

<b>Subject</b>	<b>Governance, Regulatory and Policy Update</b>	<b>Status</b>	For Publication
<b>Report to</b>	Local Pension Board	<b>Date</b>	20 February 2025
<b>Report of</b>	Head of Governance and Corporate Services		
<b>Equality Impact Assessment</b>	Not Required	Attached	No
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## **1 Purpose of the Report**

- 1.1 To provide Local Pension Board members with an update on current governance related activity and regulatory matters.

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## **2 Recommendations**

- 2.1 Board Members are recommended to:
- a. Note the updates included in this report.**

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## **3 Link to Corporate Objectives**

- 3.1 This report links to the delivery of the following corporate objective:

### **Effective and Transparent Governance**

To uphold effective governance showing prudence and propriety at all times.

- 3.2 The contents of this report are part of the arrangements in place to ensure good governance.

## **4 Implications for the Corporate Risk Register**

- 4.1 The actions outlined in this report relate to actions that will contribute to addressing risks around regulatory compliance.

## **5 Background and Options**

### *Board Membership*

- 5.1 Debbie Carrington has resigned as employer representative from the Board due to taking early retirement. Therefore, there is now a vacancy for an employer representative, this has been advertised and promoted through various channels, including our employer newsletter. We will continue to update the Board on progress.

### *Member Training and Development*

- 5.2 Members across the Authority and the LPB have all successfully completed the core training on the LOLA platform. However, at the time of writing, 4 Authority members are yet to complete the additional videos in the Current Issues module to reach 100% compliance. Officers are working with these members to ensure completion. A new video has been recently added regarding Conflicts of Interest, and this will need to be completed by all members by 31 March 2025.
- 5.3 Members completed the Hymans national knowledge assessment, and the results of this have identified group and individual training needs that have been factored into the Learning and Development Strategy for 2025/26 and individual learning and development plans to be introduced from April onwards. There are separate reports on the agenda which provide more detail.
- 5.4 New members continue to develop and progress through the 12-month induction programme and positive feedback has been received from the members regarding the support this programme has provided.

### *Annual Governance Statement – Action Plan Progress Update*

- 5.5 The Annual Governance Statement is reviewed annually, and the governance team are collating evidence from the Assurance Statements completed by each of the senior managers, effectiveness reviews and the results of the internal audit programme to prepare the draft 2024/25 statement. This draft will be presented to LPB members in April prior to being taken to the Authority for their approval at the June AGM.
- 5.6 Regulatory Breaches new process continues to be developed. Member training on roles and requirements in relation to breaches is scheduled for March 2025.

### *Pentana – Risk Management and Performance Software*

- 5.7 The internal audit post implementation review of the risk management system is in progress and the aim is to report back on this, alongside demonstrating the system itself, to the Board at their April meeting.

### *LGPS – Fit for the Future Consultation*

- 5.8 As noted in the report elsewhere on this agenda on Decisions of the Authority, a discussion was held with Authority members in January and a response to the consultation agreed that was submitted on time and published on the Authority's website as well as being separately circulated to members.

### *Internal Audit - Progress on Agreed Management Actions*

- 5.9 The latest progress update on agreed management actions arising from audit reviews was provided to the December meeting of the Audit & Governance Committee and is attached at Appendix A.
- 5.10 The table in Appendix A shows two actions that were due by 31 December 2024 that are now being deferred to March 2025. The details below provide some additional

context regarding these, given the long period that has elapsed since the audit review was first issued.

- 5.11 An audit review of information governance was concluded in September 2020 with a positive opinion of reasonable assurance being issued. The detailed findings resulted in a total of six management actions being agreed – four of which have been fully completed and closed off. The remaining two actions are linked together and related to updating a written policy for Records Management and a Document Retention Schedule. Whilst these documents have not yet been fully completed to enable these audit actions to be closed, it is important to note that a significant amount of work has already been completed and is in progress in relation to the Authority's information governance framework and controls. An action plan was developed by the Governance Team in liaison with the corporate assurance (internal audit) team in a critical friend role. Phase 1 of the action plan is complete and concentrated on data protection policy and procedures, raising staff awareness and strengthening processes for data breaches and data protection impact assessments. A significant project to map the Authority's data assets and document a fully revised records management policy and data retention schedule forms part of Phase 2 of the action plan, with work due to commence from January.
- 5.12 Pending the completion of the above, assurance over the adequacy of information governance controls and systems is provided through annual coverage in the internal audit programme of data protection systems as part of ensuring that the Data Protection Officer can be satisfied with the Authority's arrangements.

#### *Information Governance Update*

- 5.13 There have been 5 personal data breaches logged during the quarter. All 5 were logged and dealt with in the required timescales and found to be of low / minor impact, and not reportable. The cases all involved data being emailed to an incorrect recipient. Training has been delivered within the affected teams to address this issue, but reporting procedures internally were followed accurately.
- 5.14 One FOI request was received during the quarter and responded to within timescales. The subject of which concerned investments.

#### *Procurement Forward Plan*

- 5.15 As requested by the Board, a copy of the Procurement Forward Plan for 2025 to 2028 is attached at Appendix B. This is the plan that is being presented to the Authority for their consideration and approval at their meeting on 13 February. Once approved by the Authority, the plan will be published on the Authority's website. It sets out the potential procurement activity that has been identified for the forthcoming three-year period and aligns with the Authority's strategic and financial planning framework, contributes to the delivery of strategic objectives and facilitates compliance with legislative and regulatory requirements.
- 5.16 The plan reflects that as an organisation, our procurement activity is relatively low in both volume and value, although we do have a small number of high-value contracts within this.
- 5.17 The Governance Team will co-ordinate a quarterly review of the procurement plan by key officers with relevant responsibilities to highlight any new requirements that need to be considered and planned.

## **6 Implications**

- 6.1 The proposals outlined in this report have the following implications:

Financial	No direct implications.
Human Resources	None.
ICT	None.
Legal	No direct implications.
Procurement	No direct implications.

**Jo Stone**

**Head of Governance & Corporate Services**

<b>Background Papers</b>	
<b>Document</b>	<b>Place of Inspection</b>
None	