



TPR General code of practice

South Yorkshire Pension Fund - Scheme Assessment

Prepared for: South Yorkshire Pensions Authority
South Yorkshire Pensions Authority
South Yorkshire Pension Board

Prepared by: Aon
Date: 10 February 2026

Introduction



TPR Code Compliance model

This report sets out how South Yorkshire Pension Fund complies with the Pension Regulator's (TPR) General code of practice (the Code) in relation to the management of the South Yorkshire Pension Fund which is part of the Local Government Pension Scheme (LGPS).

Note that the Code applies to governing bodies of all occupational, personal and Public Service Pension Schemes and therefore it is generic in nature. This document highlights all the key elements of the Code relevant to Public Service Pension Schemes and sets out whether South Yorkshire Pensions Authority is compliant in each of the Code's modules. There may be a number of requirements relating to these elements that are specifically stipulated within LGPS legislation and it is not the purpose of this compliance model to consider that level of detail.

Key

	Compliant
	Compliant in some but not all areas
	Not currently compliant
PC	Pension Committee (or equivalent)
PB	Local Pension Board
TPR	The Pensions Regulator
LGPS	Local Government Pension Scheme
Code	TPR's General code of practice



The governing body

The governing body – at a glance



Board Structure and activities

Fully compliant in 4 out of 5 modules



No questions are red and 1 question is amber out of 30 questions.

Knowledge and understanding requirements

Fully compliant in 2 out of 2 modules



No questions are red and no questions are amber out of 20 questions.

Advisers and service providers

Fully compliant in 0 out of 1 module



No questions are red and 1 question is amber out of 19 questions.

Risk Management

Fully compliant in 4 out of 6 modules



1 question is red and 1 question is amber out of 50 questions.

Scheme governance

Fully compliant in 0 out of 1 module



4 questions are red and 6 questions are amber out of 24 questions.

Essential actions

- Consider how to better implement the Equality Scheme within the recruitment practices. 25/26Q3 Still partially met - communications to district councils now incorporate encouragement of DEI however this is still to be incorporated into vacant post adverts and newsletters. To be kept as partial as ongoing improvements are being made

- Further work to be done in identifying single points of risk and ensuring internal controls are documented for these, as well as ensuring all administration tasks are documented (e.g. non-UPM areas).

25/26Q3 - Now yes - BCP is now in place and as part of this single person risks have been identified and supporting processes and documented procedures have been identified to mitigate this event. ACTION COMPI FTF

Comments

General consensus is to put creating an Own Risk Assessment as lower priority whilst focusing on other areas of Code, and also to allow LGPS national guidance to perhaps be released in this area

The Administering Authority have selected to answer all questions within this section.

The Administering Authority have selected to include all questions when determining whether they comply with the Code within this section.

The governing body - changes



Changes since previous report (if relevant)

The charts below shows how many responses to the questions have changed Red, Amber, Green (RAG) status within each sub-section. If you click within the blue boxes it will take you to the relevant modules (which also records the previous answer and previous score).

Board structure and activities

Amber to Green
Red to Green
Red to Amber **No RAG status changes for this review**
Green to Amber
Amber to Red
Green to Red

Knowledge and understanding requirements

Amber to Green
Red to Green
Red to Amber **No RAG status changes from this review**
Green to Amber
Amber to Red
Green to Red

Advisers and service providers

Amber to Green 
Red to Green
Red to Amber
Green to Amber
Amber to Red
Green to Red

Risk management

Amber to Green 
Red to Green 
Red to Amber
Green to Amber
Amber to Red
Green to Red

Scheme governance

Amber to Green
Red to Green
Red to Amber **No RAG status changes from this review**
Green to Amber
Amber to Red
Green to Red

The governing body



Board structure and activities

Essential Actions

Module	Question	Action
1 Recruitment and appointment to the governing body	2	Consider how to better implement the Equality Scheme within the recruitment practices. 25/26Q3 Still partially met - communications to district councils now incorporate encouragement of DEI however this is still to be incorporated into vacant post adverts and newsletters. To be kept as partial as ongoing improvements are being made

Good Practice

Other Actions

Module	Question	Action
1 No Actions		

Knowledge and understanding requirements

Essential Actions

Module	Question	Action
1 No Actions		

Other Actions

Module	Question	Action
1 No Actions		

Advisers and service providers

Essential Actions

Module	Question	Action
1 Managing advisers and service providers	7 Good Practice	Need to document and clarify who can request work and manage contracts. 25/26Q3 - Now Yes - Delegations and procedures are contained in the Constitution and CSO's and are further supported by the Procurement Gateway Approval process. The Gateway Approval manages conflicts of interests and also directs officers to assess data protection and complete DPIA to review risks associated with information sharing. ACTION COMPLETE
2 Managing advisers and service providers	8 Good Practice	Need to document and clarify who can request work and manage contracts i.e. improved contract management. 25/26Q3 - For key contracts (Pensions Admin, Actuary etc) communication is managed via regular service meetings where decisions are recorded and any necessary escalations are made by the lead officer to the account manager. ACTION COMPLETE
3 Managing advisers and service providers	13 Good Practice	Need to incorporate a process to ensure improved contact management and regular SLA/KPIs, and better escalation processes. 25/26Q3 - Still partial - whilst service review meetings are taking place on key contracts, work on drafting the contract management framework will commence during Q4 to strengthen processes in this area Target to progress during 2026
4 Managing advisers and service providers	16 Good Practice	Work to be done to consider how robust contract provisions are and ensure everything fully incorporated into business continuity plan. 25/26Q3 - Now yes - BCP is now in place and as part of this alternative processes have been identified to mitigate circumstances where there is a third party service failure or change. ACTION COMPLETE

Other Actions

Module	Question	Action
1 No Actions		

Risk management

Essential Actions

Module	Question	Action
1 Internal controls	3 Required	Further work to be done in identifying single points of risk and ensuring internal controls are documented for these, as well as ensuring all administration tasks are documented (e.g. non-UPM areas). 25/26Q3 - Now yes - BCP is now in place and as part of this single person risks have been identified and supporting processes and documented procedures have been identified to mitigate this event. ACTION COMPLETE
2 Internal controls	4 Required	Further work to be done in identifying single points of risk and ensuring internal controls are documented for these, as well as ensuring all administration tasks are documented (e.g. non-UPM areas). 25/26Q3 - Now yes - BCP is now in place and as part of this single person risks have been identified and supporting processes and documented procedures have been identified to mitigate this event. A robust risk management framework is in place that identifies mitigating actions and monitors progress against these actions. ACTION COMPLETE
3 Scheme continuity planning	2 Good Practice	Develop new BCP covering full SYPA operations. 25/26Q3 - Now yes - BCP is now in place and as part of this all SYPA operations have been considered. ACTION COMPLETE
4 Scheme continuity planning	5 Good Practice	Further work to be carried out to get assurance on BCPs from all service providers. To be progressed during 2025/26 as part of the development of the contract management framework 25/26Q3 -Still partial - further work ongoing in relation to the review of provider BCPs over the full contract period.
5 Scheme continuity planning	10 Good Practice	Develop new BCP covering full SYPA operations. 25/26Q3 - Now Yes - Full BCP has been developed that includes the assesment of alternative resource timescales where required. ACTION COMPLETE
6 Scheme continuity planning	11 Good Practice	Contingency plans for staffing shortages to be considered as part of new BCP development 25/26Q3 - Now Yes - Full BCP has been developed that includes the assesment of alternative resources where required. ACTION COMPLETE

Other Actions

Module	Question	Action
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1 No Actions

Scheme governance

Essential Actions

Module	Question	Action
--------	----------	--------

1 No Actions

Other Actions

Module	Question	Action
--------	----------	--------

1 No Actions

The governing body



Modules

Board structure and activities

- Role of the governing body (1)
- Recruiting and appointment to the governing body (2,6)
- *Arrangements for member-nominated trustee appointments (7)*
- Appointment and role of the chair (5)
- Meetings and decision-making (1)
- Remuneration and fee policy (4)

Knowledge & understanding requirements

- Knowledge and understanding (3,6)
- Governance of knowledge and understanding (3,6)

Value for scheme members (DC only)

- *Value for members (7)*

Notes:

The numbers next to the module names above set out Aon's interpretation of the Code for Public Service Pension Schemes. Please note it should not be taken as legal advice.

(1) Applies

(2) Mostly applies

(3) Partially applies

(4) Good practice

(5) Mostly good practice

(6) Partially good practice

(7) Does not apply

Advisers and service providers

- Managing advisors and service providers (4)

Risk management

- Identifying, evaluating and recording risks (1)
- Internal controls (1)
- Assurance reports on internal controls (1)
- Scheme continuity planning (4)
- Conflicts of interest (3,6)
- Own risk assessment (4)
- *Risk management function (7)*

Scheme governance

- Systems of governance (4)





Funding and investment

Funding and investment – at a glance



Investment

Fully compliant in 1 out of 4 modules



1 question is red and 6 questions are amber out of 37 questions.

Essential actions

- Ongoing reviews of AVCs to be commissioned and ensure happens regularly.
- Consider whether to expand monitoring to incorporate volatility and risk.
25/26Q3 - Discussions have taken place with Custodian however B2C will be expected to develop comprehensive whole fund reporting in due course. Target June 27

- 25/26Q3 - Still Partial - Full BCP has been developed that includes the assesment of overall operational Fund objectives. The Operational Sustainability Plan is in the process of being drafted

Comments

The Administering Authority have selected to answer all questions within this section.

The Administering Authority have selected to include all questions when determining whether they comply with the Code within this section.

Funding and investment - changes



Changes since previous report (if relevant)

The charts below shows how many responses to the questions have changed Red, Amber, Green (RAG) status within each sub-section. If you click within the blue boxes it will take you to the relevant modules (which also records the previous answer and previous score).

Investment

Amber to Green

Red to Green

Red to Amber  2

Green to Amber

Amber to Red

Green to Red

Funding and investment



Investment

Essential Actions

Module		Question	Action
1 Investment governance	Good Practice	7	
2 Investment governance	Good Practice	13	Ongoing reviews of AVCs to be commissioned and ensure happens regularly.
3 Investment monitoring	Good Practice	8	Consider whether to expand monitoring to incorporate volatility and risk. 25/26Q3 - Discussions have taken place with Custodian however B2C will be expected to develop comprehensive whole fund reporting in due course. Target June 27
4 Climate change	Required	1	25/26Q3 - Still Partial - Full BCP has been developed that includes the assesment of overall operational Fund objectives. The Operational Sustainability Plan is in the process of being drafted.
5 Climate change	Good Practice	3	Ensure climate risk is considered from an operational perspective is consider (2025/26). Will be considered as part of business continuity plan. 25/26Q3 - Now Partial - Full BCP has been developed that includes the assesment of overall operational Fund objectives. The Operational Sustainability Plan is in the process of being drafted.
6 Climate change	Good Practice	4	Ensure climate risk is considered from an operational perspective is consider (2025/26). Will be considered as part of business continuity plan. 25/26Q3 - Now Partial - Full BCP has been developed that includes the assesment of overall operational Fund objectives. The Operational Sustainability Plan is in the process of being drafted.

7 Climate change

Good Practice

5

Ensure climate risk is considered from an operational perspective is consider (2025/26). Will be considered as part of business continuity plan
25/26Q3 - Still Partial - Full BCP has been developed that includes the assesment of overall operational Fund objectives. The Operational Sustainability Plan is in the process of being drafted.

Other Actions

Module

Question Action

1 No Actions

Funding and investment



Modules

Investment

- Investment governance (4)
- *Investment decision making* (7)
- Investment monitoring (4)
- Stewardship (6)
- Climate change (3,6)
- *Statement of investment principles* (6)*
- *Default arrangements and charge restrictions* (7)

Notes:

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(1) Applies

(2) Mostly applies

(3) Partially applies

(4) Good practice

(5) Mostly good practice

(6) Partially good practice

(7) Does not apply

* Note that for the Statement of investment principles module the Code references good practice for PSPSs. However, due to the overriding legal requirement to have an Investment Strategy Statement (ISS) in place we have not included any questions on this module but have referred to the ISS within the Investment governance module.





Administration

Administration – at a glance



Scheme administration

Fully compliant in 0 out of 1 module



No questions are red and 1 question is amber out of 16 questions.

Information handling

Fully compliant in 2 out of 4 modules



No questions are red and 3 questions are amber out of 42 questions.

IT

Fully compliant in 1 out of 2 modules



No questions are red and 2 questions are amber out of 17 questions.

Contributions

Fully compliant in 2 out of 3 modules



1 question is red and no questions are amber out of 13 questions.

Essential actions

- All tasks and processes to be reviewed as part of administration improvement plan.
25/26Q4 - The plan is now in place and identifies priority processes and review schedules. These have been allocated to responsible officers.
ACTION NOW COMPLETE
- All tasks and processes to be reviewed as part of administration improvement plan, together with an ongoing cycle of reviews and better use of performance data.
25/26Q4 - The plan is now in place and identifies priority processes and review schedules. These have been allocated to responsible officers.
ACTION NOW COMPLETE
- As part of management information development, legal timescales will be monitored and reported.
25/26Q4 - Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final

Comments

The Administering Authority have selected to answer all questions within this section.

The Administering Authority have selected to include all questions when determining whether they comply with the Code within this section.

Administration - changes



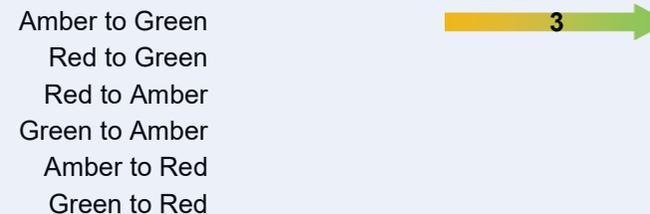
Changes since previous report (if relevant)

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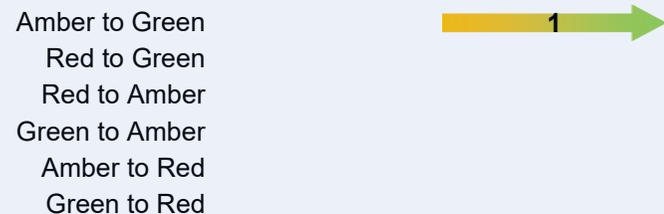
Scheme administration



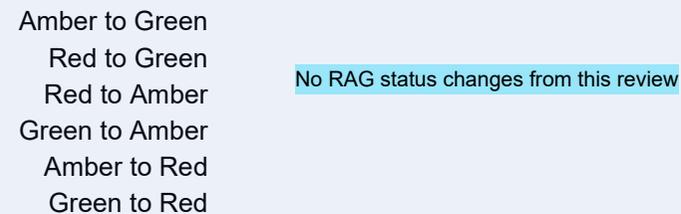
Information handling



IT



Contributions



Administration

Scheme administration



Essential Actions

Module	Question	Action
1 Planning and maintaining administration Required	3	All tasks and processes to be reviewed as part of administration improvement plan. 25/26Q4 - The plan is now in place and identifies priority processes and review schedules. These have been allocated to responsible officers. ACTION NOW COMPLETE
2 Planning and maintaining administration Required	10	All tasks and processes to be reviewed as part of administration improvement plan, together with an ongoing cycle of reviews and better use of performance data. 25/26Q4 - The plan is now in place and identifies priority processes and review schedules. These have been allocated to responsible officers. ACTION NOW COMPLETE
3 Planning and maintaining administration Required	11	As part of management information development, legal timescales will be monitored and reported. 25/26Q4 - Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final piece of work is to fine tune the performance data in line with the revised target dates and agree the best way to report internal targets against statutory targets. Target for June 2026
4 Planning and maintaining administration Required	15	Business continuity plan being developed during 2024/25 25/26Q3 - BCP is now complete and includes review of external providers business continuity plans. ACTION NOW COMPLETE

Other Actions

Module	Question	Action
1 No Actions		

Information handling

Essential Actions

Module	Question	Action
1 Financial transactions	9 Required	Data improvement plan, articulating actions and tracking against them, to be developed 25/26Q4 - The data improvement plan and strategy were approved at the September Authority meeting and tracking against progress is now in place. ACTION NOW COMPLETE
2 Record keeping	3 Required	Data retention timescales to be reviewed (including consideration of lawfully retaining data) and implemented 25/26Q3 - Work on Phase 2 of the Information Governance action plan is progressing well with the information asset register and data retention policy on track for completion by the target date. Target March 2026
3 Record keeping	4 Required	Review retention policies for legitimate purposes (as above) 25/26Q3 - Work on Phase 2 of the Information Governance action plan is progressing well with the information asset register and data retention policy on track for completion by the target date. Target March 2026
4 Data monitoring and improvement	4 Required	Ensure Data Improvement Plan documents data reviews and their findings, and ongoing actions. 25/26Q4 - The reporting and evidencing outcomes of the plan are now in place. ACTION COMPLETE
5 Data monitoring and improvement	5 Required	Put in place Data Improvement Strategy and Data Improvement Plan with actions that are monitored. 25/26Q4 - The reporting and evidencing outcomes of the plan are now in place. ACTION COMPLETE
6 Data monitoring and improvement	6 Required	Ensure Data Improvement Strategy includes action/decisions relating to where data cannot be corrected 25/26Q4 - This action is still partially met. Priority areas have been reviewed, the 2026/27 Plan will confirm priority areas and the policy will be completed by the end of Q1. Revised target June 2026

Other Actions

Module	Question	Action
1	No Actions	

IT

Essential Actions

Module	Question	Action
1	Cyber controls Required	1 Create a specific cyber security policy. Also carry out review against TPR Cyber Guidance which is more detailed. 25/26Q4 - The Cyber Security Strategy is now in place, TPR guidance was taken into account in the development of the strategy ACTION COMPLETE
2	Cyber controls Required	8 Cyber hygiene guidelines to be reconsidered as part of review of these policies and documents. 25/26Q4 - This is still partially met however considerable progress has been made. Cyber Hygiene is covered in the updated suite of ICT Policies that have been drafted and are awaiting final approval. It is expected that this action will be completed prior to the next review. Target June 2026
3	Cyber controls Required	9 Further work to done to incorporate cyber resilience testing for third parties/suppliers. 25/26Q4 - Considerable progress has been made in this area with templates developed to review provider risk and the introduction of enhanced third party questionnaires. These are currently being trialled and once embedded this action will be complete. Target April 2026

Other Actions

Module	Question	Action
1	No Actions	

Contributions

Essential Actions

Module	Question	Action
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1 Resolving overdue contributions

3

Required

Ensure any written procedure includes clear processes to identify fraudulent activity. 25/26Q4 - This is still partially met. Checks are in place on Epic in relation to contributions, written process are being documented. Revised target date September 2026

Other Actions

Module

Question Action

1 No Actions

Administration

Modules

Scheme administration

- Planning and maintaining administration (1)

Information handling

- Financial transactions (1)
- Transfers out (2)
- Record-keeping (3,6)
- Data monitoring and improvement (1)

Notes:

The numbers next to the module names above set out Aon's interpretation of the Code for Public Service Pension Schemes. Please note it should not be taken as legal advice.

(1) Applies

(2) Mostly applies

(3) Partially applies

(4) Good practice

(5) Mostly good practice

(6) Partially good practice

(7) Does not apply

IT

- Maintenance of IT systems (1)
- Cyber controls (2,6)

Contributions

- Receiving contributions (3)
- Monitoring contributions (1)
- Resolving overdue contributions (1)





Communications and disclosure

Communications and disclosure – at a glance



Information to members

Fully compliant in 2 out of 5 modules



2 questions are red and 3 questions are amber out of 22 questions.

Public information

Fully compliant in 2 out of 2 modules



No questions are red and no questions are amber out of 14 questions.

Essential actions

- Implement legal timescale monitoring within UPM.

25/26Q4 - This is now partially met. Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final piece of work is to fine tune the performance data in line with the target dates and agree the best way to report internal targets against statutory targets.

Target for June 2026

- Implement legal timescale monitoring within UPM.

25/26Q4 - This is now partially met. Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final piece of work is to fine tune the performance data in line with the target dates and agree the best way to report internal targets against statutory targets.

Comments

The Administering Authority have selected to answer all questions within this section.

The Administering Authority have selected to include all questions when determining whether they comply with the Code within this section.

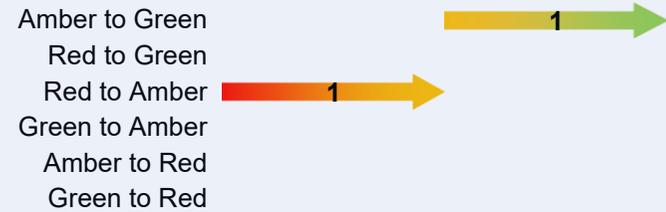
Communications and disclosure - changes



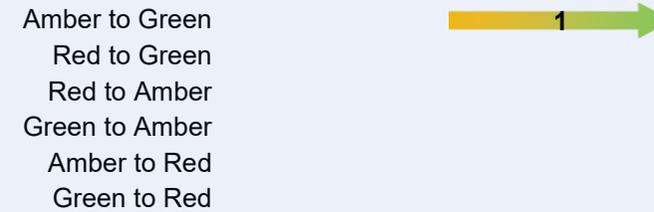
Changes since previous report (if relevant)

The charts below shows how many responses to the questions have changed Red, Amber, Green (RAG) status within each sub-section. If you click within the blue boxes it will take you to the relevant modules (which also records the previous answer and previous score).

Information to members



Public information



Communication and disclosure



Information to members

Essential Actions

Module	Question	Action
1 General principles for member communications	1 b Required	Implement legal timescale monitoring within UPM. 25/26Q4 - This is now partially met. Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final piece of work is to fine tune the performance data in line with the target dates and agree the best way to report internal targets against statutory targets. Target for June 2026
2 General principles for member communications	1 c Required	Implement legal timescale monitoring within UPM. 25/26Q4 - This is now partially met. Considerable progress has been made on this action. The MI plan is in place and target dates have been reviewed. In house target dates have been captured in line with PAS. The final piece of work is to fine tune the performance data in line with the target dates and agree the best way to report internal targets against statutory targets. Target for June 2026
3 General principles for member communications	2 Required	Consider feasibility of reviewing all scheme member communications to meet Plain English standards 25/26Q4 - This is now partially complete. The website is now compliant in line with accessibility testing. Work is now commencing on other scheme member published documents with a target date of March 27 for completion.
4 General principles for member communications	3 Required	Review digital inclusion. 25/26Q4 - Website testing is complete and evidences that audio set up and transition is enabled. A report will be generated to evidence compliance of this and scheduled to run annually. ACTION NOW COMPLETE
5 Benefit information statements (PSPS)	4 Required	Ensure AVC statements issued by Prudential and Scottish Widows are issued within future legal timescales 25/26Q4 - Still partial - Internal data checks are in place to ensure accuracy and the Dashboard requirements will place additional focus on AVC providers. A process will developed to check this for all AVCs - Revised Target March 2027

6	Benefit information statements (PSPS)	5 Required	Check on whether AVC providers are meeting legal requirements in relation to the information included on annual statements. 25/26Q4 - Still partial - Internal data checks are in place to ensure accuracy and the Dashboard requirements will place additional focus on AVC providers. A process will be developed to check this for all AVCs - Revised Target March 2027
7	Notification of right to cash transfer sum or contribution refund	1 Required	Clear backlogs and then ensure that the notifications on rights and options are issued within 3 month legal timescale 25/26Q4 - This is now partially complete. A process is now in place however the reporting and monitoring of the statutory timescales is still to be finalised. Revised target September 2026

Other Actions

	Module	Question	Action
1	No Actions		

Public information

Essential Actions

	Module	Question	Action
1	Publishing scheme information (PSPS)	2 Good Practice	Review and ensure information published meets the Codes requirements. 25/26Q3 - Now Yes - Website update has now been completed and required information published. ACTION COMPLETE

Other Actions

	Module	Question	Action
1	No Actions		

Communication and disclosure



Modules

Information to members

- General principles for member communications (1)
- *Annual pension benefit statements (DC)* (7)
- *Summary funding and pension benefit statements (DB)* (7)
- Benefit information statements (PSPS) (1)
- Retirement risk warnings and guidance (1)
- Notification of right to cash transfer sum or contribution refund (2)
- *Chair's statement* (7)
- Scams (1)
- *Audit requirements* (7)

Public information

- Publishing scheme information (PSPS) (2,6)
- Dispute resolution procedures (2,6)

Notes:

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- (1) Applies
- (2) Mostly applies
- (3) Partially applies
- (4) Good practice
- (5) Mostly good practice
- (6) Partially good practice
- (7) Does not apply





Reporting to TPR

Reporting to TPR – at a glance



Regular reports

Fully compliant in 1 out of 1 module



No questions are red and no questions are amber out of 3 questions.

Whistleblowing- Reporting breaches of the law

Fully compliant in 4 out of 4 modules



No questions are red and no questions are amber out of 11 questions.

Essential actions

- Ensure all breaches are identified and recorded (including administration legal timescales and late/estimated contributions)

25/26Q4 - Now complete, new breach log in place and Policy published.

ACTION COMPLETE

- Ensure induction training highlights the personal responsibility about reporting significant breaches, as well as what breaches are/ensuring sharing procedure.

25/26Q4 - All staff have been allocated breach training and the updated policy has been published.

ACTION COMPLETE

- Ensure induction training highlights the personal responsibility about reporting significant breaches, as well as what breaches are/ensuring sharing procedure.

25/26Q4 - All staff have been allocated breach training and the updated policy has been published.

Comments

The Administering Authority have selected to answer all questions within this section.

The Administering Authority have selected to include all questions when determining whether they comply with the Code within this section.

Reporting to TPR - changes



Changes since previous report (if relevant)

The charts below shows how many responses to the questions have changed Red, Amber, Green (RAG) status within each sub-section. If you click within the blue boxes it will take you to the relevant modules (which also records the previous answer and previous score).

Regular reports

Amber to Green
Red to Green
Red to Amber
Green to Amber
Amber to Red
Green to Red

No RAG status changes from this review

Whistleblowing – reporting breaches of the law

Amber to Green  3
Red to Green  3
Red to Amber
Green to Amber
Amber to Red
Green to Red

Reporting to TPR



Regular reports

Essential Actions

Module	Question	Action
1 No Actions		

Other Actions

Module	Question	Action
1 No Actions		

Whistleblowing - reporting breaches of the law

Essential Actions

Module	Question	Action
1 Who must report	1 Required	Ensure all breaches are identified and recorded (including administration legal timescales and late/estimated contributions) 25/26Q4 - Now complete, new breach log in place and Policy published. ACTION COMPLETE
2 Who must report	3 Required	Ensure induction training highlights the personal responsibility about reporting significant breaches, as well as what breaches are/ensuring sharing procedure. 25/26Q4 - All staff have been allocated breach training and the updated policy has been published. ACTION COMPLETE
3 Who must report	4 Required	Ensure induction training highlights the personal responsibility about reporting significant breaches, as well as what breaches are/ensuring sharing procedure. 25/26Q4 - All staff have been allocated breach training and the updated policy has been published. ACTION COMPLETE

4 Decision to report	2 Required	Ensure breaches log is updated to ensure assessments are carried out in line with procedure 25/26Q4 - Breach Policy has been updated and approved, revised Breach Log is in place and training delivered. ACTION COMPLETE
5 How to report	3 Required	Ensure breaches log is updated to cover all breaches, not just those that are being reported 25/26Q4 -Updated Breach Policy has been approved and Breach Log now includes all breaches. ACTION COMPLETE
6 Reporting payment failures	1 Required	Contribution procedures to be updated to include escalation and eventual reporting to TPR. 25/26Q4 - Now yes - Breach Policy has been approved. The training and Breach Log now include these instances. ACTION COMPLETE

Other Actions

Module	Question	Action
1	No Actions	

Reporting to TPR



Modules

Regular reports

- Registrable information and scheme returns (1)

Whistleblowing - reporting breaches of the law

- Who must report (1)
- Decision to report (1)
- How to report (1)
- Reporting payment failures (1)

Notes:

The numbers next to the module names above set out Aon's interpretation of the Code for Public Service Pension Schemes. Please note it should not be taken as legal advice.

- (1) Applies
- (2) Mostly applies
- (3) Partially applies
- (4) Good practice
- (5) Mostly good practice
- (6) Partially good practice
- (7) Does not apply



The information set out in this report is based on the expectations set out in the Code, compared to your current practice and it is not a regulatory and compliance audit. The information is based on the responses by the Administering Authority to questions set by Aon based on information contained in the Code.

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