calls. Clear criteria within which casework is prioritised. Risk of compliance failures raised with TPR at national level with request to consider flexibility if required. Annual Benefit Statement exercise to start in May rather than July to balance workloads.	6	I=M P=L	12		Reassessment of priority activities to concentrate on those activities that directly impact: -The retirement process -Pensioner deaths and deaths in service -Payment of staff and supplier -Collection of all forms of income Redeployment of resources from support areas (Engagement, Technical UPM Team) to casework and from other corporate areas to financial processing. <b>Comment 12/10/2021:</b> There are still a small number of long term non work-related sickness absences. These staff are being supported on an individual need basis. Sickness levels will be monitored over the winter period to assess any spikes , if there is no major impact then this risk will be removed at the next review of the risk register.	Senior Management Team		12/10/2021
05	Operational	Disruption to services due to failure to complete the works required to Oakwell House on time and on budget	This would require all staff to work at home for an additional period and there could be disruption and additional cost if the server infrastructure cannot be relocated before the end of the current lease.		Key contract deliverable for the main contractor is aimed to facilitate relocation of the data centre prior to the end of the current lease even if the building works are not completed. Contract documents will be issued with as detailed a price as possible which should have the effect of mitigating the cost risk.	9	I=M P=M	6	P=L	Further mitigations will become available when the contract for the main contractor has been agreed at which point the budgetary issues will become clear <i>Comment 12/10/2021: The build element is</i> <i>progressing well; however, due to market delays,</i> <i>not all equipment will be in place at handover.</i> <i>Arrangements are in place to manage this with staff</i> <i>working from home to enable the full office</i> <i>mobilisation.</i> <i>The relocation of the data centre is on programme</i> <i>and no downtime is expected.</i> <i>There is still a potential for unforeseen elements of</i> <i>cost to come from the building works and at this</i> <i>stage no reduction in the score is justified .</i>	Director		12/10/2021

Risk No	Risk Type	Risk Title	Risk Consequences	Risk Owner	Existing Control Measures	Current Score	Probability & Impact	Target Score	Probability & Impact	Risk Mitigation Action	Owner	Risk Change at Review	Last Review Date
P1	People	Failure to maintain a suitably qualified and experienced workforce which reflects the community which the Authority serves.	Leading to Continuing imbalances in the Authority's workforce which create the potential for a sudden loss of a significant amount of experience. Skills gaps through a lack of succession planning. Reputational damage through criticism of the lack of diversity in the workforce. Impact on productivity and organisational resilience.		A structured career grade scheme supported by highly structured and exam based training is in place for a key group within the pension administration workforce. Procedures within pension administration are well documented. Identification of potential single points of failure and production of plans to eliminate them. Production of an HR and Organisational Development Strategy targeting these issues.	12	I = M P = M	6		<ul> <li>Full implementation of the HR and Organisational Development Strategy.</li> <li>Formalise workforce and succession planning arrangements</li> <li>Implement Management. Development Programme covering all staff with supervisory and wider management responsibilities.</li> <li>Identification of potential single points of failure and production of plans to eliminate them.</li> <li>Comment 12/10/2021: Increasing difficulties are being experienced in recruiting to fill vacant roles across the organisation. Further mitigations will be developed as part of the update to the HR Strategy.</li> <li>While these issues seem to reflect wider labour market trends, any solutions will need to be constructed within the constraints applying to the public sector.</li> <li>Current score has been increased from 9 to 12.</li> </ul>	Director		12/10/2021