

SRA Governance Handbook May 2025

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1 INTRODUCTION

This Handbook is intended to support members of the Board (collectively the "Board") of the Solicitors Regulation Authority Limited (the SRA). It does not in itself establish legally binding obligations, but seeks to ensure good corporate governance by setting out expectations about the role and responsibilities of the Board, and ensuring a common understanding and consistent approach to Board business and governance matters.

The principles set out in this Handbook are underpinned by internal processes and procedures which are documented elsewhere including on the <u>Board pages</u> of our website. In particular Board members should at all times have regard to their obligations as directors of the SRA under relevant legislation, the Articles of Association and, where appropriate, the Principles of the UK Corporate Governance Code.

The Handbook will be kept under review periodically by the Board and updated from time to time by the Board Secretary.

2 ABOUT THE SRA

The SRA is the regulator of solicitors and law firms in England and Wales, protecting consumers and supporting the rule of law and the administration of justice.

We have set out our mission as **driving confidence and trust in legal services.** As the largest UK legal regulator, the SRA has a key role to play in driving the standards and regulation that support public and consumer confidence in legal services and the sector as a whole. Confidence and trust in legal services, delivered through proportionate and targeted regulation, underpin the rule of law and access to justice.

That confidence and trust is not only critical for the users of legal services but also for the reputation and success of the profession and firms, globally as well as domestically.

The SRA does this by overseeing all education and training requirements necessary to practise as a solicitor, licensing individuals and firms to practise, setting the standards of the profession and regulating and enforcing compliance against these standards.

We protect people by:

- making sure all solicitors meet our high standards
- taking action when things go wrong with a solicitor or firm
- paying compensation to people who have lost money due to dishonest or incompetent solicitors
- making legal services more accessible and affordable.

The SRA was established by the Law Society (TLS) to exercise the regulatory powers found in legislation: including the Solicitors Act 1974, the Administration of Justice Act 1985 and the Legal Services Act 2007 (LSA), in the latter of which the TLS is named as an "approved regulator" for the purpose of authorising individuals and firms to carry out certain reserved legal activities. The SRA exercises those



powers under delegated authority, governed by the <u>Law Society's General</u> Regulations.

In 2021 the SRA was incorporated as a Private Company Limited by Guarantee under the Companies Act 2006. The Articles of Association of the SRA regulate the internal affairs of the Company. The directors of the Board are otherwise referred to in this document as Board members.

The LSA also established the Legal Services Board (LSB) as the independent statutory body to oversee the work of the legal sector regulators in England and Wales. The SRA work with the LSB and under its rules, including the Internal Governance Rules 2019 (IGRs) which safeguard the independent exercise by approved regulators of their regulatory functions.

3 ROLES AND RESPONSIBILITIES

3.1 THE BOARD

Role

The purpose of the Board is to provide effective leadership for the SRA, within a framework of prudent and effective controls, to ensure that it discharges its delegated regulatory functions and responsibilities in the public interest. The terms of reference, setting out the functions delegated to the SRA Board, are set out at annex 1. The Board meets around eight times per annum, at least one meeting of which will focus on strategic issues.

Responsibilities

The responsibilities of the Board are to:

- set the SRA's overall mission and values, shaping a positive organisational culture including through regular engagement with a wide range of staff
- provide strategic leadership for the SRA, setting the organisation's strategic objectives
- ensure an appropriate focus on fairness and equality, diversity and inclusion issues, in all the organisation's work
- approve the annual business plan and budget and ensure that the necessary resources are in place in order for the SRA to deliver agreed objectives, and that it secures value for money
- ensure that appropriate systems are in place to monitor progress against the business plan, expenditure against the budget, and the management of risk within the organisation (including setting the organisation's risk appetite)
- set and maintain a framework of delegation and internal control

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- protect the reputation of the organisation
- appoint the Chief Executive
- appoint (and reappoint) Board members and the Board Chair and assist as appropriate with their induction
- decide the total individual remuneration package for the Board Chair
- establish an effective working relationship with the Executive (the Chief Executive and Executive Directors), providing challenge and support where necessary
- ensure that appropriate audit and monitoring systems are in place, to oversee the management and performance of the organisation and hold the Executive to account
- ensure appropriate reporting to demonstrate accountability.

3.2 THE CHAIR

Role

The Board Composition and Appointments Protocol (the "Protocol") (annex 8) sets out the process for appointing and reappointing the Chair of the Board.

The Chair of the Board is responsible for providing strong leadership for the Board, ensuring it works effectively to discharge its functions. The Chair also has an important role in acting as an ambassador for the SRA with external stakeholders, and internally within the SRA.

Responsibilities

The responsibilities of the Chair are to:

- provide strong non-executive leadership
- chair Board meetings effectively, and set an annual work programme with appropriate agendas, to ensure that required decisions are taken
- communicate effectively between meetings to ensure that business is taken forward, and effective contributions made by Board members
- provide feedback and guidance to Board members as part of the process for signing off their appraisals
- promote a culture of openness and debate, encourage effective contributions from Board members, good working relationships and appropriate levels of challenge, ensuring a focus on strategic issues rather than management.

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- establish an effective working relationship with the Chief Executive, and between the Board and the Executive, providing challenge and support where necessary.
- decide on any bonus or incentive payments made to the Chief Executive, having taking soundings from the Board
- appoint chairs and members of committees, boards and working groups, following consultation with the Board
- with the CEO decide the total individual remuneration package for Board members (including any additional provision for the Senior Independent Director and Committee Chairs)
- build and maintain effective relationships with key stakeholders, representing the views and interests of the SRA externally.
- act as an internal ambassador for the Board within the SRA.

3.3 BOARD MEMBERS

Role

As with the Chair, the Protocol at annex 8 sets out the principles determining the composition of the Board and the process for appointing and reappointing the directors, or members, of the Board. The role of Board members is to work collectively to effectively discharge the Board's functions.

Responsibilities

The responsibilities of the Board members are to:

- contribute to setting the strategic direction of the SRA, bringing knowledge and expertise to Board discussions, and demonstrating an understanding of the SRA's functions and the wider regulatory and political environment
- hold the Executive to account for the management and performance of the organisation
- ensure that issues are explored from a range of viewpoints, and with appropriate focus on equality, diversity and inclusion issues
- take an active part in Board and committee meetings, and work effectively with the Executive
- participate in induction, training and appraisal processes
- act as an ambassador for the SRA, representing its views and interests externally
- maintain the confidentiality of SRA information and take all reasonable steps to ensure it is handled in a secure manner.



 uphold the principle of corporate responsibility for Board and committee decisions.

3.4 SENIOR INDEPENDENT DIRECTOR

Role

The Senior Independent Director (SID) is appointed by the Board, to work with the Chair to facilitate the effectiveness of the Board.

The SID will be appointed from amongst the members of the Board for a period of no more than 2 years, and may be reappointed for one or more further terms, up to a total of no longer than their maximum term as a Board member. The SID has specific duties, set out below, in respect of which they are accountable to the Board.

Responsibilities

The responsibilities of the SID are to:

- undertake the appraisal of the Chair
- support the Chair and Board in relation to Board effectiveness
- carry out ad hoc investigations as requested by the Chair to handle complaints about Board members
- as the Senior Designated Contact, investigate whistle blowing claims relating to the Chief Executive a member of the Senior Management Team or a member of the Board
- be available to Board members and the Executive if they have concerns which have not or cannot be resolved through contact with the Chair and/or the CEO, or for which such contact may not be the most appropriate route
- be available to stakeholders, should there be any issues relating to the Board Chair, Board members or Executive that cannot be resolved in other ways
- have responsibility for succession planning for the Board Chair (which should be aligned with succession planning for the Chief Executive), including leading on appointment
- ensure that appropriate induction is provided for any new Board Chair
- support the Board Chair through discussions ahead of annual appraisal meetings with Board members and by holding regular meetings with the Board Chair and CEO to consider current issues
- conduct exit interviews with outgoing Board members
- normally be appointed as Chair of the Remuneration Committee.



3.5 COMMITTEES AND COMMITTEE CHAIRS

The Board has three committees to assist in carrying out its business: Audit and Risk Committee; Nomination Committee; and Remuneration Committee. The purpose of these committees and their terms of reference are set out at annex 2 and on the Board pages of our website.

Committee chairs shall be appointed by the Chair, following consultation with the Board, from amongst the existing members of the Board. The term of office is to be agreed between the Board Chair and (prospective) Committee Chair.

Committees may include co-opted external advisory members, who shall be appointed via a process to be agreed by the Chair in discussion with the Chair of the Committee.

Responsibilities of Committee Chairs

The responsibilities of the Committee Chairs are to:

- provide strong leadership and direction to the committee, ensuring that it fulfils its purpose effectively, in accordance with its terms reference
- agree the Committee's work programme, which is to be shared with the Board at each meeting
- agree the confidential minutes of each meeting for approval by the Committee, which are circulated to the Board
- report on committee business to the Board, and ensure that appropriate matters are referred for consideration by the Board
- promote a culture of openness and debate, encouraging effective contributions from and good relationships between members of the Committee and the Executive
- establish a good working relationship with the appropriate lead Executive
 Director for the committee, providing challenge and support where necessary.

3.6 WORKING GROUPS

Where there is a clear rationale for doing so, the Board may establish a working group with a specific and time limited remit. This might for instance be appropriate where an issue new to the organisation arises in which some Board members have a particular interest or expertise. Or a working group might be established when a subset of Board members have particular knowledge or expertise that the Executive would like to draw on in preparing proposals for the Board.

Working groups can give Board members and executives the time and opportunity to focus, creating capacity in the schedule for the Board and ensuring appropriate input from those with specific relevant knowledge and experience. They can also provide an additional layer of challenge and oversight, reporting into the Board.

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Working groups will be made up of a small number of Board members (usually three or four) with a Chair appointed by the Board Chair and support from the Executive agreed with the CEO.

Terms of reference should be produced for any working group established and should include:

- the roles of the members of the group, if appropriate
- which decisions the group will bring as proposals to the Board and which it may take itself
- how often the group should report to the Board on progress
- what the maximum expected term for the group should be, beyond which the matter should revert to the Board unless it agrees an extension.

4 HOW WE WORK

4.1 Our Values

Our values represent how we interact with others, whether that be a member of the public, a solicitor, or a colleague within the organisation. Board and Committee members, including external advisers, are expected to lead by example in upholding these values. Our values are:

1 Proactive:

We think ahead and take action to help us to help others.

2 Inclusive:

We treat people fairly, valuing differences and respecting everyone as individuals.

3 Accountable:

We take ownership for delivering our work.

4 Customer focused:

We put our customers* at the heart of everything we do, working to understand and respond to their needs.

4.2 Equality, diversity and inclusion

We are an organisation where diversity is valued and we are committed to working in an inclusive way. Similarly, we aim to treat those we regulate fairly, in line with our Public Sector Equality Duty, and, giving regard to the relevant regulatory objective in the Legal Services Act 2007, to encourage a strong and diverse profession where all have an opportunity to succeed.

The Board always considers the EDI impact of any recommendation put before it: An analysis of any equality impacts can be found in each Board paper, and the supporting information section carries details of any engagement with any individuals or groups potentially affected.

^{*}Our customers are the public, the legal profession, our colleagues at the SRA and all of our stakeholders.



4.3 Board member conduct

Board members have a duty to subscribe to the Nolan principles of selflessness, integrity, objectivity, accountability, openness, honesty and leadership. They should lead by example in demonstrating good corporate governance - being open, transparent and accountable.

A <u>register of interests</u> will be held and published by the SRA. Board members have a duty to complete and maintain their entry in the register of Interests, and declare any professional, business, or personal interests which may, or might be perceived to, conflict with their responsibilities as Board members. Board members should disclose the existence and nature of any personal interest or conflict that they may have in any business being discussed at a Board or other meeting by contacting the relevant Board or Committee Secretary in advance. If the existence of such an interest becomes apparent during the course of the meeting, he or she must disclose it as soon as it does so.

Board members must abide by the policies that apply to their role (at annex 3) and adhere to the Code of Conduct for SRA Board and Committee members (at annex 4). Board members must notify the Board Chair promptly if they believe that they may have been in breach of any policy of the Code of Conduct.

The protocol at annex 5 contains provisions for handling concerns about the conduct of members of the Board and set out procedures for dealing with any complaints that cannot be dealt with informally.

Board members must comply with any request to complete forms and declarations requesting information necessary for the completion of accounts or to submit insurance renewal declarations.

Board members have a duty to distinguish clearly, when speaking or writing, between views held by themselves personally (or of any other organisation they may be affiliated with) and those of the SRA. Any communication with the media which relates to our work, including publication of views via the internet or by other means, should be discussed with the External Affairs team before publication, and the SRA's corporate views and interests represented. Similarly, invitations to speak on behalf of the SRA should be discussed with the External Affairs team before they are accepted.

Board members and external advisers to committees are expected to adhere to the following behaviours at Board and committee meetings:

- Attend and take full part in Board/committee meetings as set out in their contract.
- Prepare well for meetings.
- Give the meeting their full attention.
- Make concise and timely contributions, raising issues wherever possible before meetings with the Chair or the Executive, to aid constructive debate at meetings.



- Express a range of views but seek to build consensus wherever possible.
- Listen to and respect the contributions of others.

Guidance for Board members if complainants contact them or their employers is at annex 9.

4.4 Decision making

The quorum of the Board shall be 5.

The Board takes decisions by simple majority, although seeks to achieve consensus wherever possible. The Chair has the casting vote where necessary.

Decisions are generally made and recorded at Board meetings which will take place face to face or virtually. On exceptional and urgent occasions when this is not possible, a decision may be taken by email.

Minutes of meetings will be "Cabinet Style" and will record the subject under discussion and decision reached by the Board or its agreed course of action. Individual comments will not usually be recorded and individual views will not generally be attributed unless members specifically request that their differing views are recorded Notes of the discussion and contributions made by individual Board members will in any case be kept internally where there is a range of views and/or the decision was not reached by consensus.

In accordance with paragraph 7.7 of the guidance to the IGRs, if a decision on regulatory functions is taken at a meeting where there is either not a lay majority or not a lay chair (or both) present, this decision must be ratified either at a meeting or by correspondence (if sooner) by a lay majority and a lay chair. In practice, this will generally be effected through formal ratification of the minutes by email circulation.

If at any time, due to a casual vacancy, the Board does not comprise a majority of lay directors and a decision on regulatory functions is to be taken at a meeting where there is no lay majority, it would not be possible for the decision to be ratified by a lay majority. The most recently appointed solicitor member(s) will therefore be permitted to attend the meeting at which the decision is taken but will be asked to stand down for that decision.

Similarly, if at any time due to a casual vacancy the Board does not comprise a majority of lay directors and a decision on regulatory functions is to be taken by email, the most recently appointed solicitor member(s) will be asked to stand down for that decision.

The SRA has in place a Delegation Framework (at annex 6) which sets out how the Board, committees and Executive work together to discharge the SRA's functions. Further, responsibility for specific matters or decisions may be delegated to individual Board members, committees or working groups as the Board considers fit.



5 BOARD AND MEMBER PERFORMANCE

5.1 Board Effectiveness

Board members are encouraged to recommend to the Chair improvements and changes in governance arrangements and ways of working at any time.

At least once every three years, an independent review of aspects of the Board's governance arrangements shall take place, to benchmark them against working practices of other similar organisations. The Board will also formally review its own effectiveness at least once a year.

5.2 Appraisal of the Chair and Board/Committee members

The Chair has an annual appraisal that is conducted by the SID in accordance with the procedure set out in annex 7.

The appraisal will include a formal appraisal meeting, guided by feedback from Board members, the Executive and any external stakeholders as the SID considers appropriate. The SID shall decide what feedback, if any, should be reported back to the Board on the outcomes of the appraisal.

Appraisals of individual Board members will be conducted annually by the Chair in accordance with the procedure set out in annex 7.

6 BOARD MEMBER RECRUITMENT

6.1 Appointment and reappointment

Under rule 4(2)(a) of the IGRs the SRA as the regulatory body must determine its own governance, structure, priorities and strategy. Rule 8 provides that it is for the SRA as the regulatory body to independently appoint, appraise, remunerate and terminate the members of its board. These matters are governed by Article 5.2 and the protocols at annexes 5 and 8.

6.2 Induction

All Board members have an induction, which includes:

- undertaking a Director's Training Programme
- a session on equality and diversity
- meetings with members of the Executive.

6.3 Succession Planning

Nomination Committee will develop and maintain a succession plan that provides a framework for identifying and sourcing potential Board members to meet the future needs of the Board, and that supports the development of internal capability (for example, identifying future Committee Chairs) and the recruitment of new members to the Board. Nomination Committee will also ensure, with the SID, that succession planning takes place for the Board Chair.



A skills audit review will be undertaken to take into account the current and future needs of the Board. This will generally be conducted bi-annually. However, flexibility is needed so these can inform recruitment campaigns for new Board and committee members.



Annexes

| Annex 1 | Solicitors Regulation Authority Board terms of reference |
|---------|---|
| Annex 2 | Committee terms of reference |
| Annex 3 | Policies applying to SRA Board member role: |
| | Directors Expenses Policy |
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Terms of reference of the SRA Board (extract from The Law Society Group General Regulations)

Terms of reference of the SRA

- 23 The terms of reference of the SRA are –
- (1) To exercise the regulatory functions of the Society or the Council under the following primary or secondary legislation:
 - (a) the Act;
 - (b) the Administration of Justice Act 1985:
 - (c) the Courts and Legal Services Act 1990;
 - (d) the Access to Justice Act 1999:
 - (e) the 2007 Act;
 - (f) the European Communities (Services of Lawyers) Order 1978; and
 - (g) the European Communities (Lawyer's Practice) Regulations 2000.
- (2) To deal with all matters relating to monitoring, securing or enforcing compliance by regulated persons with requirements imposed by primary or secondary legislation, including for the avoidance of doubt rules, regulations and guidance made by the SRA or its predecessor, the SRA Board.
- (3) To deal with all proceedings before the Solicitors Disciplinary Tribunal, and all litigation arising from such proceedings.
- (4) To deal with all matters relating to the Compensation Fund, including the financial management of that Fund, and setting the respective amounts which should be payable as levies by such categories of solicitor or firm as the SRA shall define for that purpose.
- (5) To exercise the powers of the Society and of the Council on all primary and secondary legislation on all matters within its terms of reference.
- (6) Subject to the responsibilities of the Board and the Council in relation to practising fees set out in regulation 19(2)(B)(3)
 - (a) to set and amend from time to time the level of fees and charges payable in relation to the discharge of its functions;
 - (b) to determine, in relation to the proportion of practising fees to be applied for permitted purposes relating to regulatory functions delegated to the SRA under these Regulations and the payment of statutory levies including under section 173 of the 2007 Act, the respective amounts that should be payable by particular categories of solicitor and firm; and
 - (c) following notification from the Council of the sum required for permitted purposes relating to representative functions, to make applications on behalf of the Council to the Legal Services Board under section 51(5) of the 2007 Act for approval of practising fees.

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- (7) To set, implement and review policy and guidance, and to respond to consultations, on matters within its terms of reference.
- 8) To deal with any actual or forthcoming litigation directly arising from
 - (a) regulatory or disciplinary decisions;
 - (b) any legal challenge to the validity of any exercise of its functions; and
 - (c) any other matter related to the discharge of its functions.
- (9) To make representations to, be consulted by and enter into communications with, amongst others, the Legal Services Board, the Legal Services Consumer Panel, the Legal Ombudsman and other approved regulators.
- (10) To investigate and prosecute offences under any enactments, subordinate legislation, rules, regulations or other provisions mentioned in this Regulation and to pursue any ancillary activity such as enforcement or recovery of penalties and costs.

Audit and Risk Committee terms of reference

Purpose:

The Audit and Risk Committee is a committee of the board of directors of the SRA (the Board).

The Board has overall responsibility for the company's strategic risk register, approach to risk management and internal control environment, as well as its budget, financial performance, value for money and efficiency.

The role of the Audit and Risk Committee is to provide assurance to the Board on matters within its terms of reference, including:

- The effectiveness of systems to identify and manage risk.
- o The effectiveness and independence of the internal and external audit processes.
- The effectiveness of systems of internal control
- o The integrity of the company's financial statements and management accounts.

In carrying out its role the committee shall ensure that it is promoting best practice in accordance with the UK Corporate Governance Code, as published from time to time.

The committee's work is dependent on frank, open and respectful relationships with the Board, the executive and with internal and external auditors. In turn, all parties must be prepared to make information freely available to the committee, and to talk through issues openly.

The committee is authorised by the Board to obtain, at the organisation's expense, outside legal or other professional advice on any matters within its terms of reference.

Duties

Risk Management

- To review the processes in place to provide assurance that:
 - Strategic risks are appropriately captured
 - Effective mechanisms for the management of risk are in place

External audit

- to oversee the selection process for the company's external auditor
- make recommendations to the Board regarding the appointment, reappointment and removal of the external auditor and their remuneration
- to agree, before each audit commences, the nature and scope of the audit
- to assess annually the qualification, expertise and resources, and independence of the external auditor
- to assess annually the effectiveness of the audit process
- to review the external auditor's management letter and management's response

Internal controls and internal audit

• to review the effectiveness of the SRA's internal control environment

- to monitor and review the effectiveness and independence of the internal audit arrangements including:
 - o approving the internal audit coverage and plan annually
 - reviewing all internal audit reports relating to the SRA, and monitoring implementation of agreed actions arising from such reports
 - ensuring that the internal auditor has direct and where appropriate private access to the committee
- to review anti-fraud, bribery and whistleblowing policies and to ensure effective arrangements are in place to investigate any reports of financial impropriety or otherwise made under those policies

Financial Reporting

 to review the actions and judgements of management in relation to the annual financial statements, including critical policies and practices and compliance with accounting standards

Ensure that the systems for financial reporting to the Board, including budgets and long-term financial plans are subject to review as to completeness and accuracy.

Decision-making

The committee will normally meet four times a year.

The Committee shall be comprised of four members who shall be members of the SRA board, and shall generally sit with the Chief Executive of the SRA and its Executive Director of Resources in attendance.

Quorum for the committee is two members.

Review

The committee shall, at least annually, review its own performance, constitution and terms of reference and recommend any changes it considers necessary to the Board for approval.

Reporting

The committee shall provide an annual report to the Board on the work it has carried out in the period, and the results of its review of its performance, constitution, and terms of reference as above.

The committee shall provide a description of its work in the annual report, including information in line with legal and regulatory requirements.

A summary of this report will be included in the annual report and accounts.



Nomination Committee terms of reference

Purpose

The Nomination Committee is a committee of the Board of Directors of the SRA (the Board).

The role of the Nomination Committee is to oversee and advise the Board on matters relating to the appointment, reappointment and removal of non-executive directors and the Chief Executive and the effectiveness of the Board.

Policies should be designed to promote the values and standards of the organisation and to support the sustainable delivery of its strategic objectives.

Duties

Recruitment and reappointment

- to oversee the policies and processes for the appointment, reappointment and removal of non-executive directors and the Chief Executive Officer including:
 - to advise the Board on the selection criteria for non-executive director and Board Chair appointments
 - to advise the Board on the reappointment of non-executive directors
 - to advise the Board on the design and administration of the process for the appointment of the Chair
 - to advise the Board on the design and administration of the process for the appointment of the Chief Executive.
 - to advise the Board on convening an appointment panel as required for nonexecutive director, Chair and Chief Executive Officer appointments.

Succession planning

- to ensure that succession planning takes place for the Board Chair and Board members and to review these plans
- to ensure that an assessment of talent management and succession planning has taken place for the Chief Executive and the senior management team and review these plans.

Board evaluation

- to oversee evaluation of the Board's effectiveness programme and implementation of any changes
- to oversee the Board training programme.

Decision-making

The Committee shall normally meet up to four times a year.

The Committee shall comprise four members including the Board Chair and, normally, the Chairs of the Remuneration (who will normally be the Senior Independent Director) and Audit and Risk Committees. One member should be a solicitor member of the Board. It shall generally sit with the Chief Executive of the SRA and its Executive Director of Resources in attendance.



Quorum for the Committee shall be three members. If it is not possible for the Committee to sit with three members, decisions can be taken in principle at the meeting if ratified by a third member afterwards.

Review

The Committee shall, at least annually, review its own performance, constitution and terms of reference and recommend any changes it considers necessary to the Board for approval.

Reporting

The Committee shall provide an annual report to the Board on the work it has carried out in the period, and the results of its review of its performance, constitution, and terms of reference as above. The Committee shall provide a description of its work in the annual report, including information in line with legal and regulatory requirements.

A summary of this report will be included in the annual report and accounts.



Remuneration Committee terms of reference

Purpose

The Remuneration Committee is a committee of the Board of Directors of the SRA (the Board).

The role of the Remuneration Committee is to advise the Board on policies relating to the remuneration of non-executive Board Members, the Executive Team and the wider workforce.

Policies should be designed to promote the values and standards of the organisation and to support the sustainable delivery of its strategic objectives.

For the avoidance of doubt, neither the Board Chair nor any other director, will be involved in decisions which relate solely to their individual remuneration package. To the extent that Committee members are involved in discussions or decisions regarding policies or processes which affect their role or remuneration, these must be objective and evidence-based and reasons must be fully reflected in the minutes.

Duties

Remuneration, terms and conditions of the Board of Directors

- to determine and to keep under review the policy for Board directors' remuneration
- to advise the Board on the total individual remuneration package for the Board Chair
- to advise the Board Chair and CEO on the total individual remuneration package for non-executive directors (including any additional provision for the Senior Independent Director and committee Chairs)
- to determine the performance management and appraisal framework for Board directors.

Remuneration, terms and conditions of the Executive

- to determine the pay policy, terms and conditions and remuneration framework for the Chief Executive and the senior management team and ensure that they are consistent with those for the wider workforce
- to agree the remuneration of the CEO and review the remuneration of new members of the senior management team with the CEO
- to determine the performance management and appraisal framework for the Chief Executive and senior management team, and ensure that any award of bonus and incentive payments take place within the agreed framework.

Remuneration of the wider workforce

- to review the policy for workforce remuneration to ensure consistency with our strategy and values
- to review the annual gender and ethnicity pay gap reports
- to review the organisation's EDI policy and actions to ensure that they are consistent with its strategy and values.



Decision-making

The Committee shall normally meet up to four times a year.

The Committee shall be comprised of a minimum of three members who shall be members of the SRA board, and shall generally sit with the Chief Executive of the SRA and its Executive Director of Resources in attendance.

Quorum for the Committee shall be three members. If it is not possible for the Committee to sit with three members, decisions can be taken in principle at the meeting if ratified by the third member afterwards.

Review

The Committee shall, at least annually, review its own performance, constitution and terms of reference and recommend any changes it considers necessary to the Board for approval.

Reporting

The Committee shall provide an annual report to the Board on the work it has carried out in the period, and the results of its review of its performance, constitution, and terms of reference as above. The Committee shall provide a description of its work in the annual report, including information in line with legal and regulatory requirements.

A summary of this report will be included in the annual report and accounts.



Directors Expenses Policy
Finance
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Policy statement

- 1.1 The policy of the Solicitors Regulation Authority Limited (SRA) is to reimburse Directors of the Board for expenditure incurred (in accordance with this paper) by reason of the performance of their duties as a Director.
- 1.2 This policy is applicable to the Solicitors Regulation Authority Board and specifically the non-executive Directors of the Solicitors Regulation Authority Limited.

Purpose

- 2.1 Only costs incurred solely for SRA business purposes can be claimed as expenses.
- 2.2 Before committing to any expenditure which will be reimbursed under this policy, Directors are asked to consider:
 - a) Value for money when committing to expenditure
 - b) If there is a need to travel or whether more sustainable options can be used in line with our environmental commitments
 - c) Claims should be submitted within 3 months of incurring the expenditure to the Board Secretary including any evidence to support the claim.

Scope

3.1 This policy applies to all Directors of the Solicitors Regulation Authority Limited.

Policy

- 4.1 Subsistence
- 4.1.1 Maximum reimbursement for subsistence where engaged in SRA business away from the normal place of work is:

| Meal | Maximum reimbursement (in London) | Maximum reimbursement (outside London) |
|-----------------------|---|--|
| Breakfast | £10.00 | £10.00 |
| Lunch | £15.00 | £10.00 |
| Dinner (evening meal) | £30.00 | £25.00 |

4.1.2 Alcohol as part of a subsistence expense cannot be claimed. When claiming for external entertaining alcohol with a meal may be claimed but kept to a minimum.

4.2 Overnight Accommodation

4.2.1 Overnight accommodation should normally be booked by the SRA. In the event that it is necessary to book direct, maximum reimbursement for overnight accommodation where engaged in SRA business:

| | Maximum reimbursement (in London) | Maximum reimbursement (outside London) |
|----------------------------|---|---|
| | £280 inclusive of dinner, breakfast and VAT | £230 inclusive of dinner, breakfast and VAT |
| Overnight Accommodation | £250 inclusive of breakfast and VAT | £200 inclusive of breakfast and VAT |
| | £240 room only including VAT | £190 room only including VAT |

4.2.2 There are no specific rates advised for overnight accommodation costs incurred outside of the UK, instead Directors are encouraged to keep their claims for these costs to a reasonable level. As there are no specific rates advised, overseas accommodation costs will be monitored. Finance can provide advice on what constitutes a reasonable level of expense.

4.3 Motor Car Expenses

4.3.1 Maximum reimbursement for motor car expenses where engaged in SRA business in line with HMRC approved mileage rates:

| | Amount per mile | Amount per mile |
|-----------------------|--------------------------------|-----------------------|
| Motor car of any size | 45p for the first 10,000 miles | 25p over 10,000 miles |

4.3.2 Car parking charges and charges incurred in relation to driving a motor vehicle (for example, congestion charges and tolls) can be reimbursed provided a receipt is attached. Consideration should be given to obtaining receipts where payment is taken electronically as a receipt is still required.

4.4 Taxis

4.4.1 Public transport is encouraged wherever practical. The cost of taxis from a tube or train station to a primary office or meeting venue can be reclaimed in circumstances where public transport is not a reasonable alternative.

4.5 Public Transport

4.5.1 Receipts are not required for claims which are less than £5. Claims over £5 will require a voucher / receipt.

4.6 Rail

4.6.1 Directors may travel by first class rail travel where necessary, for example to allow work to be completed while travelling. Directors are however asked where possible to take advantage of advance booking discounts, and to use standard class travel where they can conveniently and comfortably do so. Rail cards are not a reimbursable expense as they are not regarded by HMRC as solely for business purpose.

4.7 Air Travel

- 4.7.1 Air travel should be agreed with the SRA before being committed to and should normally be booked by the SRA. It may be preferable, to minimise our environmental impact to use suitable practical alternatives, including virtual attendance at events or use of trains for any UK travel.
- 4.7.2 Air fares necessarily and wholly incurred on SRA business will be reimbursed at economy class rates only, unless the standard flight time is greater than five hours, in which case fares can be claimed at business class rates.

4.8 Attendance at International Engagements

4.8.1 Directors must submit a receipt for any purchase of foreign currency or purchases made in a foreign currency so that they may be reimbursed at the rate incurred. If no exchange rate support is available the expenses will be reimbursed using the exchange rate for that day as published on the Bank of England website.

4.9 Observing Meetings

4.9.1 Expenses incurred by Directors attending (as observers) meetings of Committees of which they are not members may be reimbursed.

4.10 Care Provision

- 4.10.1 Care provision of a maximum of £60 per day may be reimbursed where a Director is deemed to have caring responsibilities.
- 4.10.2 A Member is deemed to have caring responsibilities if they can provide documentation to confirm that they:
 - a) have parental responsibility for a dependent child of up to the age of 16, or up to the age of 18 in full time education; or,
 - b) are the sole carer for a dependent child in full-time education of up to the age of 21 years; or.
 - c) are the primary carer for a family member in receipt of one of the following benefits:
 - i. Attendance Allowance
 - ii. Disability Living Allowance at the middle or highest rate for personal care

- iii. Constant Attendance Allowance at or above the maximum rate with an industrial Injuries Disablement Benefit, or basic (full day) rate with a War Disablement Pension.
- 4.10.3 The reimbursement of care provision costs is a taxable benefit and will be included on the member's P11D.

4.11 Gratuities and discretionary service charges

4.11.1 Claims for discretionary gratuities and service charges will be reimbursed as long as the total expense is within the above limits and the tip itself is not excessive.

Definitions

A **Director** is a non-executive Director of Solicitors Regulation Authority Limited.

An **expense** is the cost incurred in or required for something.

To be **reimbursed** means to be repaid or compensated for money already spent.

Responsibilities

6.1 Directors are responsible for submitting claims for expenses in a timely manner. Finance is responsible for monitoring and processing claims.

Monitoring and review

7.1 This policy will be reviewed every 2 years at a minimum, or as required in line with any changes to relevant legislation, regulation or best practice, or changes to the organisation. Alternatively, an early review of the policy will be undertaken where necessary following an audit, serious events review or Board feedback. Further to review it will be updated to take into account experience gained from its operation and from good practice. Significant revisions of this policy will be brought before the SRA Board for approval.

Key controls

8.1 Below is a summary of key controls which have been identified as the minimum requirements to be carried out in order to comply with the policy.

| No. | Control | Details | Frequency | Owner |
|-----|---|---|------------|-----------------|
| 1. | Claims are signed off by Board Secretary | Checked and reviewed by Board Secretary before being passed for payment | All claims | Board Secretary |

| 2. | Finance | All claims checked for receipts and supporting information | All Claims | Director of Finance |
|----|---------|--|------------|---------------------|
|----|---------|--|------------|---------------------|

Policy information

Information relating to the ownership and development of this policy have been provided below should there be any queries or concerns to be reported. It is important that the last review date, as shown below, is checked to make sure the correct version of the policy is being referred to.

Version control:

| Version no. | Updating officer | Review date | Approval date | Key changes |
|-------------|------------------|----------------|---------------|---|
| 1.0 | David Adams | August 2023 | [dd/mm/yy] | Updated following Solicitors Regulation Authority Limited being established with comments from Chair and Exec Director Resources and Operations |

Responsible business unit: Finance

Approving authority: SRA Board

Policy owner: Director of Finance and Procurement

Security classification: GENERAL

Subject-Matter: Finance Management

Audience: Directors, Staff

Key terms: travel, expenses, reimbursement, costs, charges, Member, Board and Committee

Members

Contact details:

Solicitors Regulation Authority (SRA) The Cube, Birmingham 199 Wharfside Street Birmingham B1 1RN

Email: SRA.Finance@sra.org.uk

Legal framework:

N/A

Referenced documents:

Directors Expenses Claim Form (see Annex 1)

Related training:

N/A

Useful contacts:

Finance and Business Planning Team

Email: SRA.Finance@sra.org.uk

Sensitivity: General

Annex 1

Directors' Expenses Claim Form

Original, itemised and dated receipts must be attached to all claims which must be returned to the SRA Board Secretary within 3 months of the date on which the claim arose. Claims received after this time will not be reimbursed.



| Name: | | | Title: | | | | | |
|-------|-----------------------------------|--|--|----------|--------------|---------------|---------|----------|
| Date | Time leaving home (if applicable) | Time arriving home (if applicable) | Title of Engagement/ Purpose of engagement | Location | Expense type | Amount (£) | VAT (£) | Total (£ |
| | | | | | | | | |
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| | | | | | | £ - | £ - | £ - |

| I certify that the expenses claimed above have been actually and necessarily incurred in the performance of official SRA duties in accordance with the approved Directors Expenses Policy | | Authorised Bu Name: | ndget Signatory – | |
|---|--|------------------------|-------------------|--|
| Signature: | | Signature: | | |
| Date: | | Date: | | |



Anti-Bribery and Corruption Policy
Finance and Business Planning
December 2019

GENERAL

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1. Policy statement

- 1.1 Here at the Solicitors Regulation Authority (SRA) we recognise the importance of being transparent in the performance of our business, and for individuals to be accountable for business transactions undertaken when representing the organisation. We are therefore committed to ensuring that business transactions are carried out with integrity in accordance with the provisions set out in the Bribery Act 2010.
- 1.2 In demonstration of our commitment to the Act, we have developed this policy which sets out our zero-tolerance approach to the making and receiving of bribes and corruption payments. It seeks to address the risks involved in the exchange of gifts, sponsorships and hospitality, and provides safeguards to mitigate such. In support of the policy we have put in place a *Due Diligence Form* which must be completed prior to the undertaking of business transactions to make sure the making or receiving of any gift, sponsorship or hospitality will not influence, or be perceived to influence, the outcome. We have also put in place a *Gift and Hospitality Declaration Form* and a central *Gifts and Hospitality Register* for maintaining an adequate record of all gifts, sponsorships and hospitality given or received, which is monitored.
- 1.3 It is expected that this policy be adhered to, both in wording and spirit, by all staff and members of the SRA Board and Committee. In doing so, all individuals are required to make themselves familiar with the guidelines of this policy with respect to the assessing of potential risks and the declaring of any gifts, sponsorship and/or hospitality offered to, or by, a third party. Failure to do so will be considered a breach of this policy and may result in disciplinary action being taken. Anyone suspected of bribery or corruption in direct contradiction to the requirements of this policy should be reported in accordance with the Whistleblowing Policy. Any difficulty experienced with the application of this policy should be reported to the Head of Finance and Business Planning.
- 1.4 To help make sure staff are aware of this policy and to encourage compliance, communication and training, as deemed appropriate, will be provided by the organisation. Compliance with this policy, will be monitored by the Finance and Business Planning Team and will be reported to the SRA Finance and Audit Committee (FAC) along with all offers of gifts, sponsorships and hospitality made or received (including details of those who have not made a declaration as required). Spot audits of risk assessments will also be carried out by the Risk Audit Team. This policy is championed by the Executive Director of Resources, in recognition of its importance.

2. Purpose

- 2.1 The purpose of this policy is to set out the business transactions which could put the organisation at risk of bribery or corruption, and the arrangements in place for assessing and mitigating such risks.
- 2.2 It is intended that this policy will help individuals to avoid committing an offence of bribery. It also aims to make sure individuals are accountable for business transactions

undertaken on behalf of the organisation and the organisation remains transparent in the performance of its business.

3. Background

- 3.1 The Bribery Act which came into force on 1 July 2011, makes it an offence for a citizen or resident of the United Kingdom (UK) to pay or receive a bribe, either directly or indirectly. An offence occurs if there is an offer, promise or giving of an advantage in return for performing a relevant function improperly (see <u>Definitions</u>).
- 3.2 Commercial organisations can commit an offence of bribery by trying to gain or retain a business advantage when undertaking transactions with a third party (see Definitions). A corporate entity can also commit an offence where a bribe has been paid by an individual providing services on their behalf (ie an employee, business partner or agent). Where an offence has been committed by a corporate entity and the transaction has been approved by a senior officer in the organisation, that senior officer can also be held liable for the offence.
- 3.3 Business transactions likely to give rise to a higher risk of bribery and corruption under the Bribery Act include:
 - facilitation payments (see 5.5)
 - political contributions (see 5.6)
 - charitable giving (see 5.7)
 - sponsorships (see 5.8)
 - employment opportunities (see 5.9)
 - gifts and hospitality (see 5.10 and 5.11)

It is important to note that gifts, sponsorships and hospitality are not prohibited by the Bribery Act if designed to cement good relations or meet a social purpose; however, the giving of such should be appropriate and more importantly transparent. Similarly, employment opportunities are acceptable, provided the offering of the opportunity is on merit following the execution of a formal recruitment process. It is therefore important that the risk of inflated payments, 'front organisations' and conflicts of interest (see Definitions) are adequately mitigated against. Facilitation payments, however, are a form of bribery.

3.4 As an organisation we may from time-to-time engage in hospitality with established business partners and suppliers, whether it be offered to or by us, for the purpose of cementing good business relations. Similarly, the SRA may from time-to-time provide monetary donations, use of venue or personnel time in sponsoring an event or initiative, which seeks to meet our corporate objectives to work more effectively with our external stakeholders. This may include making payments to political parties, in their capacity as a supplier contributing to public policy debates linked to our policy development and external engagement work (eg covering the cost of passes for a political party conference). It is important to make clear however, that whilst we do

liaise with government and public officials to improve our responsiveness and regulatory functions in the context of constitutional developments, as an organisation we do not make any political contributions, neither do we make facilitation payments of any kind as we maintain a strict policy of political neutrality. With respect to employment opportunities, we maintain a strict equal opportunities policy (see our *Diversity and Inclusion Policy*) and follow a rigorous recruitment process (see our *Recruitment and Selection Policy*). We also engage in charitable giving to a chosen charity which is selected through the voting of staff, following a submission of suggested charities by the staff population every two years to our Staff Forum, which is made up of representatives across the organisation.

3.5 Any hospitality, sponsorship or donation given or received, must be assessed and declared in accordance with the requirements of this policy (see section 7) and where applicable, in accordance with our *Travel and Subsistence Policy*. All attendance at external events, speaking engagements, procuring of suppliers, and recruitment must be considered and recorded in accordance with the relevant policies.

4. Scope

- 4.1 This policy covers the giving or receiving of any gift, sponsorship or hospitality by any individual working for or on behalf of the SRA. Such individuals include staff (ie permanent and fixed-term contract staff members, agency workers and contractors) at any level of the business and extends to members of the SRA Board and Committees.
- 4.2 Any actual or perceived conflict with the Bribery Act will be considered a breach of this policy. For example, the giving or receiving of gifts, support or hospitality (including the paying of expenses) which might influence, or be perceived to influence, a business decision is prohibited by this policy.
- 4.3 This policy will replace the previous *Gifts and Hospitality Policy*, however retrospective giving or receiving of any gifts, hospitality and sponsorship within the 30 days prior to this policy coming into force will be subject to this policy with respect to the declaring and recording of such.
- 4.4 It is advised that this policy is read in conjunction with the *Travel and Subsistence Policy* for additional guidelines regarding the paying of expenses and entertaining of third parties. Reference should also be made to the following:
 - Procurement and Contract Management Policy with respect to engaging and selecting potential suppliers of goods, works or services
 - Recruitment and Selection Policy and Work Experience Policy with respect to the offering of employment and work experience opportunities.

5. Definitions

5.1 An **offence of bribery** is defined, according to the Bribery Act, to be one of the following:

- bribing a person to induce or reward them to perform a relevant function improperly
- requesting, accepting or receiving a bribe as a reward for performing a relevant function improperly
- using a bribe to influence a foreign official to gain a business advantage.

NOTE: For a prosecution to be brought that there must be intention to induce improper performance of a relevant function for a prosecution.

- 5.2 A **relevant function** is an activity that should be carried out in either good faith, impartially or by a person in a position of trust (eg a public official). NOTE: Bribery of a foreign official does not have to be for the improper performance of a function to constitute an offence. The act of <u>attempting</u> to influence a foreign official is an offence in itself.
- 5.3 To "offer", "promise" or "give" a gift, hospitality or sponsorship which might influence, or be perceived to influence, a business decision has a wide meaning and includes an inference to do such. For example, the holding of a meeting over an open briefcase full of money would be considered to infer an implied offer of a gift and therefore an act of bribery.
- Third party is any individual or organisation external to the business involved in the transaction, irrespective of whether there is an existing, potential or prior relationship (eg business partners, suppliers, customers, government and public bodies including their advisors and officials). NOTE: Third party includes previous and existing contractors working on behalf of the organisation.
- 5.5 **Facilitation payments** (also referred to as "speed payments" or "grease payments") are financial payments made to secure or expedite the performance of a routine or necessary action of a public official to which the person paying has legal or other entitlement.
- 5.6 **Political Contributions** are donations (eg monetary gift, campaign sponsorship, membership subscription, payment of expenses, or provision of property, facilities or services) made to any political party, organisation or independent election candidate:
 - registered under the Political Parties, Elections and Referendums Act (PPERA)
 2000
 - which undertakes, or proposes to undertake, activities for the purposes of or in connection with the participation of the party in any election(s) to 'public office' in any other EU Member State
 - which undertakes, or proposes to undertake, activities that are capable of being reasonably regarded as intended to affect public support for a political party / independent candidate, or influence voters in relation to any national or regional referendum held under UK or any other EU Member State laws.

NOTE: Some donations such as the hiring of a stand (provided they do not exceed a rate determined reasonable by the Electoral Commission) or payment of admission fees at a political party conference does <u>not</u> constitute as a contribution for the purposes of PPERA. Similarly, commercial rate payments for advertising (unless it helps meet the costs of the event) will <u>not</u> count as a political contribution but may be considered as a gift.

- 5.7 **Charitable giving** is a donation (whether it be money, equipment, personnel time, use of venue, or other benefit-in-kind) to a non-profit organisation or charity. NOTE: Charitable giving includes donations to an individual or organisation nominated by or connected with a charity (eg a child nominated by Make-A-Wish Foundation).
- 5.8 **Sponsorship** involves the provision of financial funding or an in-kind benefit (eg use of facilities or resources) in aid of an event or initiative (eg building of a school or hospital). NOTE: Sponsorships usually have a political or social purpose.
- 5.9 **Employment opportunities** in the context of bribery is where an organisation offers employment to an individual who is closely connected with a third party with whom it is considering to, or currently, engage in business.
- 5.10 A **gift** can be cash, voucher or an asset (eg pen, paperweight, flowers, chocolates or bottle of alcohol) which is donated voluntarily, usually without the expectation of anything in return.
- 5.11 **Hospitality** will normally include, but is not limited to, entertaining (eg meals or tickets to events) and payment of expenses. NOTE: If the individual hosting the hospitality does not attend, the hospitality should then be considered a gift.
- 5.12 **Inflated payments** are increased levels of financial payments requested resulting in excess funds (sometimes referred to as "slush funds") which are used to pay bribes or paid back to the organiser of the sponsorship or donation as "kickbacks".
- 5.13 **'Front organisations'** are bogus organisations (usually trusts or charities) created as a frontage for channelling bribes, using donations and sponsorships received.
- 5.14 **Conflict of interests** are where the decision-maker of a sponsorship or donation has an interest in or family association with the third-party individual or organisation.

6. Responsibilities

- 6.1 The FAC is responsible for:
 - monitoring the organisation's Gifts and Hospitality Register
 - deciding on the matters for public disclosure.
- 6.2 The Finance and Business Planning Team are responsible for:

- monitoring and reinforcing compliance with this policy
- reviewing and updating this policy as necessary
- requesting, where necessary, nil returns from staff members at Grade J and above
- recording received declarations to the Gifts and Hospitality Register
- collecting, and noting on the *Gifts and Hospitality Register*, any gifts received outside the scope of this policy which has not been approved but cannot be returned for donating to charity
- making available to the FAC the central Gifts and Hospitality Register for monitoring on a quarterly basis (senior designated officer only).
- 6.3 The Risk Audit Team is responsible for:
 - supporting with the assessment of potential bribery risks, where required
 - carrying out spot audits in making sure the assessment of risks has been carried out and mitigated against.
- 6.4 The External and Corporate Affairs Directorate (in addition to the responsibilities of all staff) are responsible for:
 - organising and managing any sponsorship and hospitality in relation to any events or initiative hosted or attended by the organisation
 - maintaining a record of any gifts and hospitality provided to a third party, as part of the planning arrangements for corporate events hosted by the SRA.
- 6.5 The Charity Working Group (in addition to the responsibilities of all staff) are responsible for:
 - organising the choosing of the charity for the organisation and fundraising activities, where applicable
 - managing the donations received for giving to the chosen charity
 - maintaining a record of any donations provided to the third party charity.
- 6.6 The Procurement and Contract Management Team (PCMT) (in addition to the responsibilities of all staff) are responsible for managing any declared conflict of interest, whether perceived or actual, in accordance with the *Procurement and Contract Management Policy* where there is a connection with a potential supplier.
- 6.7 The Resourcing Team (in addition to the responsibilities of all staff) are responsible for making sure any employment opportunities offered are in accordance with the requirements of this policy as well as the *Recruitment and Selection Policy*.
- 6.8 Line managers are responsible for:
 - making sure their direct reports are aware of and compliant with the requirements of this policy

- reviewing, and where appropriate approving, any gifts and/or hospitality offered or received by their direct reports which is outside the scope of this policy
- 6.9 All staff seeking to make or accept an offer of a gift, sponsorship or hospitality, are responsible for:
 - assessing the potential risk of bribery, whether actual or perceived, prior to making or accepting the offer
 - raising any concerns as a result of their assessment of the bribery risks with the Risk Audit Team prior to making or accepting the offer
 - declaring any conflict of interest, whether perceived or actual, to PCMT in accordance with the *Procurement and Contract Management Policy* where there is a connection with a potential supplier
 - completing and retaining on file the Due Diligence Form as a result of their assessment of the bribery risks
 - considering and implementing the necessary safeguards to mitigate any actual or perceived risk of bribery, when making or accepting an offer
 - making or accepting an offer of gifts and/or hospitality in accordance with the limits set out in the *Travel and Subsistence Policy*
 - seeking prior approval of the relevant senior member of staff before making or accepting an offer of gifts and/or hospitality which is in excess of the limits set out in the *Travel and Subsistence Policy*
 - completing the *Gifts and Hospitality Declaration Form* where an offer of a gift, sponsorship or hospitality has been made to, or received from, a third party whether it was accepted or declined
 - submitting to the Finance and Business Planning Team their completed Gifts and Hospitality Declaration Form within the month of the offer of gift, sponsorship or hospitality being made or received
 - providing to the Finance and Business Planning Team, any gift received outside the scope of this policy which has not been approved but cannot be returned for donating to charity
 - reporting any known or suspected breach of this policy under the Whistleblowing Policy.

7. Policy guidelines

7.1 Assessing of bribery risks

7.1.1 Prior to making or accepting an offer of any business transaction that could give rise to a bribe (ie charitable giving, sponsorships, employment opportunities, gifts and hospitality), the relevant staff members should undertake due diligence to establish whether this amounts to, or could be perceived as, a bribe. Such due diligence should involve information gathering of the intended recipient and an assessment of the risks (see 7.1.2). It is important that any due diligence undertaken is reasonable and proportionate to the business transaction.

- 7.1.2 When carrying out the assessment of risks, relevant staff members should complete the *Due Diligence Form* and consider the following factors, where applicable:
 - a) The relationship between the beneficiary of the transaction and the parties to the transaction: It is critical to ascertain whether there is any connection between the transaction with which the organisation is involved, or likely to be involved, and the ultimate beneficiary of the transaction. This is to make sure there is no conflict of interests (ie the ultimate beneficiary of the transaction is not closely connected to the individual(s) or organisation(s) involved, or likely to be involved, in the transaction). Should there be a connection between the beneficiary and parties of the transaction, it should be considered whether safeguards need to be implemented to mitigate the risk (see 7.2.1) or whether the transaction should be avoided. Where there is a connection with a potential supplier, the conflict must be declared to the PCMT in accordance with the *Procurement and Contract Management Policy*. Additional due diligence will need to be carried out in the case of employment opportunities where there is connection between the beneficiary and the parties of the transaction (see 7.1.3).

NOTE: The type of transaction, and circumstances around it, will determine which party of the transaction due diligence needs to be carried out on. For example, if staff members are raising funds (eg bake sale) for a third party charity, then the due diligence should be on the third party charity. Alternatively, if sponsorship is being given to a third party (eg a political party) then the due diligence should be on the decision-maker of the sponsorship.

- b) The position of the giving or receiving individuals: Where either the benefactor or beneficiary of the offer is an individual, consideration should be given to their position. In the case of the benefactor, this is to ascertain that there is no bias as a result of a conflict of interest. Should this be the case, the making or acceptance of the transaction should be avoided as it is more likely to be considered as a bribe than if it was given to, or received by, a person with no decision-making power. Alternatively, relevant safeguards should be put in place to avoid this if there is reasonable certainty that the transaction could not influence the outcome (see 7.2.1). In the case of the beneficiary, this is to check whether they are in a position of trust, where an improper performance of their relevant function could be a bribe. Should such an instance occur, it is important to implement the necessary safeguards to mitigate the identified risks (see 7.2.1).
- c) The intention behind the transaction: The rationale behind the transaction should be carefully considered to make sure the intention is not to influence someone to act improperly, or to reward someone for having acted improperly. Should there be any evidence of such an intention, then the offer of the transaction should not be given or accepted.
- d) The necessity of the transaction: In the case of hospitality, in particular expenses, consideration should be given as to whether the offering of such is

required to cement the business relationship with the third party individual or organisation. To assess this, the following questions should be asked:

- Is the visit necessary (ie could it be done using alternative communication methods)?
- Is the person visiting the appropriate person to carry out the business purpose of the visit?
- Is the amount of expenses being paid clear and proportionate to the business visit?

If the answer to the above questions are 'no' then the offer or acceptance of the transaction should be avoided.

- e) The timing of the transaction: The timing of a transaction is very important in considering whether it could be a bribe. For example, the giving or acceptance of a gift, sponsorship or hospitality to an individual who is about to make a decision (or just made a decision) in favour of a connected individual or organisation, is more likely to be seen as an attempt to influence or reward that individual than if it was given at a time when there is no recent or pending decision. The giving, or receiving, of a transaction at a time when there is decision pending or where a decision has been recently made in favour of the beneficiary to the transaction, should be avoided.
- f) The perception of the transaction: Taking into account the above considerations, thought should be given to whether the offering or acceptance of the transaction could reasonably be perceived as a bribe, even if there is reasonable certainty that the intention is not to influence someone to act improperly or to reward someone for having acted improperly. There are two common perception tests that can be applied in assessing whether a transaction would be perceived as corrupt:
 - The newspaper test would a newspaper be likely to report the transaction and if so, what would the public perception be? For example, a box of chocolates given to an existing business partner at Christmas would be unlikely to be reported or to give rise to an adverse impression compared to an allexpenses paid holiday prior to a tender evaluation.
 - The prosecutor test if the transaction was to be perceived as a bribe with the potential for there to be a prosecution, what would be a reasonable explanation for offering or accepting the transaction?

If there are concerns that the transaction could be perceived as corrupt, then it should be avoided.

g) The legal and regulatory environment: Whether a transaction amounts to a bribe will be determined by the laws of a country or the regulatory environment in which an organisation operates. For example, some countries prohibit public officials from receiving gifts or hospitality, whilst some regulations prohibit personnel of certain

organisations from receiving such. Prior to making or accepting an offer of a transaction, consideration should be given to the legal and regulatory environment of the individuals(s) or organisation(s) involved, or likely to be involved, in the transaction (see the *Business Anti-Corruption Portal* or the *Corruption Perceptions Index* published by Transparency International UK for risks associated with different countries). Where there are laws or regulations in place that would prohibit the transaction, it should be avoided, even if there is no intention (or perception of an intention) to influence someone to act improperly or to reward someone for having acted improperly.

- h) The policies or procedures of the third party organisation: Where necessary, the policies and practices of the third party organisation should be verified to assess their approach to anti-bribery and corruption. In doing so, the following questions should be asked:
 - Does the organisation have in place an Anti-Bribery and Corruption (ABC)
 Policy (or equivalent)?
 - If so, are there clear and appropriate controls to avoid anti-bribery and corruption?

If the organisation involved, or likely to be involved, in the transaction has no ABC Policy (or equivalent) in place then the transaction should be avoided.

- 7.1.3 In the case of employment opportunities, the following should be considered prior to making an offer to avoid the perception of corruption where a connection between the beneficiary and parties involved, or likely to be involved, in the transaction has been established:
 - Is the opportunity to be offered commercially necessary for the organisation at this time?
 - Is an appropriate competitive process being implemented in accordance with the Recruitment and Selection Policy to make sure any offer is based on merit?

If the answer to the above is 'yes' then the employment opportunity may be offered, provided the connection between the beneficiary and the parties involved, or likely to be involved, in the transaction is not such to give rise to corruption concerns. Appropriate safeguards should be implemented to make sure there is impartiality in the process (see 7.2.1).

7.1.4 Any queries or concerns with completing the *Due Diligence Form* should be raised with the Risk Audit Team (see <u>Useful Contacts</u>). Completed forms should be retained on file for the purposes of the audit review.

7.2 Offering and accepting of gifts, sponsorships and hospitality

7.2.1 When proceeding to make or accept an offer of a gift, sponsorship or hospitality, safeguards must be put in place to mitigate the potential risk of (or risk of perception

to be) influencing someone to act improperly or rewarding someone for having acted improperly. Safeguards include, but are not limited to:

- invoking a separation of powers by passing the decision-making to an impartial individual(s) where there is a connection between the decision-maker and the ultimate beneficiary of the transaction to avoid a conflict of interest
- having the decision of the transaction made collectively by a group of individuals instead of an individual to avoid potential bias
- inclusion of anti-bribery clauses in any contracts, which include a requirement to comply with our ABC Policy and a termination clause providing for fees to be clawed back in case of breach
- having the details of the transaction outlined in writing (eg a travel itinerary, an agenda for a speaking engagement) in the absence of a contract to make sure there is a transparent process for the carrying out of the transaction, which includes a clear business case and payment terms
- verifying and/or notifying the employer of the recipient individual of the transaction, where applicable (for example in the case of expenses)
- limiting the frequency and financial value of gifts and hospitality offered to a reasonable level in accordance with the *Travel and Subsistence Policy*
- providing company branded memorabilia of limited resale value when offering a gift to a third party, where applicable
- making financial donations to purchase equipment or services directly to the vendors instead of to the third party involved in the transaction, where applicable
- making all financial donations using an authorised bank account to avoid cash payments and make sure there is an audit trail of funds
- requesting or retaining a VAT receipt with respect to the transaction, where applicable
- requesting advance approval from a senior member of staff where a transaction is outside the scope of the policy and countersigned, where applicable.
- 7.2.2 In the case of gifts and hospitality, only modest lunches and dinners in accordance with the *Travel and Subsistence Policy* may be offered or accepted without the need for prior approval from a senior member of staff. The making or receiving an offer of such hospitality should not place individuals in a position where impartiality may be influenced or considered by others to be influenced.
- 7.2.3 Where the gift or hospitality to be offered, or accepted, exceeds the limits set out in the *Travel and Subsistence Policy*, prior written approval must be obtained from a member of the Senior Management Team or a person senior to the giver / receiver (eg the giver / receiver's line manager). In obtaining approval the request, with reasons where applicable, should be documented for the purposes of the audit review. The individual giving approval must be satisfied that the transaction is appropriate and not corrupt.

7.3 Declaring and recording of gifts, sponsorships and hospitality

- 7.3.1 All offers of gifts, sponsorship or hospitality made to, or received from, a third party must be declared whether the offer was accepted or declined. Exceptions to this rule are where:
 - the gift or hospitality is below the 'de minimus limit' of £10
 - gifts or hospitality (eg refreshments or company branded memorabilia) have been distributed by the SRA at an internal meeting or event attended by internal staff members and/or volunteers only
 - gifts or hospitality (eg refreshments or company branded memorabilia) have been distributed by the SRA at an external event hosted by us but attended by third parties
 - raised funds donated to our chosen charity.

Whilst charitable giving and gifts and hospitality provided by the SRA at external events hosted by us as part of our regulatory work need not be declared, an appropriate record must be maintained as part of the event arrangements.

- 7.3.2 When making a declaration the *Gifts and Hospitality Declaration Form* must be used and the following details provided for recording on the *Gifts and Hospitality Register*:
 - The name of the individual who made or received the offer of donation, sponsorship or hospitality
 - The name of the individual and/or organisation to whom, or from whom, the offer of donation, sponsorship or hospitality was made
 - Whether or not the offer made, or received, was accepted or declined
 - The date the offer was made or received
 - The nature and approximate value of the donation, sponsorship or hospitality
 - The name and date of the approver, if applicable (for staff only).
- 7.3.3 Completed *Gifts and Hospitality Declaration Forms* must be submitted within the month that the offer of gift, sponsorship or hospitality was made or received to the Finance and Business Planning Team (see <u>Useful Contacts</u>). Staff members of Grade J and above are required to provide a monthly declaration even where no gift or hospitality to, or by, a third party has been made (ie 'nil return'). Submission of 'nil returns' does not apply to members of the SRA Board and Committees.
- 7.3.4 Any gift received outside the scope of this policy, which has not been approved but cannot be returned (eg alcohol) must be handed to the Finance and Business Planning Team following their declaration to avoid the perception of corruption. Such gifts will be donated to charity and a note made on the *Gifts and Hospitality Register*.

7.4 Reporting of and responding to declarations made

7.4.1 On a quarterly basis on overview of gifts, sponsorships or hospitality declared should be reported to the FAC. Where necessary, gifts, sponsorships or hospitality should

- be publicly disclosed on our public register or annual accounts for the purpose of transparency.
- 7.4.2 Where concerning trends on the *Gifts and Hospitality Register*, are identified the *Whistleblowing Policy* should be followed for this to be investigated.

8. Monitoring and review

- 8.1 The SRA Finance and Business Planning Team is responsible for this policy and will monitor its use and application to make sure it is relevant and suitable for those to whom it applies. Any queries or concerns in relation to this policy should be directed to the Head of SRA Finance and Business Planning.
- 8.2 The policy will be reviewed every 2 years at a minimum, or as required in line with any changes to the Bribery Act. It will be updated to take into account experience gained from its operation and from good practice.

9. Key controls

9.1 Below is a summary of key controls which have been identified as the minimum requirements to be carried out in order to comply with the policy.

| No. | Control | Details | Frequency | Owner |
|-----|---|---|-----------|--|
| 1. | Due Diligence Form | An assessment of the potential bribery risks has been completed prior to the making or acceptance of an offer of gifts, sponsorship or hospitality and the <i>Due Diligence Form</i> completed and retained on file for review. | Ad hoc | Individual making or receiving the offer |
| 2. | Gifts and Hospitality Declaration Form | The Gifts and Hospitality Declaration Form has been completed and submitted to the Finance and Business Planning Team within the month where a gift, sponsorship or hospitality has been made or received. | Ad hoc | Individual making or receiving the offer |
| 3. | Gifts and Hospitality Register | The Gifts and Hospitality Register has been updated with gifts, sponsorships or hospitality that has been | Quarterly | Finance and Business Planning Team |

| made or received and made | |
|---------------------------|--|
| available to the FAC. | |

Policy information

Information relating to the ownership and development of this policy have been provided below should there be any queries or concerns to be reported. It is important that the last review date, as shown below, is checked to make sure the correct version of the policy is being referred to.

Version control:

| Version no. | Updating officer | Review date | Approval date | Key changes |
|-------------|---------------------|-------------|---------------|--|
| 0.1 | James McCullagh | 18/11/19 | - | Update to existing Gifts and Hospitality Policy (August 2016) to remove Group and out-of-date references. |
| 0.2 | James McCullagh | 18/11/19 - | | Update to existing Gifts and Hospitality Policy (August 2016) to include in Definitions the various business transactions at give rise to a higher risk of bribery. |
| 0.3 | Sheon Hutchinson | 02/12/19 | - | Redraft of existing policy into the approved SRA Policy Template. Context added to the Background on transactions applicable to the SRA. |
| 0.4 | Sheon Hutchinson | 05/12/19 | - | Changes made to Background as per comments from the Head of Public Affairs and additions to the assessment of risks. Narrative updated throughout to reflect all relevant business transactions. |
| 0.5 | Sheon Hutchinson | 18/12/19 | - | Changes made following comments from the Executive Director of Resources and Head of Finance to reflect the change of responsibility for maintaining the G&H Register to Finance. |
| 1.0 | Sheon Hutchinson | 30/12/19 | 25/02/20 | Clarification provided on the declaring of G&H provided by the SRA at SRA hosted events. |

Responsible business unit: Finance and Business Planning

Approving authority: SRA Senior Management Team (SMT)

Policy owner: David Adams, Head of Finance and Business Planning

Policy classification: GENERAL

Subject-Matter: Probity and Conduct

Audience: All Staff; SRA Board and Committees

Key terms: Bribery; Corruption; Gifts and Hospitality; Facilitation Payments; Political

Contributions; Charitable Giving; Due Diligence

Contact details:

Solicitors Regulation Authority (SRA)
The Cube, Birmingham
199 Wharfside Street
Birmingham
B1 1RN

Tel: 0121 329 6727 (ext: 6727) Email: <u>SRA.Finance@sra.org.uk</u>

Legal framework:

Bribery Act 2010

Political Parties, Elections and Referendums Act (PPERA) 2000

Referenced documents:

Business Anti-Corruption Portal

Corruption Perceptions Index

Diversity and Inclusion Policy

Due Diligence Form

Gifts and Hospitality Declaration Form

Gifts and Hospitality Register

Procurement and Contract Management Policy

Recruitment and Selection Policy

Travel and Subsistence Policy

Whistleblowing Policy

Related training:

Anti-Bribery E-Learning

Useful contacts:

Finance and Business Planning Team

Email: SRA.Finance@sra.org.uk

Risk Audit Team

Email: <u>SRARiskAudit@sra.org.uk</u>

Transparency International UK Website: https://www.transparency.org/

Annex 1: Due Diligence Form

This form should be completed to assess the potential bribery risks of a business transaction being considered. For help completing the form, please contact the Risk Audit Team on SRARiskAudit@sra.org.uk. NOTE: Completed forms should be retained for audit purposes.

| Name: Date: | | | |
|--|-------------------------|---|--|
| | | | |
| 1. Business transaction: | | | |
| Charitable Giving | Sponsorship | Employment Opportunity | |
| Gift | Hospitality | | |
| 2. Relationship between p | arties: | | |
| ☐ None (go to Q.3) | Family | ☐ Friend | |
| Business | <u> </u> | | |
| Where relationship is with a sand submitted to the Procure | | flict of Interest Form been completed anagement Team? | |
| ☐ Yes | ☐ No | □ N/A | |
| Where an employment oppor | tunity is being offered | d, are the following statements 'TRUE'? | |
| The opportunity to be offered. | • | • | |
| An appropriate competitive | re process has been | implemented for selection of candidates. | |
| ☐ Yes | ☐ No | □ N/A | |
| 3. Position of giving / rece | iving individual(s): | | |
| Benefactor: Decision-M | aker | | |
| Beneficiary: | Trust \(\sum \) No | Position of Trust | |
| 4. Intention behind the tra | nsaction: | | |
| ☐ Intention to influence/rewa | ard No intenti | on to influence/reward Unsure | |
| 5. Necessity of the transaction | ction: | | |
| ☐ Necess | ary | Unnecessary | |
| Where expenses are being g | iven or received, are | the following statements 'TRUE'? | |
| There is no suitable altern | native to making the | visit | |
| | • • • | te person to conduct business | |
| <u></u> | | ionate to the business purpose | |
| ☐ Yes | ☐ No | □ N/A | |
| 6. Timing of transaction: | | | |
| ☐ Pending/recent de | ecision | ☐ No pending/recent decision | |

| 7. Perception of the transaction: | | | | | | | | | |
|-----------------------------------|-------------------------------|-------------------------------------|--|--|--|--|--|--|--|
| Newspaper Test: | Likely to report | Unlikely to report | | | | | | | |
| Prosecutor Test: | | | | | | | | | |
| 8. Legal and regu | ulatory environment: | | | | | | | | |
| Т | ransaction acceptable | ☐ Transaction prohibited | | | | | | | |
| 9. Policies and p | rocedures of the third party | organisation (if applicable): | | | | | | | |
| ☐ Do | cumented controls | ☐ No documented controls | | | | | | | |
| 10. Is it intended t | hat the transaction continue | 9? | | | | | | | |
| | Yes | □ No | | | | | | | |
| 11. If yes, what sa | feguards will be put in place | e to mitigate the identified risks? | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Annex 2: Gifts and Hospitality Declaration Form

This form should be used to declare any offer of a **gift, sponsorship and/or hospitality** made or received during the month, whether or not it has been accepted. Please complete and submit this form to SRA.Finance@sra.org.uk before the end of the month in which the offer was made or received. **NOTE: Staff at Grade J or above must complete and submit this form, stating 'nil return', even where no offer has been made or received for the month.**

| Na | Name: Job Title: | | | | | | Date: | | |
|-----|-------------------|-------------|--------------|---|---------------|--------------------|--------------------------|-----------------|--|
| Jo | | | | | | | A to I J or | above | |
| Bu | siness Unit: | | | | | | | | |
| ls | this a 'NIL RETUR | N'? ☐ Yes | ☐ No | NOTE: If 'No', the table be | low must b | e completed with t | he necessary decla | rations. | |
| No. | Item | Description | Value (£) | Third Party (Individual and/or organisation) | Offer Date | Outcome | Approver (if applicable) | Approva Date | |
| 1. | Choose an item. | | | | | Choose an item. | | | |
| 2. | Choose an item. | | | | | Choose an item. | | | |
| | | | | | | | | | |

| | | · | (£) | (Individual and/or organisation) | Date | | (if applicable) | Date |
|-----|-----------------|---|-----|----------------------------------|------|-----------------|-----------------|------|
| 1. | Choose an item. | | | | | Choose an item. | | |
| 2. | Choose an item. | | | | | Choose an item. | | |
| 3. | Choose an item. | | | | | Choose an item. | | |
| 4. | Choose an item. | | | | | Choose an item. | | |
| 5. | Choose an item. | | | | | Choose an item. | | |
| 6. | Choose an item. | | | | | Choose an item. | | |
| 7. | Choose an item. | | | | | Choose an item. | | |
| 8. | Choose an item. | | | | | Choose an item. | | |
| 9. | Choose an item. | | | | | Choose an item. | | |
| 10. | Choose an item. | | | | | Choose an item. | | |



Equality, Diversity and Inclusion Policy
Human Resources (HR)
September 2021

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1. Policy statement

- 1.1. Here at the Solicitors Regulation Authority (SRA) Ltd, we understand that people come from diverse backgrounds, but believe that individual differences bring value that improves how we work and helps us as an organisation to better connect with our stakeholders. We therefore aim to make equality, diversity and inclusion (EDI) a conscious part of how we run our organisation, as well as how we meet our regulatory and public sector duties as set out in the <u>Legal Services Act 2007</u>, the <u>Equality Act 2010</u> and <u>Human Rights Act 1998</u>. As an organisation we are committed to eliminating discrimination and promoting equality in all employment and procurement matters, in carrying out our regulatory functions, and in how we deliver customer service (see Policy Guidelines).
- 1.2. As part of our commitment to being a fair, transparent and proportionate regulator and employer, we have developed this policy which seeks to outline the measures in place to make sure the principles of EDI are embedded in all aspects of our work. These include, but are not limited to, our three-year Corporate Strategy which sets out our strategic approach to EDI, and our internal People Strategy which sets out our plans to develop and support our workforce and HR services. We also have in place policies, processes and procedures which set out the requirements and responsibilities of those who work for, or with, us when carrying out specific work activities such as recruitment, procurement, making reasonable adjustments, protecting personal information, and promoting health and wellbeing. Other key measures include carrying out an equality impact assessment (EIA) of our policies, practices, functions and initiatives, and awareness events and training for staff. We also undertake and publish diversity monitoring of our workforce and the legal profession, and use the data collated to meet our public sector equality duties.
- 1.3. It is expected that this policy be adhered to by all parties to whom it applies, and for any issues experienced with its application to be reported via appropriate channels. As an organisation we operate a zero-tolerance approach towards any acts of discrimination or bullying against anyone and will take relevant action against those who wilfully fail to comply with this policy (see 7.10). Compliance with this policy will be monitored as part of our internal audit programme to make sure the principles of EDI are consistently applied and implemented measures continue to be effective.

2. Purpose

- 2.1. The purpose of this policy is to set out our approach to EDI with respect to our work as an employer and regulator in observing the requirements of the Equality Act 2010 and other relevant legislation. It also aims to set out our expectations and the responsibilities of those who work for, and with us, in applying EDI principles.
- 2.2. It is intended that through the implementation of this policy, we will encourage an inclusive culture where everyone is treated with dignity and respect when carrying out their work or engaging with the SRA. Also, that individuals we work with will be aware of their rights and responsibilities in contributing to a safe working environment

which is free from discrimination and bullying, and in which they can feel comfortable to raise concerns.

3. Background

- 3.1. The Equality Act 2010 requires that no individual should be discriminated against based on the protected characteristic of age, disability, gender reassignment, race (including colour, nationality, and ethnic or national origin), religion or belief, sex, sexual orientation, marriage and civil partnership, or pregnancy and maternity. The Human Rights Act 1998 also provides that an individual's right to a private and family life which includes the right to determine their sexual orientation, lifestyle and the way they look and dress, should be respected, as well as their freedom of thought, belief and religion. Furthermore, that individuals have a right to be treated with dignity and that these rights and freedoms must be applied without discrimination. Any act of unlawful discrimination and serious acts of harassment related to a protected characteristic, may therefore amount to a criminal offence. In addition, the Gender Recognition Act 2004 makes it a criminal offence for someone in an official capacity to disclose an individual's planned or actual change of gender status where they have, or are applying for, a Gender Recognition Certificate (GRC).
- 3.2. As a public authority we are covered by the public sector equality duty created by the Equality Act 2010 and must have due regard to the need to eliminate discrimination, harassment and victimisation. This means we must make sure our policies and practices are fair and do not inadvertently discriminate against the protected groups. We must also have due regard to the need to advance equality of opportunity and foster good relations between different equality groups, which means we must be proactive in removing or minimising disadvantage for those protected groups and tackling prejudice. This extends to our procurement activities as we retain responsibility for meeting the public sector equality duty where we have contracted with third parties to deliver work on our behalf. In carrying out our regulatory function we are also required to have regard to the regulatory objectives set out in the Legal Services Act 2007, in particular objective 6, "to encourage an independent, strong, diverse and effective legal profession". As a result we encourage equality, diversity and inclusion by regulated firms and individuals under principle 6 of our Standards and Regulations and provide guidance and further resources in supporting this.
- 3.3. We reference the Acts as minimum protection for all individuals, and in addition to such, we take a wider approach to EDI which extends to socio-economic background, caring responsibilities and other appropriate non-protected characteristics. As part of our approach, we consider intersectionality and social mobility, as we recognise that people are made up of different identities and that we do not all have the same experiences. Making sure we deliver on our EDI commitments however is a shared responsibility. Every individual who works for, or with, us has a personal responsibility to help eliminate discrimination and to promote diversity and inclusion, though in some activities, particular responsibilities will fall to designated roles (see Responsibilities). Individuals, as well as or instead of the organisation, can therefore be held personally liable for unlawful acts of discrimination.

4. Scope

- 4.1. This policy applies to all SRA staff ie permanent and fixed-term contract (FTC) staff members, agency workers and contractors. It also extends to suppliers, job applicants and other third parties who may engage with the SRA (eg visitors).
- 4.2. It covers the fair and inclusive treatment of all individuals undertaking work or engaging with the SRA. Specifically, it covers how we make sure we:
 - treat everyone with dignity and respect
 - maintain the privacy of any personal information we hold
 - make reasonable adjustments available to those who need them
 - · support the health and wellbeing needs of our staff
 - attract and retain staff in building a diverse and inclusive workplace
 - encourage equal opportunity of suppliers when procuring works and services
 - monitor the demographic profile of our workforce and profession
 - · assess the impact of our policies, practices, etc on protected groups
 - train our staff and raise awareness on issues of EDI.
- 4.3. This policy replaces and builds on our *Dignity At Work Policy* and *Diversity and Inclusion Policy* to include third parties who may engage with the SRA. It is not retrospective and will not apply to incidents which occurred prior to its publication. Any such incidents should be considered in accordance with the principles of the previous policies, provided it does not contradict with any other policy of the SRA. This policy is also subject to change and will be amended or repealed, as necessary, in accordance with legislation and the practices of the organisation.
- 4.4. As the overarching policy for the SRA on EDI, it should be referenced accordingly alongside the relevant document for the process or task being undertaken. Reference should also be made to the following policies, as applicable:
 - Complaints Handling Policy
 - Disciplinary Policy
 - Grievance Policy
 - Regulatory and Disciplinary Procedure Rules
 - Unreasonable Behaviour Policy.

5. Definitions

5.1. **Bullying** is offensive, intimidating or malicious behaviour, or a misuse of power through means that undermines, humiliates, insults or injures the recipient of such (eg spreading hateful rumours or innuendos that are not true). NOTE: Bullying can include discrimination and be done via various means, including electronic means (see 5.2 and 'Cyber-bullying' in <u>Annex 1</u>).

- 5.2. **Discrimination** is the unlawful act of treating a person less favourably than another because of a protected characteristic (see 3.1). NOTE: Unlawful discrimination can take various forms (see Annex 1 for the different types of discrimination and Annex 2 for example case studies).
- 5.3. **Diversity** refers to the promotion and valuing of people with a broad range of different backgrounds, knowledge, skills and experiences.
- 5.4. **Equality** refers to the creation of a level playing field and fair treatment of everyone irrespective of their background, race or culture, sex, sexual orientation, religion or belief, age, etc.
- 5.5. **Equality impact assessment (EIA)** is an analysis of a new or existing policy, practice, function or initiative to assess the impact of such on groups of individuals protected by the <u>Equality Act 2010</u> and make sure we complying with our public sector equality duties.
- 5.6. **Gender** refers to the socially constructed roles, behaviours, expressions and identities which can differ with culture and influences how an individual perceives themselves and others (eg people may identify in a binary way as a man or a woman, they may be agender, gender fluid, non-binary, or identify in another way). NOTE: Gender and sex are often used interchangeably but are different things (see 5.16).
- 5.7. **Gender expression** refers to how a person chooses to outwardly express their gender. NOTE: A person who does not confirm to societal expectations of gender may not, however, identify as trans.
- 5.8. **Gender fluid** refers to a person who does not identify themselves as having a fixed gender (see 5.6).
- 5.9. **Gender identity** refers to a person's internal sense of their own gender as a man, woman, non-binary or as someone who identifies in a different way which may or may not correspond to their sex assigned at birth.
- 5.10. **Gender Recognition Certificate (GRC)** is a certificate which gives trans individuals over the age of 18 legal recognition in their affirmed gender and allows them to change their sex on their birth certificate amongst other things.
- 5.11. **Inclusion** refers to the acceptance of people for who they are, and encouraging the participation and contribution of everyone irrespective of their background, race or culture, sex, sexual orientation, religion or belief, age, etc.
- 5.12. **Intersectionality** refers to the overlap between social and political identities and protected characteristics which means the experience of one individual (eg a Black man) can differ to that of another (eg a Black woman). NOTE: This can lead to discrimination or disadvantage on multiple grounds.

- 5.13. **Personal pronouns** are words we use to refer to a person in conversation or communication and may indicate a person's gender (for example, 'he', 'she' or they).
- 5.14. **Race** is a term used to describe a group of people who share physical traits (including skin colour) but is used in the Equality Act to define colour, ethnicity, national origin and nationality (including citizenship). NOTE: Race and ethnicity are often used interchangeably, however the definition of ethnicity is wider and covers people who share a cultural heritage, a history and sometimes language.
- 5.15. **Reasonable adjustments** refer to the assistance provided, or change in criteria or practice in place, to remove or reduce the effect of an individual's disability. NOTE: Failure to make a reasonable adjustment is unlawful discrimination (see Annex 1).
- 5.16. **Sex** refers to a set of biological attributes of an individual as determined by their anatomy at birth and generally categorised as "male" and "female" which becomes their legal sex as shown on official documents such as a birth certificate. NOTE: Sex and gender are often used interchangeably but are different things (see 5.6).
- 5.17. **Sexual orientation** refers to an individual's emotional, romantic and/or sexual attraction to another individual.
- 5.18. **Social mobility** refers to the ability of an individual or group to move from one economic or social status to another which enables the availability of opportunities based on their talents and aspirations as opposed to the position they were born into.
- 5.19. **Transitioning** refers to the steps a trans individual may take to live in the gender with which they identify (eg telling friends and family, dressing differently, changing official documents, hormone therapy or surgery). NOTE: Each individual's transition will involve different things.

6. Responsibilities

- 6.1. All suppliers, job applicants and other third parties when visiting or engaging with the SRA are responsible for:
 - being aware of their own behaviours and perceptions and how this can impact, or be perceived by, others
 - treating individuals who work for, or on behalf of, the SRA with dignity and respect
 - making the organisation aware of how they prefer to be referred to
 - letting us know if they need a reasonable adjustment in accordance with the <u>Reasonable Adjustments Policy</u>
 - reporting any discriminatory behaviour in accordance with the <u>Complaints Policy</u>.
- 6.2. All staff as part of their day-to-day role are responsible for:
 - being aware of their own behaviours and perceptions and how this can impact, or be perceived by, others

- treating all colleagues, visitors, customers, etc with dignity and respect
- treating records held by the SRA which contain personal data of individuals we work with, in accordance with data protection laws and other relevant legislation
- promoting and acting in accordance with <u>SRA values</u>
- making the organisation and colleagues aware of how they prefer to be referred to, including keeping their records and diversity data up to date where applicable
- making clear to others when their behaviour is unacceptable and intervening in instances of bullying and/or discrimination, where appropriate
- reporting any actual or suspected incidences of bullying and/or discrimination in accordance with the relevant policy
- undertaking all mandatory EDI training as and when required
- participating in, and where relevant undertaking, EIAs of any policies, activities, opportunities and initiatives they are involved in developing or reviewing
- engaging in, and where applicable supporting, EDI awareness events and initiatives of the SRA as applicable.
- 6.3. All line managers acting within the scope of their role are responsible for:
 - making sure their direct reports are aware of, and comply with, this policy
 - making sure their direct reports undertake all mandatory EDI training
 - encouraging the participation of their direct reports in EDI events and initiatives being delivered, as appropriate
 - promoting equality and inclusion amongst their team
 - making sure all day-to-day managerial duties (eg recruitment, performance reviews, approval of leave, etc) are carried out in a non-discriminatory way
 - providing support to direct reports who are victim of bullying and/or discrimination
 - investigating any reported allegations of discriminatory behaviour of their direct reports in accordance with the relevant policy
 - seeking advice and support from HR as and when required.
- 6.4. The Human Resources (HR) Team acting within the scope of its role is responsible for:
 - developing, reviewing and monitoring internal EDI policies, including this policy, as well as providing support to staff with the application of such
 - providing appropriate EDI training to all new staff on induction and to existing staff on a periodic basis
 - supporting EDI awareness events and initiatives of <u>staff networks</u>
 - providing advice and support to staff who are involved in incidents of bullying and/or discrimination during the course of their employment
 - providing advice and support to line managers in the execution of their managerial roles in line with the requirements of employment and equality law
 - maintaining confidential personnel records which contain an individual's personal data in accordance with data protection laws and other relevant legislation

- conducting EIAs when developing or reviewing employment policies, activities, opportunities and initiatives for, and on behalf of, staff
- monitoring and reporting on the diversity profile and gender pay gap of the SRA
- arranging alternative security passes for individuals who identify as gender fluid
- bringing matters of issue to the attention of SMT for consideration.
- 6.5. The Equality, Diversity and Inclusion (EDI) Team acting within the scope of its role is responsible for:
 - contributing to the setting of the EDI priorities of the organisation
 - undertaking external work to promote diversity in the profession
 - reporting on the EDI work of the organisation in line with the Legal Services Act
 - monitoring, reviewing and reporting on the diversity profile of the legal profession and the impact of such on our work
 - developing, reviewing and monitoring the external EDI policies of the SRA
 - providing support to the business with respect to internal EDI policies and initiatives, as and when required.
- 6.6. The Senior Management Team (SMT) and where applicable members of the Leadership Team acting within the scope of their role, are responsible for:
 - setting the EDI priorities of the organisation as part of the <u>Corporate Strategy</u>
 - setting the standards and expectations of appropriate behaviours by acting in accordance with our approach to EDI in their behaviour with all stakeholders
 - promoting equality and a working environment free of bullying and discrimination
 - taking into account the views and differences of stakeholders when considering the implementation of new policies, practices, functions, services and initiatives
 - determining whether relevant authorities need to be contacted where there is evidence that a criminal offence has occurred.

7. Policy guidelines

7.1. Dignity and respect of others

- 7.1.1. We have a duty to foster an inclusive work environment in which individuals are treated with dignity and respect. In promoting different cultures and beliefs, and encouraging everyone to feel comfortable to bring their whole selves to work, we have in place a number of provisions which include the following:
 - <u>SRA values</u> which encourages fair, inclusive and professional behaviour by all our people
 - <u>staff networks</u> which help to raise awareness of diversity, as well as mark and celebrate different cultural and religious events
 - facilities for use by staff and visitors to our offices which include:
 - a prayer / reflection room to enable recognition and expression of faith
 - gender neutral and single sex toilets to accommodate everyone

- a wellbeing room which enables work breaks and privacy for staff who need it, pregnant staff and those returning from maternity leave
- a range of policies and guidance which set out our approach and expectations
 of staff when working with each other and around the workplace, for example:
 - a Transitioning At Work Policy which sets out the support available and responsibilities of staff with respect to their colleagues who are transitioning
 - a Dress Code Guidance which encourages professionalism whilst enabling staff to dress in a manner consistent with their cultural, religious or gender identity or expression.
- the provision for an additional or updated security pass for staff whose appearance may have changed over time (eg trans and gender fluid staff)
- choice of names, titles and pronouns in allowing all individuals to express how they prefer to be referred to.
- 7.1.2. Everyone who works for, or with, us has a role to play in making sure the right working environment is maintained. All individuals who work for, or on behalf of, the SRA are required to act in a professional way towards colleagues and others we work with, which respects diversity of expression and aligns with our values, whilst performing their day-to-day duties. This applies in work situations outside the workplace such as business trips, work-related social events and on social media (see our *Social Media Policy*). We also expect individuals visiting or engaging with the SRA to treat our staff members, and other individuals who may be present, with dignity and respect.
- 7.1.3. In showing dignity and respect to those from a different background, culture or belief, everyone is encouraged to be mindful of their own behaviours and perceptions, and how these can impact others. As far as possible, we should all refrain from making assumptions about people, using inappropriate or outdated language (eg racial, sexist, homophobic or transphobic slurs), and making comments which have the potential to be offensive. When communicating with others, we should endeavour to use preferred names, titles and pronouns in respect of an individual's identity.
- 7.1.4. To help us as an organisation, individuals should let us know how they prefer to be referred to in communications and to correct us if we do something wrong (eg use an incorrect pronoun, title or name when communicating with them or our records reflect incorrect details) so we can do our best to put things right. Individuals who feel they have not been treated with dignity and respect, or been a victim of discrimination, bullying or harassment, should raise a concern via the appropriate channel (see 7.10).
- 7.1.5. We have a zero-tolerance approach towards discrimination, harassment or bullying and will take all concerns raised seriously. This includes any bullying, harassment or discrimination based on a person's age, disability, sex, sexual orientation, gender identity and gender expression, ethnicity, religion or belief, pregnancy or maternity, marital or civil partnership status, caring responsibilities, and socio-economic background.

7.2. Records and privacy

- 7.2.1. We have a duty to collect and maintain records for our staff, those we regulate and in some instances those who contact us, for example to make a report, which may include diversity data for monitoring (see 7.7). Much of this data is sensitive personal data (eg ethnicity, religious or political views) which we have a legal duty to safeguard. In respecting people's right to privacy, we will:
 - treat any information we hold about an individual sensitively and in confidence, unless there is a legal reason to disclose (eg criminal investigation)
 - only use collated diversity data for reporting, research or to assess the equality impact of our policies, practices, functions and initiatives to make sure we meet our public sector equality duties
 - only publish a high-level overview of diversity of our staff and the legal profession,
 making sure published data does not lead to the identification of an individual
 - update, or enable the update, of diversity characteristics in personnel and regulatory records
 - destroy, in a secure manner, all records that include details of an individual's transition and gender history, unless there is a specified reason for retaining them as set out in our Data Protection Policy where we say that we are unable to grant the right to erasure or rectification to individuals we regulate as we are required to maintain an accurate historical record.
- 7.2.2. All staff and regulated individuals can at any time update their diversity data and make a change to other aspects of their electronic records (eg name, title and preferred pronouns) using the appropriate process. Staff can do this via the HR system and regulated individuals can make changes using mySRA. Individuals also have the right to select 'prefer not to say' for all questions when engaging in our diversity monitoring activities, save that for legal reasons we are required to record the legal sex of our staff (see the *Employee Privacy Notice* and *Public Privacy Notice*, as appropriate).
- 7.2.3. All information on an individual containing personal data must be processed, stored, accessed and disposed of in accordance with our *Data Protection Policy*. Any data processing should not cause unwarranted or substantial damage or distress to the individual and therefore should not be disclosed to, or accessed by, unauthorised persons without the prior consent of the data subject, except where permitted by law. Individuals who are not happy with the way their records or data have been handled can raise a concern via the appropriate channel (see 7.10).

7.3. Reasonable adjustments

7.3.1. We have a duty to remove or reduce barriers which limit access to our products, services and premises for individuals with a disability. We have an inclusive approach and are committed to providing adjustments, where reasonable, to individuals who need them (regardless of whether they have, or consider themselves to have, a disability as defined by the Equality Act). In anticipating the needs of those we work and engage with, we have implemented a series of measures which include:

- a <u>Reasonable Adjustments Policy</u> available on our website for people who
 engage with us, which sets out the adjustments we can make and how to make
 a request, including a request for interpretation and translation services for Welsh
 and other languages (see <u>Difficulties with English</u> on our website)
- Reasonable Adjustments Guidance which provides staff with information on the changes the organisation can make to support them if they have a disability, condition or other need (eg dyslexia, mental health issues or menopause), and how to go about making a request
- a Flexible Working Policy which provides an objective approach for agreeing alternative working arrangements with staff to achieve a healthy work-life balance
- periodic display screen equipment (DSE)¹ assessments and the provision of alternative or additional DSE to help staff work more comfortably and in a safe way where they have a health condition or disability (see DSE Procedure).
- 7.3.2. We will do our best to anticipate the needs of those we work and engage with, and to be inclusive in the way we engage with people; however, to help us individuals are encouraged to make a request for an adjustment where needed. On receiving the request, an assessment will be made as to whether the adjustment is reasonable and within our power to provide. Individuals who are not happy with the way their request for a reasonable adjustment has been handled can raise their concerns via the appropriate channel (see 7.10).

7.4. Health and wellbeing

- 7.4.1. We have a duty of care to safeguard and support the health and wellbeing of our staff (also see 7.3). In understanding that health is multidimensional and can vary based on factors such as age, sex and race, and that we all deal with things such as stress differently, we have a range of policies, resources and assistance in place to support our staff which include:
 - a Stress and Wellbeing Policy which aims to provide a consistent approach to assessing and addressing the risks of the individual and their needs
 - a variety of leave policies which sets out the rights of staff and support available to them during their circumstances (eg key life events or periods of ill-health) (see Sickness Absence Policy, Time Off Work Policy and family leave policies)
 - various discretionary benefits and complementary initiatives to suit the lifestyle and circumstances of the individual member of staff (see Benefits Guide)
 - specialist advice and support via our trained Mental Health First Aiders (MHFA) or the Occupational Health Service

¹ This refers to the electronic devices used when working such as a desktop computer, laptop or tablet and the additional paraphernalia such as a mouse, keyboard and headsets. It extends to software, furniture and overall work environment.

- an employee assistance programme (Unum Lifeworks) which provides all staff with access to 24/7 confidential and independent advice, guidance and support in various life aspects
- a toolkit and repository of resources based on life events (eg pregnancy) and circumstances (eg bereavement) which empowers staff with information and available support to manage their wellbeing in a way that most benefits them.
- 7.4.2. We also recognise that engaging with the SRA as the regulator of the legal profession can be stressful, particularly for those with a health condition, disability or difficult personal circumstances, and provide additional support and signpost individuals to a range of resources which might be of help (see Your Career and the Reasonable Adjustment Policy on our website).
- 7.4.3. Everyone has a role to play in safeguarding their own mental wellbeing, as well as supporting that of others. Individuals are therefore responsible for letting us know if they need help and, where appropriate, using the resources provided to them. Individuals should also raise a concern via the appropriate channels if they are unhappy with the support provided (see 7.10).

7.5. Recruitment and progression

- 7.5.1. We have a responsibility to make sure that everyone is treated fairly and respectfully when going through our recruitment process. We also want staff members to have every opportunity to develop their skills and knowledge, to progress their career with the organisation and to be recognised for their contribution. In striving to be an inclusive employer, we have implemented a range of policies and processes for recruitment, pay, benefits, performance and development that aims to make sure we are open, inclusive, reward all our people fairly and evaluate performance consistently ad transparently:
 - a Recruitment and Selection Policy which aims to make sure we attract a diverse range of candidates, the process applied is robust and inclusive, and the selection of applicants fair and based on merit
 - a Pay Policy which aims to make sure all individuals are fairly rewarded according to their role, responsibilities and performance
 - a benefits package with core benefits available to all permanent and FTC staff members irrespective of circumstances and lifestyle choices (see Benefits Guide)
 - a Performance and Development Review Process which provides a consistent and transparent approach for staff to evaluate their performance and the opportunity to create a development plan for career progression opportunities
 - a Professional Development Policy which aims to make sure all permanent and FTC staff are provided with a fair opportunity to develop their skills and knowledge.
- 7.5.2. All our line managers, along with the HR Team, are required to apply the policies and practices put in place in making sure individuals are recruited based on merit and ability and that all staff are given equal opportunity to succeed in their career with us.

We have processes in place that individuals who are unhappy with how we have dealt with a recruitment or progression opportunity can use to raise their concerns via the appropriate channel (see 7.10).

7.6. Procurement and contract management

- 7.6.1. We have a responsibility to make sure we carry out our procurement activities fairly, so those submitting proposals for work are treated with respect and have an equal opportunity to participate in the process. In making sure we give fair treatment to everyone tendering for work with us, we have in place measures which include:
 - a Procurement and Contract Management Policy which sets out the requirements to be met when engaging with suppliers and where there is a pre-existing relationship with a potential supplier to avoid conflict of interest
 - an Anti-Bribery and Corruption Policy which sets out the business transactions
 with third party suppliers which could put the organisation at risk of bribery or
 corruption, and the arrangements in place for assessing and mitigating such risks.
- 7.6.2. We recognise that we retain responsibility for meeting our public sector equality duties when contractors are carrying out work or providing services on our behalf (eg disability access when hiring a venue and food suitable for diverse audience when hiring a caterer). We therefore have in place measures to make sure we consider the EDI commitments of our suppliers as part of the procurement process and include requirements in relation to EDI such as:
 - a number of engagement forms, including a *Pre-Qualification Questionnaire*, for completion by potential suppliers which require confirmation of their EDI policy
 - a contract with each supplier which sets out our expectations and the requirement of suppliers to report on EDI issues and complaints of discrimination raised.
- 7.6.3. Contracts with suppliers are monitored, including EDI requirements and periodically reviewed. Where there has been a breach of any contractual terms, notice to terminate the contract early may be issued if considered necessary. Individuals or organisations unhappy with how we have managed our procurement activities can raise any concerns via the appropriate channel (see 7.10).

7.7. Diversity monitoring

7.7.1. We have a duty to collect and monitor diversity data from our staff, those we regulate and those making an application to the Compensation Fund so we can identify areas of over and under representation and support improvements where possible. We particularly encourage the involvement of individuals from protected groups where declaration rates are low. We also publish on our website a range of information on our EDI work as set out in our Corporate Strategy and People Strategy (see Equality and Diversity on our website for information on our EDI work and for diversity reports on the SRA and the profession).

7.8. Equality impact assessments

- 7.8.1. We have a duty to eliminate discrimination in our policies, practices, functions and initiatives, and to advance equality of opportunity, and foster good relations between different equality groups. We have developed a framework to help us identify, assess and remove or minimise disadvantages to protected groups in meeting our public sector duty.
- 7.8.2. All staff and those working on behalf of the organisation are required undertake equality impact assessments (EIAs) before implementing a new, or significantly changing an existing, policy, practice, function or initiative of the organisation. Guidance, support and training on carrying out EIAs are provided as necessary, and we also commission independent EIAs when appropriate to do so.
- 7.8.3. Part of understanding equality impacts is effective engagement and consultation. We have set out what the public can expect from us in our Public Engagement Charter and work to be fully inclusive and plan our engagement and consultations accordingly (see Stakeholder Engagement Toolkit). We want people affected by our policies, practices, functions and initiatives from every community to engage with our consultations and we welcome input from everyone. In the event that an individual has a concern about our policies, proposals or work can raise their concerns with us through the appropriate channel (see 7.10).

7.9. Awareness training and events

- 7.9.1. We have a responsibility to promote equality of opportunity and good relations between groups who share a protected characteristic and those who do not. In raising awareness of the rights and responsibilities of individuals we work with, we provide mandatory EDI training for all our staff which includes modules on diversity and inclusion, and unconscious bias. All staff are required to undertake training on induction and on a periodic basis throughout the course of their service with the SRA. Line managers also receive EDI training to equip them with the knowledge, skills and confidence to support and manage a diverse workforce.
- 7.9.2. In addition to formal training on EDI, we have a range of individual training modules for staff which are supplement by a wide range of voluntary events and activities designed to raise awareness, some of which are arranged by our staff networks. We encourage individuals, whether or not they are of a protected group, to engage in awareness events as appropriate in helping us to advance equality of opportunity and fostering good relations between different groups, and to be allies for protected groups. When attending events, individuals are required to show respect to the views and differences of others (see 7.10).

7.10. Reporting concerns of discrimination, harassment or bullying

7.10.1. Where an individual feels they are a victim of bullying, harassment or any other type of discrimination, or where they witness such behaviour against another individual, they should raise a concern. In doing so, staff should follow the procedure outlined in

- our internal *Grievance Policy*. Suppliers, applicants and other third parties should refer to the *Complaints Handling Policy* available on the SRA website.
- 7.10.2. Relevant action will be taken against those found to be in breach of this policy in accordance with our *Disciplinary Policy*, or *Unreasonable Behaviour Policy* as appropriate. Serious breaches can lead to punitive action being taken, which could result in dismissal without notice in the case of staff and restricted communication in the case of customers. In the instance that the perpetrator of the bullying or discrimination is also a regulated individual regulatory action may also be taken in accordance with our *Regulatory and Disciplinary Procedure Rules* where a report for breach of our *Standards and Regulations* has been made.

8. Monitoring and review

- 8.1. The HR Team is responsible for this policy and will monitor its use and application to make sure it is relevant, suitable for those to whom it applies and free from discrimination and bias. Any queries or concerns in relation to this policy should be directed to the Director of Human Resources and Organisational Development (HR & OD).
- 8.2. The policy will be reviewed every three years at a minimum, or as required in line with any changes to relevant legislation. It will be updated to take into account experience gained from its operation and from good practice.

9. Key controls

9.1 Below is a summary of key controls which have been identified as the minimum requirements to be carried out in order to comply with the policy.

| No | . Control | Details | Frequency | Owner |
|----|--|---|-----------|----------|
| 1. | Policies, Processes and Guidance | The relevant policy, process or guidance has been followed when undertaking an activity with an EDI impact. | Ad hoc | Everyone |

Policy information

Information relating to the ownership and development of this policy have been provided below should there be any queries or concerns to be reported. It is important that the last review date, as shown below, is checked to make sure the correct version of the policy is being referred to.

Version control:

| Version no. | Updating officer | Review date | Approval date | Key changes |
|-------------|------------------|-------------|---------------|---|
| 0.1 | Nisha Modasia | 01/04/20 | - | Merge of the Group Dignity at Work Policy and Diversity & Inclusion Policy into the SRA Policy Template |
| 0.2 | Jo Burton | 19/08/20 | - | Updated to add in narrative on reasonable adjustments |
| 0.3 | Jo Burton | 16/10/20 | - | Update to structure and narrative throughout following comments from the EDI Team and PCCO. |
| 0.4 | Jo Burton | 23/02/21 | - | Minor amendments to narrative |
| 0.5 | Sheon Hutchinson | 29/04/21 | - | Update to structure and to narrative to include references to external stakeholders and services and to remove narrative on reasonable adjustments. |
| 0.6 | Sheon Hutchinson | 27/05/21 | - | Update to structure and narrative to include a section on privacy and diversity monitoring. Trans and non-binary section incorporated into section on dignity and respect, and privacy. |
| 0.7 | Sheon Hutchinson | 29/06/21 | 29/07/21 | Update to narrative based on feedback from EDI Team and addition of procurement section. |
| 0.8 | Eilish Murphy | 07/09/21 | - | Minor changes to narrative to reflect feedback from Executive Directors. |

| 0.9 | Sheon Hutchinson | 22/09/21 | - | Updated to remove obligations on regulated individuals and the general public. Minor changes also made throughout to reflect feedback from the Staff Forum and Networks. |
|-----|------------------|----------|---|--|
| 1.0 | Sheon Hutchinson | 29/09/21 | - | Minor changes to wording and removal of Board/Committee obligations. |

Responsible business unit: Human Resources (HR)

Approving authority: SRA Senior Management Team (SMT)

Policy owner: Simon Wall, Director of HR&OD

Security classification: PUBLIC

Subject-Matter: Probity and Conduct

Audience: Internal and External Stakeholders

Key terms: Equality, Diversity, Inclusion, EDI, Discrimination, Bullying, Harassment

Contact details:

Solicitors Regulation Authority (SRA) The Cube, Birmingham 199 Wharfside Street Birmingham B1 1RN

Tel: 03702 435 865 (ext: 6444 or 6203) Email: sra.org.uk or e&d@sra.org.uk

Legal framework:

Data Protection Act 2018

Equality Act 2010

Gender Recognition Act 2004

Human Rights Act 1998

Legal Services Act 2007

UK General Data Protection Regulations (GDPR)

Referenced documents and webpages:

Access Control Policy
Anti-Bribery and Corruption Policy

Complaints Handling Policy

Corporate Strategy

Data Protection Policy

Difficulties with English

Disciplinary Policy

Dress Code Guide

DSE Procedure

Employee Privacy Notice

Equality Impact Assessment Guidance

Grievance Policy

Maternity Leave Policy

Ordinary Parental Leave Policy

Paternity Leave Policy

Pay Policy

People Strategy

Performance and Development Review Process

Pre-Qualification Questionnaire

Procurement and Contract Management Policy

Professional Development Policy

Public Engagement Charter

Public Privacy Notice

Reasonable Adjustments Guidance

Reasonable Adjustments Policy

Recruitment and Selection Policy

Regulatory and Disciplinary Procedure Rules

Security Passes Process

Shared Parental Leave Policy

Sickness Absence Policy

Social Media Policy

SRA Standard and Regulations

Stakeholder Engagement Toolkit

Stress and Wellbeing Policy

Time Off Work Policy

Transitioning at Work Policy

Unreasonable Behaviour Policy

Your Flex Benefits Guide

Your Health, Your Career

Related training:

Diversity and Inclusion E-Learning Module Unconscious Bias E-Learning Module

Useful contacts:

Acas

Tel: 0300 123 1100 Web: www.acas.org.uk

Employee Assistance Programme (Unum LifeWorks)

Tel: 0800 048 2702

Web: www.unumlifeworks.co.uk

EDI Team

Email: <u>e&d@sra.org.uk</u>

HR Team

Tel: 03702 435 865 (ext: 6444)

Email: sra.hr@sra.org.uk

Annex 1: Types of bullying and discrimination

Below are the different types of bullying and unlawful types of discrimination that can occur.

Associative discrimination

A type of unlawful discrimination where an individual is directly discriminated against, or harassed, because of their association with another individual who has a protected characteristic. An example includes withdrawing an offer of employment withdrawn after an applicant has revealed that they have a disabled child with complicated care arrangements.

Cyber-bullying

A type of bullying, harassment and victimisation which involves offensive, intimidating, or malicious behaviour conducted through all electronic means, including social media or blogs. Examples include posting offensive or threatening comments directed at a member of staff, posting inappropriate photographs or sensitive personal information of a colleague, or pressuring visitors to join online groups on social media.

Direct discrimination

A type of unlawful discrimination where a person is treated less favourably than another because of a protected characteristic which relates to them. Examples include refusing to employ a woman because they are pregnant, or not supplying a service to an individual because they are gay.

Failure to make reasonable adjustments

A type of unlawful discrimination where an organisation fails to help a disabled person overcome a disadvantage created by a physical feature, provision, criterion or practice of the business which put the disabled person at a substantial disadvantage compared to someone who does not have a disability and having been made aware of such.

Harassment

A type of unlawful discrimination involving unwanted conduct which is related to a protected characteristic and is meant to, or has the effect of, either violating a person's dignity or creating an intimidating, degrading or offensive environment. According to the <u>Equality Act 2010</u> explanatory notes there are three types of harassment as follows:

1) Unwanted conduct which is related to a relevant characteristic (ie all protected characteristics except for pregnancy and maternity, marriage, and civil partnership) and has the purpose, or effect of, either violating the recipient's dignity or creating an intimidating, degrading or offensive environment. Examples include colleagues openly making jokes about the appearance of an individual who is transitioning to a different gender, outing a person as gay, lesbian, bi or transgender without their consent, or inadvertently excluding same sex partners from social events.

- 2) Unwanted conduct of a sexual nature and has the purpose, or effect of, either violating the recipient's dignity or creating an intimidating, degrading or offensive environment. An example includes an individual making lewd and sexual comments to another person.
- 3) Treating someone less favourably because they have either submitted to, or rejected, harassment of a sexual nature or relating to a person's gender reassignment and/or identity. An example includes a manager not promoting a staff member who has rejected their unwelcome sexual advances.

Indirect discrimination

A type of unlawful discrimination where a provision, criterion or practice which is applied to everyone, disadvantages a group of people who share a protected characteristic and is not objectively justifiable (ie not a proportionate means of achieving a legitimate aim). An example includes specifying ten years' experience for a particular job, though it is not objectively justifiable, which disadvantages a younger applicant who is otherwise well qualified for the job.

Perceptive discrimination

A type of unlawful discrimination where an individual is directly discriminated against, or harassed, based on a perception that they have a particular characteristic which they do not have. An example includes colleagues taunting a heterosexual person about their sexuality because they believe them to be gay.

Victimisation

A type of unlawful discrimination where an individual is subject to a detriment because they made a complaint about discrimination or suspected of helping someone else. An example includes an individual being excluded, or ignored, following a formal complaint against their manager for race discrimination. NOTE: An individual is not protected by the Act if they acted maliciously or made or supported an untrue complaint.

Annex 2: Discrimination and bullying case studies

Below are some case studies which provide real life examples of types of discrimination and bullying that can occur in a work environment, how they can affect the recipient and how they can be effectively dealt with.

<u>Transphobia</u>

Lucas has been with the SRA for several years and has started some elective treatment as part of a journey to transition from female to male. His appearance is starting to change. Lucas has been open about the transition with team members and as part of this, Lucas, his line manager and the team have worked together to understand the *Transgender and Non-Binary Policy* and Guidance in supporting Lucas with the following points being highlighted:

- be respectful of a colleague's appearance whilst they are transitioning
- asking your colleague what pronoun to use and check how they would like to be addressed
- the use appropriate terminology, gender neutral language and the danger of banter
- the SRA's zero-tolerance approach to discrimination, bullying and harassment on any grounds.

Despite this, Lucas has noticed some derogatory comments on social media about his transition which were posted by two team members. Lucas has been openly included in the messages along with other members of the team. Although the comments may be seen as "banter" by others, Lucas finds them upsetting. Lucas decided to flag the comments with his team directly and the impact this has had on him. Whilst the team were receptive to the feedback and removed the comments immediately, he has noticed certain members of the team are treating him differently than they were before (ie they stop talking when he walks into the room and no longer invite him to work socials, which are a monthly event.) NOTE: This type of harassment has the purpose, or effect of, creating an intimidating, hostile, degrading, humiliating or offensive environment for Lucas or violating his dignity.

Question to consider: How can this issue be dealt with?

Lucas decided to raise the issue with his line manager and a member of the HR team. Options were provided to Lucas on further informal options or that alternatively he could raise a formal grievance. Lucas was also reminded of the support available to him through the employee assistance programme with Unum, his line manager, staff networks (eg the trained Welfare Officers as part of the LGBTQ+ network) and HR staff members.

Lucas decides to resolve the issue informally. Lucas and his line manager met with both individuals who had made the comments on social media, to discuss the impact and remind them of their responsibilities in line with the *Equality, Diversity and Inclusion Policy*. His line manager also brought the wider team together to remind them of our zero tolerance to any act of discrimination, the behaviours expected under the policy, and the importance of being inclusive.

Dual Discrimination

Joyce is going on maternity leave. The team have invited colleagues and their partners to a baby shower and when issuing invites, the team had conversations about partners and assumed that Joyce is in a heterosexual relationship.

Joyce is bisexual and has not previously shared this with colleagues but feels the time is right to do so, and she shares with the team that she is bisexual and in a relationship with Emma. Her revelation was met firstly with silence from some members of the team, then several inappropriate questions given her Christian beliefs and comments about her preference for men over women.

Question to consider: What are the issues this situation presents?

Joyce was shocked by the behaviours and felt so uncomfortable from the comments made, despite working with the team for several years. After discussing issues with her partner that evening, Joyce raises a grievance citing dual discrimination. NOTE: People come from diverse backgrounds and face the possibility of multiple discrimination because they are of multiple protected characteristics. The behaviour of Joyce's colleagues constitutes unwelcome behaviour. It is not acceptable to question another individual's intimate relationships or sexual orientation.

Alternative options of dealing with this situation were discussed with Joyce. However, Joyce felt that she had no alternative option but to move forward with a formal grievance in accordance with the *Grievance Policy*.

Homophobia

Grace has not long been with the SRA and has been on the receiving end of some homophobic comments from her colleagues that people may class as "work banter". She has never openly discussed her sexual orientation with anyone at work. The comments have upset Grace, but she has not approached her colleagues or discussed hoe she feels with anyone else. NOTE: This behaviour falls under bullying and harassment.

Question to consider: How can this issue be dealt with?

At her next one-to-one meeting, Grace's line manager mentions they had noticed that she seemed distracted recently and asked whether she needed any support. Grace spoke about the comments and how it made her feel. Her line manager advised that the comments were clearly inappropriate, and their behaviour should be discussed. Her line manager explained the informal and formal options that Grace could take, as per the *Equality, Diversity and Inclusion Policy* including making a formal complaint under the *Grievance Policy* if there is no change after informal discussions. Grace decided that an informal discussion with the individuals may help them to understand the effects on Grace and what changes need to be made going forward.

Grace felt uncomfortable approaching her colleagues directly, so she asked a member of the HR team to accompany her. When Grace explained how she felt about the comments, her

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colleagues were extremely sorry. They said they did not realise how the comments had made Grace feel and said they had only meant the comments to be a joke and agreed not to make the comments again. Details of the date/time and what was said were noted as evidence by Grace in case her colleagues' behaviour did not change.

Grace's line manager also brought the wider team together to remind them of the zero tolerance to any act of discrimination, the behaviours expected under the *Equality, Diversity* and *Inclusion Policy*, and the importance of being inclusive.



HEALTH AND SAFETY POLICY STATEMENT

The Solicitors Regulation Authority (SRA) is actively committed to protecting the public by ensuring that solicitors meet high standards, and by acting when risks are identified. Our success depends upon the way we deliver Health and Safety services to ensure the safety and wellbeing of our people, contractors, and other visitors. These services are focused and delivered to the highest levels through an effective safety management system. We therefore place the utmost importance on ensuring a core focus on Health and Safety.

Commitment

The Chief Executive Officer has ultimate responsibility for performance, development, and continual improvement.

We are committed to:

- · Providing a safe place of work with the aim of zero harm to our people
- Providing well trained and competent people
- Promoting a positive Health and Safety culture shared by all
- · Maintaining and reviewing the management system to ensure an effective framework of compliance
- Transparency in the reporting of health and safety performance for continual effective management and improvement
- Ensuring hazardous activities are identified, assessed for the associated risks, and mitigation controls put in place so far as reasonably practicable
- Demonstrating our commitment to the prevention of injury, ill-health and continual improvement in health and safety management and performance.

Aims

To meet our commitments, we aim to ensure we:

- Provide sufficient finance and support to maintain and improve performance in health and safety
- · Provide an intranet on which the management system can store and display information
- Provide policies, procedures and guidelines that are monitored and updated as necessary
- Provide all employees with the appropriate information, instruction, supervision, and training appropriate to role
- Ensure that our health and safety policy is understood and followed across all departments
- Set targets which promote continual improvement
- Hold people accountable at all levels for their health and safety responsibilities
- Hold line management accountable for health and safety performance
- Consult and communicate on health and safety matters with employees through regular meetings
- Make sure that employees, who need them, receive appropriate health surveillance checks
- Investigate incidents and share the findings to prevent reoccurrence
- Meet with suppliers, contractors and companies that provide services to us and endeavours to ensure that their standards match our own
- Ensure all employees know that everyone has a shared responsibility for the maintenance of a safe and healthy working environment
- Periodically review the effectiveness and suitability of this policy and where needed ensure changes are communicated appropriately

80000

Paul Philip
Chief Executive
Solicitors Regulation Authority (SRA)
December 202



Stress and Wellbeing Policy
Human Resources (HR)
December 2021

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1. Policy statement

- 1.1 Here at the Solicitors Regulation Authority (SRA) we value our staff and the contribution that each individual makes to the success of the organisation. We are committed to safeguarding the health, safety, wellbeing, and resilience of our staff and take our duty of care towards the mental health of our staff members seriously. As part of our commitment to our staff, we strive to create and maintain a working environment in which open and effective communication, support for staff and mutual respect between individuals are the expectations and the reality.
- 1.2 In accordance with the Health and Safety at Work (HSW) Act 1974 and the Management of Health and Safety at Work Regulations 1999, we have put in place measures to assess and protect the health, safety and wellbeing of our staff while at work. Such measures include the adoption of the Stress Management Standards to be applied with respect to stress-related illnesses and subsequent absences, and a general stress risk assessment (see **Background**) which seeks to identify the main hazards associated with stress in order for practical measures to be implemented. To assist line managers with evaluating issues within their teams and common control measures, we have developed in line with the aforementioned standards, the Stress Risk Assessment Form (also referred to as the 'Management Standards Indicator Tool') as a user-friendly aid. This has been updated to take into account additional hazards whilst working from home given the increased homeworking of staff following the Covid-19 pandemic. As an organisation we also offer specialist advice and support in managing stress which may be obtained from our trained Mental Health First Aiders (MHFA) or the Occupational Health Service, via Human Resources (HR). Equally, further advice and guidance regarding the stress risk assessment process can be sought through HR.
- As an employer we believe that everyone at the SRA has a role to play in making sure the right working environment is created and for safeguarding their own mental well-being, as well as supporting that of others. We encourage staff to maintain a healthy lifestyle and in doing so provide access to various discretionary benefits and complementary initiatives including private healthcare cover, gym membership, health screening (subject to terms and conditions), etc. Also available to staff is 24/7 access to the Employee Assistance Programme which provides advice, guidance and support on all matters that may be affecting staff at work or home, as well as access to occupational health services. Additionally, focused training or awareness will be considered for staff to meet any specific needs that may be identified through the stress risk assessments or upon the recommendations of occupational health. Where it is identified that a member of staff is experiencing stress that is having a significant effect on their health and well-being, we will make the relevant reasonable adjustments in order to minimise the risk.
- 1.4 In line with the above, all staff have an individual responsibility to familiarise themselves with the requirements of this policy, in particular understanding the difference between pressure and stress, making necessary lifestyle changes to help manage stress and completing the stress risk assessment and action plan where Page 2 of 21

required. It is also expected that all staff partake in any training deemed appropriate to promote awareness and compliance, and to report any issues experienced with applying this policy to HR.

1.5 In monitoring compliance with this policy, we will carry out checks to make sure a 'suitable and sufficient risk assessment' has been offered in all circumstances for reported stress-related illnesses, which have been identified to be a result of work. As part of the check we will make sure the *Stress Risk Assessment Form* has been used appropriately and any resulting action plans have been delivered within the agreed timeframe. Adherence to the agreed absence management procedure, as outlined in the *Sickness Absence Policy* will also be monitored, as well as the application of this policy in accordance with the *Diversity and Inclusion Policy* to ensure that it is non-discriminatory and free from bias. Failure by any staff member to comply with the requirements of this policy will be brought to the attention of the respective line manager for appropriate follow-up action.

2. Purpose

- 2.1 The purpose of this policy is to provide direction and guidance on the management of work-related stress and the processes for carrying out a 'suitable and sufficient risk assessment'. It also aims to promote mental wellbeing and resilience.
- 2.2 It is intended that this policy will assist in reducing the effects of presenteeism by addressing and supporting staff through work and non-work-related issues. Other anticipated benefits include:
 - improved working climate and culture
 - greater openness about sources of pressure at work at all levels
 - better awareness about stress and mental wellbeing in all staff
 - a better work-life balance for all staff
 - greater consistency of approach in dealing with mental wellbeing
 - early identification of stress supporting prompt resolution
 - greater awareness of support available to staff
 - improved stress and resilience management skills in managers
 - a reduction in the number of work days lost to stress related sickness absence.

3. Background

3.1 Under the <u>Health and Safety at Work (HSW) Act 1974</u>, employers must take all reasonably practicable measures to protect the health, safety and welfare of staff at work. Additionally, the <u>Management of Health and Safety at Work Regulations 1999</u> requires employers to assess health and safety risks, and to introduce prevention and control measures based on those risk assessments.

3.2 Stress Management Standards

- 3.2.1 To assist organisations with managing work related stress, the Health and Safety Executive (HSE) have developed the <u>Stress Management Standards</u>, an approach which requires managers, staff and their representatives to work together to improve certain areas of work. As described in the Standards, these seek to have a positive effect on staff wellbeing.
- 3.2.2 These standards are based on research into those aspects of work directly linked to mental ill-health, which include factors concerned with the design, organisation and management of work. It also provides advice on the six main areas identified as having the potential to contribute to workplace stress. These are:
 - **Demands** are staff able to cope with the demands of the job?
 - Control do staff have some say in the way they do their work?
 - Support do staff have adequate information and support?
 - Relationships are staff subject to unacceptable behaviours e.g. bullying?
 - Role do staff understand their role and responsibilities?
 - Change are staff kept informed during periods of organizational change?

Following the increased amount of homeworking for all staff since the Covid-19 pandemic, a further area ('homeworking') has been identified, which considers a staff member's ability to work in their home environment.

3.3 Stress Risk Assessment

- 3.3.1 Regulation three of the Management of Health and Safety at Work Regulations 1999 require employers to assess risks to health and safety from the hazards of work. This includes the risk of staff developing stress-related illness because of their work. In meeting the requirements of the regulations, a 'suitable and sufficient risk assessment' needs to be carried out in all circumstances.
- 3.3.2 A risk assessment has been described as 'a process of looking forward, to anticipate and prevent harm before it occurs'. The traditional health and safety risk assessment process comprises five steps:
 - identify the hazards
 - decide who might be harmed and how
 - evaluate the risk by identifying what action is already being taken; deciding whether it is enough, and if not, deciding what more needs to be done
 - record the significant findings
 - review the assessment at appropriate intervals.
- 3.3.3 The unique and individual nature of mental well-being means that it can only be applied to certain workplace aspects and with limited levels of effectiveness. It must also be acknowledged that there is significant responsibility at individual level for assessing individual risks.

3.3.4 The risks that are associated with violence and lone working can also be contributory factors when considering work-related stress and therefore must be included in the assessments when appropriate.

4. Scope

- 4.1 This policy applies to all staff at the SRA which includes permanent and fixed-term contract (FTC) staff, agency workers and contractors. It addresses the mental well-being of staff and work-related stress.
- 4.2 The policy should be read in conjunction with the following policies with respect to the managing of working patterns and absences:
 - Flexible Working Policy
 - Sickness Absence Policy
 - Time off Work Policy

Reference should be made to the related Guidance for Managers or Guidance for Staff as appropriate for advice on adjustments or solutions that can be considered to problems and hazards.

5. Definitions

5.1 **Stress**, as defined by the HSE is, "The adverse reaction people have to excessive pressure or other types of demand placed on them". It is not in itself an illness, but prolonged exposure to excessive pressures can lead to psychological conditions such as anxiety or depression. There are also physical ill-health conditions such as stomach ulcers and skin conditions that can be aggravated or caused by stress. Other symptoms of stress include:

| Attitude or behavioural change | Relationships with others at work |
|--|---|
| Increased irritability, impatience or moodiness Forgetfulness and difficulty concentrating Increased accident rate or reckless behaviour Loss of motivation and commitment More emotional than usual – crying, sulking or bad temper | Conflict or tension with colleagues or customers More aggressive or passive than usual Withdrawal or alienation Loss of sense of humour, less friendly or sociable Reduced team spirit. |
| Work performance | Attendance and sickness absence |

- Reduced work performance (quality, quantity, the time it takes them)
- More mistakes
- Deterioration in work planning
- Reduced contribution in team meetings.
- Erratic or poor time keeping
- Working longer hours (to keep up or staying away from home)
- Increased absenteeism (especially frequent short periods of absence)
- Presenteeism
- Pressure is the positive, motivating or driving factor that inspires people to perform to their full potential. A reasonable amount of pressure is necessary to make sure staff perform to their capabilities and achieve their goals. However, sustained and prolonged pressure is unhealthy and can be termed as negative pressure. These consistently high levels of pressure can lead to staff developing stress-related symptoms that can impact negatively on workplace performance and personal wellbeing.
- 5.3 **Stressors** are the causes of stress and can be defined as factors that cause stress (i.e. an event or context that elevates adrenaline and triggers the stress response because it throws the body out of balance and forces it to respond). It is accepted that any job can cause stress and that it is not just about being overworked. Boredom and monotony can also be stressful.
- Presenteeism is when staff attend work when they are either unwell or have work or non-work related issues on their mind which prevents them from working effectively. Presenteeism has a similar impact on the workplace as sickness absence, as it affects productivity and morale. It can also lead to longer recovery periods.

6. Responsibilities

- 6.1 HR have a responsibility to:
 - make sure that this policy is implemented across the organisation
 - monitor compliance with this policy and the effectiveness of the measures put in place to eliminate or reduce stress
 - promote health-related programmes for staff
 - make sure staff are meaningfully consulted on any changes to work practices or work design that could precipitate stress
 - make sure staff are meaningfully involved in the risk assessment process
 - provide advice and guidance regarding the stress risk assessment process
 - provide focused training or awareness for staff to meet any specific needs that may have been identified
 - save received risk assessments and action plan on a staff member's file in line with data protection laws.
 - make referrals to Occupational Health Services and the Employee Assistance Programme
 - recruit and train MHFA to provide guidance and support to staff.

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6.2 Occupational Health Service advisors have a responsibility to:

- provide specialist advice
- support the business in implementing stress risk assessments
- support individuals who have been off sick with stress and advise them and their management on a planned return to work
- make referrals to workplace counsellors or specialist agencies as required
- review the effectiveness of measures to reduce stress and provide the business with up to date information as part of any further referrals related to stress.

6.3 MHFA have a responsibility to:

- provide a confidential non-judgement ear to staff who require support
- help staff in need to understand the issues which impact on and relate to mental health, including stress
- identify and assess any risks to an individual, or others, and escalate a matter if necessary
- support with any early intervention and enable recovery by guiding individuals to appropriate professional support and/or practical self-help strategies
- positively raise awareness of, and reduce the stigma around, mental health.

6.4 Senior Management have a responsibility to:

- endorse the policy and promote workplace health and safety
- oversee the monitoring of the effectiveness of the policy and measures put in place.

6.5 All line managers have a responsibility to:

- encourage staff to be open and honest about workloads and working patterns
- make sure there is good communication between management and staff, particularly where there are organisational and procedural changes
- be alert to early signs of stress in their direct reports and attempt to resolve work related issues
- offer support to any staff member who is experiencing stress outside work (e.g. bereavement or a change in personal relationships, etc)
- carry out, document and implement recommendations from risk assessments within their teams
- submit copies of completed risk assessments and action plans to HR, making sure they observe the requirements of data protection laws
- note and advise HR where a direct report has refused a risk assessment
- seek advice from HR if in any doubt about the risk assessment process and stress-related absences
- make sure staff are fully trained to discharge their duties

- consider any reasonable adjustments with their direct report in order to facilitate a successful and supported return to work
- monitor workloads to make sure that staff are not overloaded for extended periods of time
- monitor working hours and holiday arrangements to make sure staff are not overworking and are taking their full entitlement
- attend any training as requested in good management practice and health and safety
- manage sickness absence in line with the Sickness Absence Policy.

6.6 All staff have a responsibility to:

- familiarise themselves with the causes and symptoms of stress to be able to differentiate from pressure and identify when they, or a colleague, may be at risk
- be honest about how they are feeling and the help they need
- access available resources on coping with and mitigating the risk of stress
- seek support if they are experiencing stress or feel they are at risk of stress
- implement any self-help strategies and accept opportunities for support (e.g. staff counselling), if offered, to help manage symptoms of stress.

7. Policy guidelines

7.1 Getting help for stress

- 7.1.1 Staff members experiencing stress, or who feel they are at risk of stress, should take steps to manage their wellbeing as early as possible in order to mitigate the risk of developing a mental health problem or physical condition. To adequately manage their wellbeing, it is important for individuals to identify the stressors in their life and devise coping mechanisms to help reduce the stress. In making an assessment, the severity of particular hazards, situations or events must be determined.
- 7.1.2 In the first instance, or where a staff member feels able to manage their stress, they should access advice and guidance for a better understanding and self-help strategies (see the *Stress and Wellbeing Guidance for Staff* or the Wellbeing and Mental Health Community). It is important for individuals to be honest about how they are feeling and whether they need support in managing their stress.
- 7.1.3 Where it is recognised that a staff member needs help, their line manager should be approached in the first instance for support. Where a staff member feels for whatever reason that they cannot approach their line manager, they may approach HR, a MHFA or their Trade Union representative.

7.2 Conducting a stress risk assessment

7.2.1 Where a staff member has shown signs of stress, or raised that they are at risk of stress, a risk assessment should be carried out using the *Stress Risk Assessment Form* (refer to the relevant *Stress and Wellbeing Guidance* for help on completing the

- form). A copy of completed forms should be filed with HR. Where signs of stress have been identified and a risk assessment offered but refused, a note should be made and HR advised.
- 7.2.2 Where a risk assessment has been conducted, an action plan should be developed using the results of the risk assessment and the indicator tool to determine the level of risk and action required. Where a referral to relevant support services are deemed necessary, this should be outlined in the action plan. A copy of the action plan should be filed with HR.
- 7.2.3 Where an action plan has been developed, timeframes for delivery of actions should be agreed with the member of staff. Flexibility will need to be shown where appropriate, especially where reasonable adjustments are required for staff with mental health problems or where phased returns to work are necessary following a stress-related absence.

7.3 Managing a stress-related absence

- 7.3.1 Where a staff member is off sick, the *Sickness Absence Policy* should be followed. Where an absence is identified as stress-related, an early referral to Occupational Health needs to be made. HR should be contacted for further guidance.
- 7.3.2 Where a staff member returns from sick leave, a return-to-work interview should be carried out covering all aspects of absence and the stress-related problems, where appropriate. The *Return to Work Form* should be completed accordingly, and a copy of the completed form should be filed with HR.

8. Monitoring and review

- 8.1 The HR Team is responsible for this policy and will monitor its use, and application to make sure that it is non-discriminatory and free from bias. Any queries or concerns in relation to this policy should be directed to the HR Manager.
- 8.2 The policy will be reviewed every two years and will be updated taking into account experience gained from its operation and from good practice.

9. Key controls

9.1 Below is a summary of key controls which have been identified as the minimum requirements to be carried out in order to comply with the policy.

| No | . Control | Details | Frequency | Owner |
|----|----------------------------|---|-----------|-------|
| 1. | Mental Health Resources | Mental Health Resources, including MHFAs, have been made available and easily | Ongoing | MHFAs |

| | | accessible to all staff members. | | |
|----|---|---|---------------------|-----------------|
| 2. | Stress Risk Assessment Form | A 'suitable and sufficient risk assessment' has been completed using the Stress Risk Assessment Form and a copy filed with HR where signs of stress have been identified for a member of staff. Alternatively, a note has been made and HR advised where the risk assessment was refused. | Ad hoc | Line Manager |
| 3. | Stress Risk Assessment Indicator Tool | The indicator tool was used to determine the level of risk to the individual and the action required based on their response to the risk assessment. | Ad hoc | Line Manager |
| 4. | Stress Risk Assessment Action Plan | A Stress Risk Assessment Action Plan with agreed timescales has been developed for monitoring and a copy filed with HR where a risk assessment has been completed. | Ad hoc / Ongoing | Line Manager |
| 5. | Occupation Health Services Referral | An early referral to Occupational Health has been made where a member of staff has been absent with a stress-related illness. | Ad hoc | Line Manager\HR |
| 6. | Return to Work Form | A return-to-work interview covering the stress-related problems has been undertaken and the <i>Return to Work Form</i> completed and filed with HR where the member of staff returns to work following a stress-related illness. | Ad hoc | Line Manager |

Policy information

Information relating to the ownership and development of this policy have been provided below should there be any queries or concerns to be reported. It is important that the last review date, as shown below, is checked to make sure the correct version of the policy is being referred to.

Version control:

| Version no. | Updating officer | Review date | Approval date | Key changes |
|-------------|------------------|-------------|---------------|--|
| 1.0 | Preet Sond | 26/01/18 | 22/02/18 | Recommendations considered, and updates made to policy. Updated responsibilities, version control and hyperlinks |
| 1.1 | Sheon Hutchinson | 03/09/20 | - | Policy updated to be SRA only. Narrative on MHFA, reference to homeworking and section on getting help included and staff responsibilities updated. Risk Assessment Form and Action plan also annexed. |
| 2.0 | Sheon Hutchinson | 07/09/20 | - | Inclusion of reference to indicator tool and HR Business Partner for sending of completed forms. |
| 3.0 | Preet Sond | 15/12/21 | - | Reference to HRD removed. |

Responsible business unit: Human Resources (HR)

Approving authority: SRA Senior Management Team

Policy owner: Preet Sond, SRA HR Manager

Security classification: GENERAL

Subject-Matter: Health and Wellbeing

Audience: All Staff

Key terms: Health and Wellbeing; Stress; Pressure; Mental Health; Sickness Absence; Stress

Risk Assessment

Contact details:

Solicitors Regulation Authority (SRA)

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Tel: 0121 329 6253 (ext: 6253) Email: <u>Preet.Sond@sra.org.uk</u>

Legal framework and best practice standards:

Health and Safety at Work (HSW) Act 1974
Health and Safety Executive Management Standards
Management of Health and Safety at Work Regulations 1999

Referenced documents:

Diversity and Inclusion Policy
Flexible Working Policy
Sickness Absence Policy
Stress Risk Assessment Action Plan
Stress Risk Assessment Form
Stress Risk Assessment Indicator Tool
Time off Work Policy

Related training:

N/A

Useful contacts:

Employee Assistance Programme (Unum LifeWorks)

Tel: 0800 048 2702

Web: http://www.unumlifeworks.co.uk/

User ID: unum
Password: lifeworks

Mental Health First Aiders Tel: 0121 329 6998 (ext: 6998)

Email: mentalhealthfirstaid@sra.org.uk
Community: Wellbeing and Mentalhealthfirstaid@sra.org.uk

Annex 1: Stress Risk Assessment Form

This form should be completed by staff members where it has been identified that they are experiencing, or at risk of, stress to help identify potential hazards that may be contributing to this and possible solutions. Forms should be completed with the staff member's line manager and a copy sent to your HR Business Partner.

| Staff Member: | | |
|---------------------|----------------------|--|
| Line Manager: | | |
| Date of Assessment: | Planned Review Date: | |

| 1. | Homeworking | | | | | | | |
|-----|---|-------|---------------------|-----------|-------|--------|--|--|
| No. | 2.1. | | Applicable Response | | | | | |
| NO. | Risk Factor | Never | Seldom | Sometimes | Often | Always | | |
| 1. | I struggle to have dedicated space to work | 5 | 4 | 3 | 2 | 1 | | |
| 2. | I struggle to concentrate because of noise and disturbance | 5 | 4 | 3 | 2 | 1 | | |
| 3. | I have issues with Internet connectivity | 5 | 4 | 3 | 2 | 1 | | |
| 4. | I am juggling work and caring arrangements | 5 | 4 | 3 | 2 | 1 | | |
| 5. | I feel I need to work longer hours | 5 | 4 | 3 | 2 | 1 | | |
| 6. | I am not taking regular breaks | 5 | 4 | 3 | 2 | 1 | | |
| 7. | I am finding video conference calls intensive | 5 | 4 | 3 | 2 | 1 | | |
| 8. | I feel that the way that I am working has a negative impact on me | 5 | 4 | 3 | 2 | 1 | | |
| 9. | I find it difficult to separate work life from home life | 5 | 4 | 3 | 2 | 1 | | |
| 10. | I feel isolated and not part of my team | 5 | 4 | 3 | 2 | 1 | | |

| | | | | Score for Hon | neworking: | |
|-----|---|-------|--------|---------------|------------|--------|
| 2. | Demands | | | | | |
| No. | Risk Factor | | Appli | icable Respon | ise | |
| NO. | NISK FACIOI | Never | Seldom | Sometimes | Often | Always |
| 1. | Different groups at work demand things from me that are hard to combine | 5 | 4 | 3 | 2 | 1 |
| 2. | I have unachievable deadlines | 5 | 4 | 3 | 2 | 1 |
| 3. | I have to work very intensively | 5 | 4 | 3 | 2 | 1 |
| 4. | I have to neglect some tasks because I have too much to do | 5 | 4 | 3 | 2 | 1 |
| 5. | I am unable to take sufficient breaks | 5 | 4 | 3 | 2 | 1 |
| 6. | I am pressured to work long hours | 5 | 4 | 3 | 2 | 1 |
| 7. | I have to work very fast | 5 | 4 | 3 | 2 | 1 |
| 8. | I have unrealistic time pressures | 5 | 4 | 3 | 2 | 1 |
| | | | | Score for | Demands: | |
| 3. | Control | | | | | |
| No. | Risk Factor | | Appli | icable Respon | ise | |
| NO. | RISK Factor | Never | Seldom | Sometimes | Often | Always |
| 1. | I can decide when to take a break | 1 | 2 | 3 | 4 | 5 |
| 2. | I have a say in my own work speed | 1 | 2 | 3 | 4 | 5 |
| 3. | I have a choice in deciding how I do my work | 1 | 2 | 3 | 4 | 5 |
| 4. | I have a choice in deciding what I do at work | 1 | 2 | 3 | 4 | 5 |

| | flexible | | | | or Control: | |
|----|-------------------------------------|---|---|---|-------------|---|
| 6. | My working time can be | 1 | 2 | 3 | 4 | 5 |
| 5. | I have some say over the way I work | 1 | 2 | 3 | 4 | 5 |

4. Manager's Support

| Na | Diek Feeter | Applicable Response | | | | | |
|-----|--|---------------------|--------|-----------|-------|--------|--|
| No. | Risk Factor | Never | Seldom | Sometimes | Often | Always | |
| 1. | I am given supportive feedback on the work I do | 1 | 2 | 3 | 4 | 5 | |
| 2. | I can rely on my line manager to help me out with a work problem | 1 | 2 | 3 | 4 | 5 | |
| 3. | I can talk to my line manager about something that has upset or annoyed me about work | 1 | 2 | 3 | 4 | 5 | |
| 4. | I am supported through emotionally demanding work | 1 | 2 | 3 | 4 | 5 | |
| 5. | My line manager encourages me at work | 1 | 2 | 3 | 4 | 5 | |

Score for Manager's Support:

5. Peer Support

| No. | Risk Factor | Applicable Response | | | | | |
|-----|--|---------------------|--------|-----------|-------|--------|--|
| NO. | | Never | Seldom | Sometimes | Often | Always | |
| 1. | If work gets difficult, my colleagues will help me | 1 | 2 | 3 | 4 | 5 | |
| 2. | I get help and support I need from colleagues | 1 | 2 | 3 | 4 | 5 | |
| 3. | I receive the respect at work I deserve from my colleagues | 1 | 2 | 3 | 4 | 5 | |

| to listen to my work- related problems | 4. | My colleagues are willing | 1 | 2 | 3 | 4 | 5 |
|---|----|---------------------------|---|---|---|---|---|
| related problems | | _ | | | | | |
| | | related problems | | | | | |

Score for Peer Support:

| 6. | Relationships |
|----|---------------|
| | |

| Na | Diek Feeter | Applicable Response | | | | | |
|-----|--|---------------------|--------|-----------|-------|--------|--|
| No. | Risk Factor | Never | Seldom | Sometimes | Often | Always | |
| 1. | I am subject to personal harassment in the form of unkind words or behaviour | 5 | 4 | 3 | 2 | 1 | |
| 2. | There is friction or anger between colleagues | 5 | 4 | 3 | 2 | 1 | |
| 3. | I am subject to harassment/bullying at work | 5 | 4 | 3 | 2 | 1 | |
| 4. | Relationships at work are strained | 5 | 4 | 3 | 2 | 1 | |
| 5. | I am subject to discrimination at work | 5 | 4 | 3 | 2 | 1 | |

Score for Relationships:

7. Role

| No | Dick Footor | Applicable Response | | | | | |
|-----|--|---------------------|--------|-----------|-------|--------|--|
| No. | Risk Factor | Never | Seldom | Sometimes | Often | Always | |
| 1. | I am clear what is expected of me at work | 1 | 2 | 3 | 4 | 5 | |
| 2. | I know how to go about getting my job done | 1 | 2 | 3 | 4 | 5 | |
| 3. | I am clear what my duties and responsibilities are | 1 | 2 | 3 | 4 | 5 | |
| 4. | I am clear about the goals and objectives for my department | 1 | 2 | 3 | 4 | 5 | |
| 5. | I understand how my work fits into the overall aim of the organisation | 1 | 2 | 3 | 4 | 5 | |

Score for Role: 8. Change **Applicable Response** No. **Risk Factor** Never Seldom **Sometimes** Often Always 1. I have sufficient 1 2 3 4 5 opportunities to question managers about change at work 2. Staff are always consulted 1 2 3 4 5 about change at work 3. When changes are made 2 1 3 4 5 at work, I am clear how they will work out in practice **Score for Change:**

| Staff Signature: | |
|-------------------------|--|
| Line Manager Signature: | |

Annex 2: Stress Risk Assessment Action Plan

This action plan must be completed by line managers with a staff member who has been identified as experiencing stress, or at risk of stress, following the completion of the stress risk assessment. A copy of the completed form must be sent to your HR Business Partner.

| Assessment Deta | Assessment Details | | | | | | |
|------------------------------------|--------------------|--|--------------------------|---------------|---------------------|-------------------|--|
| Staff Member: | | | Job Title: | | | | |
| Business Unit: | | | Line Manager: | | | | |
| Assessor: | | | Assessment Date: | | | | |
| Planned Review D | etails | | | | | | |
| Planned Review D | Pate: | | Intended Assessor: | | | | |
| Actual Review Da | te: | | Assessor: | | | | |
| Proposed Plan For each risk factor | r, steps si | hould be taken to make sure systems are in p | place locally to respond | d to individu | ual concerns on a c | day-to-day basis. | |
| 1. Homework | ing (ie ho | ome set up, work pattern and feelings of v | working at home) | | | | |
| Issues Iden (eg no dedicated | | Proposed Control Measures ce) (eg move space based on task) | Ownership | | Priority Level | Timescale | |
| 1) | | 1) | | | H/M/L | | |
| 2. Demands (| ie worklo | oad, work pattern and work environment) | | | | | |

| | Issues Identified (eg workload) | Proposed Control Measures (eg reallocation of duties) | Ownership | Priority Level | Timescale | | | |
|-----|--|--|--------------------------------|----------------|-----------|--|--|--|
| 1) | | 1) | | H/M/L | | | | |
| 3. | Control (ie say over workload and work pattern) | | | | | | | |
| (eg | Issues Identified no dedicated workspace) | Proposed Control Measures (eg move space based on task) | Ownership | Priority Level | Timescale | | | |
| 1) | | 1) | | H/M/L | | | | |
| 4. | Support (ie encourager | ment or resources provided by the or | ganisation, line manager and c | olleagues) | | | | |
| (eg | Issues Identified feeling ill-informed about workplace issues) | Proposed Control Measures (eg appropriate and regular communication) | Ownership | Priority Level | Timescale | | | |
| 1) | | 1) | | H/M/L | | | | |
| 5. | Relationships (ie positi | ive working, avoiding conflict and dea | aling with unacceptable behavi | our) | | | | |
| | Issues Identified (eg low team spirit) | Proposed Control Measures (eg team building exercise) | Ownership | Priority Level | Timescale | | | |
| 1) | | 1) | | H/M/L | | | | |
| 6. | Role (ie understanding | of role and avoiding conflicting roles | s) | | | | | |
| (eg | Issues Identified lack of clarity over role) | Proposed Control Measures (eg clear role descriptions) | Ownership | Priority Level | Timescale | | | |

| 1) | | | | | |
|-------|---|---|-----------------------|----------------|-----------|
| | | 1) | | H/M/L | |
| 7. | Change (ie managing o | rganisational change, including goo | od communication) | | |
| (eg r | Issues Identified no dedicated workspace) | Proposed Control Measures (eg move space based on task) | Ownership | Priority Level | Timescale |
| 1) | | 1) | | H/M/L | |
| Addi | tional Information and/or | Assessor's Comments | | | |
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| Conf | irmation of initial accessor | nont | | | |
| Conf | irmation of initial assessr | nent | | | |
| | irmation of initial assessr Signature: | nent | Assessor's Signature: | | |
| Staff | | | Assessor's Signature: | | |



Code of Conduct for Board and Committee members

- 1 Board and Committee members and external advisers must adhere to the Code of Conduct (or any modification of it agreed by the Board) for Board and Committee members.
- 2 Board and Committee members and external advisers must at all times:
 - Comply with the Seven Principles of Public Life (the Nolan Principles)
 - Act in good faith, in the public interest and in the best interests of the SRA in the performance of duties,
 - Behave with honesty and integrity and make sure that their behaviour does not damage the public's confidence in themselves or in the SRA and the independence of the SRA;
 - Protect confidential information and respect people's privacy;
 - Avoid acting where there may be a conflict of interest and disclose any potential conflicts immediately, declaring interests when requested for inclusion on the SRAs Register of Interests;
 - Keep high standards of personal and professional conduct and respect the independence of regulation;
 - Communicate properly and effectively with internal and external stakeholders;
 - Use SRA resources efficiently and effectively;
 - Value diversity and promote equality and respect;



Handling complaints or concerns about members of the Board of the Solicitors Regulation Authority (SRA)

Purpose

- 1. The SRA places great value on the diversity and independence of members of its Board, and the leadership, skills and commitment they display. It is crucial to the effective operation of the organisation and its Board that each Board member makes an effective contribution to debate, provides appropriate challenge to the views of others, and works well with other Board members, its committees and SRA staff in a collective, inclusive and collegiate manner.
- We have arrangements in place to ensure that Board members are supported in carrying out their role, and understand what is expected of them. These arrangements: include published material such as the Governance Handbook (and annexes including the Code of Conduct for Board and Committee Members), a developmental appraisal process, and the opportunity through the role of the Chair or Senior Independent Director (SID) for supportive discussion and resolving differences, if these cannot be resolved directly between the individuals involved.
- 3. However, on the rare occasion where concerns are raised about the conduct of a Board member which cannot be dealt with informally or through the processes referred to above, a formal process to resolve those concerns may become necessary. This is likely to include where these suggest a material breach of the obligations set out in the Board member's contract or the Governance Handbook (and supporting documents, including the Code of Conduct for Board and Committee members). A material breach is one which raises a question whether the Board member is fit to hold office as a member of the Board. This will include:
 - misconduct or behaviour which is improper, for example demonstrating a lack of probity (such as dishonest or discriminatory behaviour, knowingly acting where there is a conflict of interest, bullying or harassment of staff or colleagues) or otherwise fails to represent the interests of the Board or the values or behaviours expected of Board members, as highlighted in section 4 of the Governance Handbook. This would also include behaviour that would tend to damage the reputation of the organisation, such as disciplinary findings in respect of professional misconduct, or criminal sanctions (other than minor road traffic offences).
 - behaviour that demonstrates that the Board member is unable to contribute positively to the work of the Board, whether as a result of attitudinal or behavioural problems, health or addiction issues, or any other reason. This might include for example, persistent poor attendance or failure to prepare for meetings or engagements, or failure to develop constructive relationships with fellow Board members or the Executive. This might also include failure to act in a collegiate manner or accept corporate responsibility for decisions.



Approach and principles

- 9. Any formal action will be taken in accordance with the following principles:
 - Complaints against a Board member will be handled by the Chair, or if about the Chair, by the SID. The Chair/SID may seek support or delegate any investigation or handling of the complaint to the General Counsel.
 - The Chair/SID may decide to suspend a Board member immediately, pending the conclusion of any investigation, where necessary to do so to protect the reputation or effective operation of the SRA or its Board.
 - Investigations will be conducted confidentially (without prejudice to disclosure as appropriate of any outcome).
 - The procedure will be conducted as quickly and sensitively as possible.
 - The Board member in question will be expected to cooperate fully with any
 investigation and will be given the opportunity to respond to any complaint. The
 SRA will provide all reasonable support to the member (including access to any
 information to which they are entitled) to enable them to respond to the complaint.
 This will include the making of reasonable adjustments when appropriate.

Decision

- 10. The Chair may decide to:
 - a) dismiss the complaint
 - b) uphold the complaint, but decide in the circumstances to take no formal action
 - c) uphold the complaint and issue the Board member with a written warning as to his or her future conduct
 - d) uphold the complaint and remove the person as a Board member of the Board.
- 11. Before reaching a decision, the Chair may take such advice as he she thinks fit and may decide to hear from the Board member and/or other witnesses. Any such meeting will be in private.
- 12. The Chair's decision is final and is not subject to any right of appeal. The General Counsel will notify the complainant and the Board member in writing of the decision, together with the reasons.



SRA delegation framework

Introduction

The SRA Delegation Framework sets out how the SRA's Board, Committees and Executive work together to discharge the SRA's functions.

The SRA is the regulator of solicitors and law firms in England and Wales, protecting consumers and supporting the rule of law and the administration of justice. We exercise the regulatory functions conferred on the Law Society of England and Wales (TLS) by statute relating to solicitors, registered European lawyers, registered foreign lawyers, law firms and individuals working and holding roles within those firms. The statutory powers are found within the Solicitors Act 1974, the Administration of Justice Act 1985, the Courts and Legal Services Act 1990, and the Legal Services Act 2007 (LSA 2007).

TLS has delegated its regulatory powers and functions to the SRA (the "**Company**"), an independent wholly-owned subsidiary of the Society. The TLS General Regulations set out the SRA's terms of reference, along with the framework governing assurance of its work by the Council. This is also governed by the Legal Services Board's Internal Governance Rules, the Company's Articles and an Assurance Protocol agreed between the Law Society and the Company.

The Company is entitled to carry out its delegated functions through its Board, sub-committees and staff. Delegations are a key element in effective governance and management. The Board has established three committees: the Audit and Risk Committee (ARC), Remuneration Committee (Remco) and Nominations Committee. Their Terms of Reference can be found at annex 2 of the Governance Handbook. Matters delegated to the Executive are carried out by individuals within the organisation in accordance with our published Schedule of Delegation.

Delegation Principles

Delegation should:

- 1. Be robust and transparent, with clear lines of accountability and effective oversight.
- 2. Be consistent and proportionate with decisions being made at the most effective operational level and reflecting the strategic role of the Board.
- 3. Promote efficiency avoiding duplication and overlap of roles, and ensuring realistic sequencing/timelines to enable work to progress in a timely manner.
- 4. Reflect only the following key activities: prepare, approve, review, monitor, perform, report. ¹

¹ See the Legend at the bottom of the document for an explanation of how these terms are applied.



Delegation Framework

| Category | Legislative references | Delegation | TLS Group governance | | | |
|---------------------------|--|--|-------------------------|--|--|--|
| Strategy and risk | | | | | | |
| SRA Corporate Strategy | Reg {24(a)} General Regulations (GRs); Rule 4(2)(a) of the Internal Governance Rules 2019 (IGRs) | - Prepared by Executive - Approved by Board - Monitored and reviewed by Board | | | | |
| Business plan | Reg {24(a)} | - Prepared by Executive - Approved by Board - Actions performed by Executive - Performance against plan monitored and reviewed by Board | | | | |



| Strategic risk register | Reg 24(c) - (e) 27 and Agreed Assurance Protocol | Prepared by Executive Reviewed by ARC Approved by Board Controls/actions performed by Executive Monitored by ARC and reported to Board | Systems and processes for risk management reported to GAC |
|----------------------------|--|--|---|
| LSB Self- assessment | Section 4 Legal Services Act 2007 | - Prepared by Executive - Approved by Board | |
| Internal audit plan | Reg [24(c) - (e)] and Agreed Assurance Protocol | - Prepared by Executive - Reviewed and approved by ARC - Internal audit reports are prepared by the internal auditor in accordance with the plan, discussed with Executive and reviewed by ARC - Recommended actions performed by Executive and reviewed by ARC | Systems and processes for internal audit reported to GAC |
| External audit | Reg 27(2) | Selection of external auditors overseen by ARC ARC to recommend appointment of external auditors to Board ARC to approve external audit plan from external auditors External auditor's management letter reviewed by ARC Actions arising from the management letter performed by Executive and monitored by ARC. | Annual report and accounts provided to GAC for preparation of consolidated accounts |



| Financial | | | |
|---------------------------------------|------------------|--|---|
| Annual budget | Reg 24(b) | - Prepared by Executive | |
| | | - Approved by Board | |
| | | - Performance against budget, and development and progress of major capital programmes monitored, by Board | |
| SRA Net funding requirement Reg 24(b) | Reg 24(b) | - Prepared by Executive | |
| | | - Approved by Board to submit to Council | |
| Setting regulatory | ry Reg 24(6) | - Policy approach prepared by Executive | Council sets the |
| fees and | and 19(2)B(3) | - Fee levels and respective contributions prepared by Executive and approved by Board to collect the total Law Society Group Net Funding Requirement approved by the Council. | proportion of practising fees to be applied for permitted purposes relating to |
| | | - s51 application for approval of fee levels by the LSB (to give effect to Council and SRA Board decisions) prepared and submitted by the Executive. | representative functions |
| Annual Accounts | | Prepared by Executive Reviewed in detail by ARC, including as to accounting policies adopted Audited by external auditors Approved by Board | |



| Compensation fund contributions | Reg 23(4) | - Policy approach prepared by Executive and reviewed by Board - Level of respective contributions prepared by Executive, reviewed and approved by Board | |
|---|---|--|--|
| Compensation Fund financial statements | Reg 23(4) | - Prepared by Executive, reviewed in detail by ARC and approved by Chair of Board and CEO | |
| Governance | | | |
| Determining the number of committees, their composition and terms of reference | | Proposals prepared by Executive Reviewed by Committee Chairs Approved by Board Appointments to committees to be made by the Chair, on consultation with the Board | |
| Performance management, appointment, reappointment, terms and conditions of Board members | Regulation 7 the IGRs, Articles of Association | - Protocols for appointment, reappointment, suspension and removal of members prepared by Executive - Appraisal framework prepared by Executive - Protocol and framework approved by Board - Decision-making and implementation in accordance with protocol | |



| Performance framework and remuneration for CEO and SMT | | - Remco to determine performance and remuneration framework - Chair to determine bonus, incentive and non-contractual severance payment for the Chief Executive, and the Chief Executive, for the SMT | |
|---|----------------------------|---|--|
| Delegating authority | Articles of Association | - Delegation framework prepared by Executive and reviewed by Board - Schedule of delegation for executive functions prepared by Executive and approved by Chief Executive | |
| | | - Ad hoc decisions to delegate Board matters to the Chair, Executive, committees or working groups to be approved by the Board | |



| | | • | |
|---|---|--|--|
| Management reporting | Reg 24(d), and (e); 27(1) and (2) and Agreed Assurance protocol | Annual report to the Council prepared by Executive and approved by the Board Annual reports to GAC prepared by Executive and approved by ARC | Annual report to be made to the Council or oversight/governance and financial performance. Annual report from the SRA to be made to, and considered by, the GAC on operation of effective systems of financial control to include accounting principles, financial policies and controls adopted by the SRA, and risk management and internal audit |
| Regulatory Policy | <i>'</i> | | |
| Regulatory and Education policy programme | Reg 23(7) | - Policy proposals prepared by Executive and reviewed by Board - Consultation documentation prepared and approved for publication by Executive | |
| | | | |



| Research programme | Reg 24(a) | - Annual schedule prepared by Executive - Reviewed by Board - Performed by executive | | | |
|---|---|--|--|--|--|
| Making, amending and revoking regulatory arrangements | Reg 23(7) | Draft rules/regulations/codes and guidance governing regulatory approach prepared by Executive Guidance approved by Executive Rules, regulations and codes approved by Chief Executive | | | |
| Applications to LSB/FCA for approval of changes to regulatory arrangements | Reg 23(9) | - Prepared and performed by Executive | | | |
| Operational function | ons | | | | |
| Exercising | Reg 23(1) to (5), (8) and (10) and 24(a), (f) and (h) | - Statutory powers performed by Executive | | | |
| regulatory powers and operational performance | | - Operations and administrative support functions performed by Executive (with responsibility for shared services relating to SRA) | | | |
| | | - Quality assurance activities and handling of complaints about SRA performed by Executive | | | |
| | | - Exercise of powers and operational performance monitored by Board | | | |



| Key performance indicators | Reg 24(a) and (i), and Regulation 4 of the IGRs | - Prepared by Executive - Monitored by Board | |
|--|---|--|--|
| Internal controls/operationa I and compliance policies | Reg 42(c) and (f), and Regulation 4 of the IGRs | - Prepared by Executive - Reviewed by ARC - Performed by Executive | |
| Procurement | Reg 24(f) and Regulation 4 of the IGRs | - Performed by Executive - Exceptional spend of £5million+ approved by the Board | |

| Legend | | | | |
|---------|--|--|--|--|
| Prepare | To draft or design a document, procedure or proposal | | | |
| Review | To consider a draft document or proposal and input into its development | | | |
| Approve | To consent or ratify – includes making final amendments/decision on a document, proposal or course of action | | | |
| Monitor | To maintain oversight and control | | | |



| Perform | To exercise a function or complete a task | |
|---------|--|--|
| Report | To present an account of progress or performance | |
| Advise | [Used in the Committee terms of reference] This includes making recommendations as to a particular course of action. | |



APPRAISAL OF BOARD MEMBERS

- 1.1 Appraisals of individual Board members take place annually towards the end of the calendar year and reflect performance over the previous 12 months.
- 1.2 Appraisals are conducted by the Chair of the SRA Board, save for the Chair's appraisal which is conducted by the Senior Independent Director (SID).
- 1.3 A deadline for provision of any feedback should be set by the Chair/SID. The SID should seek the views of all other Board members ahead of the appraisal meeting.
- 1.4 A summary of any feedback should be shared with the Board member being appraised in advance of the meeting.
- 1.5 It is not necessary for feedback received under this protocol to be retained, other than in summary form which is securely stored by the Board Secretary.
- 1.6 Information on attendance at meetings and involvement in other SRA activity should be provided to the Board Chair and to the individual being appraised in advance of the appraisal meeting.
- 1.7 A formal appraisal meeting takes place, based on any feedback received, attendance records and other relevant information and should cover:
 - member performance
 - any development issues
 - · any issues relating to organisation or Board effectiveness
 - performance of the Board Chair.
- 1.8 For each of these areas Board members should be prepared to discuss:
 - · what has been successful
 - what has not been so successful
 - what might be done differently in the future.
- 1.9 A summary of the outcomes of the discussion is prepared by the appraiser and agreed with the Board member. The completed appraisal record is then logged with the Board Secretary.
- 1.10 A short note for the record should be agreed with the Board member and these should be collated for: a) discussion with the Chief Executive for matters relating to the Executive and organisational issues b) discussion with the Board in private session for effectiveness issues.

SRA Board Member Appraisal



| Board Member: | Date of Appraisal: | |
|---|--------------------|--|
| Appraisal completed by: | | |
| | | |
| | | |
| Member Performance | | |
| what has been successfulwhat has not been so | | |
| successful what might be done | | |
| differently in the future | | |
| | | |
| | | |
| Development issues (if any) | | |
| | | |

SRA Board Member Appraisal



| Organisation or Board effectiveness issues | |
|---|---|
| what has been successful | |
| what has not been so | |
| successfulwhat might be done | |
| differently in the future | |
| | |
| Performance of the Board Chair | |
| Any feedback | |
| | |
| | |
| SUMMARY COMMENTS | |
| (summary of the outcomes of the | e discussion is prepared by the appraiser and agreed with the Board member) |
| | |
| | |
| | |
| | |
| | |

SRA Board Member Appraisal





Governance protocol: Board composition and appointments

Background

The SRA is the independent regulator of solicitors and solicitor firms in England and Wales, protecting consumers and supporting the rule of law and the administration of justice. We are a subsidiary company of the Law Society of England and Wales ("the Law Society"), and are established to exercise the Law Society's statutory regulatory functions, under legislation including the Legal Services Act 2007 (the Act). We do so under powers delegated to us in the Law Society's General Regulations.

Under rule 4(2)(a) of the Legal Service Board (LSB)'s Internal Governance Rules (IGRs) the SRA as the regulatory body must determine its own governance, structure, priorities and strategy. Rule 8 provides that it is for the SRA as the regulatory body to independently appoint, appraise, remunerate and terminate the members of its board.

This protocol sets out the principles determining the composition of the board of directors (the Board) of SRA Ltd, and the process for appointing and reappointing the directors, including the Chair of the Board.

Board composition

- 1. The Board shall comprise directors appointed in accordance with this protocol. It shall be made up of lay persons and solicitors of England and Wales, and any executive members appointed in accordance with paragraph 4.
- 2. The Board shall consist of no more than 11 directors and no fewer than 5. The quorum of the Board shall be 5.
- 3. In accordance with rule 7 of the IGRs, there shall be a majority of lay directors, and the Chair shall be a lay director. A lay person is defined in the Act as, essentially, a person who is not and has never been authorised to conduct any reserved legal activities. In accordance with paragraph 7.7 of the guidance to the IGRs, if a decision on regulatory functions is taken at a meeting where there is either not a lay majority or not a lay chair (or both), this decision must be ratified either at a meeting or by correspondence (if sooner) by a lay majority and a lay chair. In practice, this will generally be effected through formal ratification of the minutes by email circulation.
- 4. The Board may appoint one or more executive members as directors, in addition to non-executive members, if it considers it appropriate to do so. This may be considered desirable in order to offer a balanced approach to decisions by combining detailed knowledge of the organisation (from the executive members) with informed challenge and scrutiny by the independent non-executive members.
- 5. No Board member is there to represent a particular group or to advise the Board on a particular issue. The Board may obtain expert advice on any issue, and in order to do so may convene one or more panels of external advisers to assist it in carrying out its functions.
- 6. The validity of any proceedings shall not be affected by any vacancy among the directors on the Board, or any defect in the appointment of a director.



Terms of office

- 7. Directors may be appointed for an initial term of up to four years and reappointed any number of times for up to a total of six years. Directors may be appointed for an additional term of up to two years where organisational need dictates that that is the best course of action. Maximum terms include any time served as a Chair.
- 8. Paragraph 7 does not apply to executive members who are eligible to be appointed on an ex officio basis and therefore remain so eligible for as long as they hold the relevant executive post.

Appointment and reappointment

Principles of appointment

- 9. All appointments to the Board including the appointment of the Chair will be made on the basis of selection on merit following open and fair competition, with no element of election or nomination by any particular sector or interest groups.
- 10. The Chair and directors must uphold the standards of conduct set out in the Committee on Standards in Public Life's Seven Principles of Public Life (the Nolan Principles appended to this Protocol). The selection process should ensure that all candidates for appointment can meet these standards and have no conflicts of interest that would call into question their ability to perform the role.
- 11. The SRA Code of Conduct requires that directors, including the Chair, maintain high standards of personal and professional conduct, behave with honesty and integrity, and make sure that their behaviour does not damage public confidence in them or in the SRA. Candidates will be required to make declarations relating to their character and suitability for the role (including details of any criminal or disciplinary history) with reference to the Good Character Guidance available from the Judicial Appointments Commission. We will also carry out our own checks if we deem it necessary as part of the recruitment process.
- The process will be conducted in compliance with the Equality Act 2010 which prohibits discrimination, harassment and other unlawful conduct because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Further, as a public authority, in accordance with section 149 of the Equality Act we will have regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out our activities.
- 13. We are committed to the principle that the Board of directors should broadly reflect the regulated community and consumers and organisations using legal services. To this end, we will be mindful of the need to encourage a diverse range of applicants for Board vacancies and where appropriate we will take positive action to encourage applicants from a wide cross section of groups to apply. We will monitor the diversity of applicants at all stages of the recruitment process and will take such action as we think fit to promote diversity if any gaps are identified. A diversity breakdown of the Board will be published on our website. All directors are required to undertake mandatory equality and diversity training.



14. All directors are full members of the Board and have corporate responsibility and accountability for the Board's decisions and policies.

Competencies and criteria

- 15. Clear criteria for the required roles and details of the selection process will be published. The Board will set the criteria advised by the Nomination Committee (a sub-committee of the Board).
- 16. In setting criteria we will be mindful of the skills/experiences required to enable the SRA to fulfil its regulatory functions effectively and efficiently. Criteria will reflect the need for directors to serve in the public interest, to make sure that the SRA is accountable to its stakeholders and to hold the organisation to account for its management and performance. We will also have regard to the desirability of ensuring that the directors (between them) have experience or knowledge of the areas listed in Schedule 1 paragraph 3 of the Act and of issues relevant to the SRA's role arising in both the English and Welsh legal jurisdictions¹.
- 17. Nomination Committee will identify the positions to be advertised in light of any vacancies, and will identify any reappointments due for consideration. An external agency may be appointed to administer the recruitment process. All appointments will be advertised nationally in suitable print and/or online media.
- 18. Standard interview questions will be developed with regard to the published criteria, although additional questions will come up as each interview will have differences depending on the discussion and candidates. This will make sure that all candidates are asked the same questions and are assessed objectively against the desired competencies.
- 19 Each panel member will have a record sheet and will assess candidates' responses to questions against the criteria. A full record of the panel's discussions, points considered and final decisions will be made and maintained.

Appointments

- 20. Appointments will be made by the Board on advice from an appointment panel for which members will be selected by the Board on the advice of Nomination Committee each time a recruitment round is held. The panel will be chaired by the Chair of the Board (who has a casting vote, if necessary). In addition, the panel will include two directors (who may be a solicitor or lay director).
- 21. Appointments to the post of Chair will be made by the Board, advised by the appointment panel. The panel will be established by the Board on the advice of Nomination Committee. In this case, the panel shall be chaired by a person who is

¹ Schedule 1 paragraph 3 of the Legal Services Act 2007 specifies, in relation to members of the LSB, the desirability of securing that members (between them) have experience or knowledge of (a) the provision of legal services; (b) legal education and legal training; (c) consumer affairs; (d) civil or criminal proceedings and the working of the courts; (e) competition matters; (f) the maintenance of the professional standards of persons who provide legal services; (g) the maintenance of standards in professions other than the legal profession; (h) the handling of complaints; (i) commercial affairs; (j) non-commercial legal services; (k) the differing needs of consumers; (I) the provision of claims management services (within the meaning of Part 2 of the Compensation Act 2006 (c. 29)



independent of and external to the SRA (who has a casting vote if necessary). In addition the panel will include:

- the Senior Independent Director
- one or more additional directors (who may be a solicitor or lay director).

Reappointments

- 22. Decisions on reappointment of directors will be made by the Board, taking advice from the Nomination committee, guided by objective annual appraisals and the desirability of ensuring a balance between regular turnover and continuity.
- 23. When considering reappointments, the Board will also have regard to the composition of the Board, including the skills, knowledge and experience of the existing directors.
- 24. A director, including the Chair, can only be reappointed following completion of a satisfactory appraisal in the final year of the existing appointment in accordance with the process and criteria set out in the SRA Governance Handbook.
- 25. A proposal to reappoint an existing Chair requires the support of the Board. The decision to reappoint the Chair, including the length of the term to be served, will be recommended by the Board to a panel constituted as in paragraph 21 for ratification.



Guidance for SRA Board members if complainants contact them or their employers

This note provides guidance on what Board members or their employers should do if they are contacted by someone making a complaint to or about the Solicitors Regulation Authority (SRA). You may wish to share this guidance with the reception or switchboard of any organisation you work for.

What should Board members do?

If individual Board members or their employers are contacted at their SRA email address (or other work or personal address) then they should send the email to the PA to the Chair of the SRA Board, Jane Tandy, (<u>Jane.tandy@sra.org.uk</u>) and Board Secretary Dominic Tambling (<u>Dominic.tambling@sra.org.uk</u>).

Board members or their employers do not need to respond to emails from complainants. If they wish to do so they should explain that the Board member's role is not linked to their employment; that our Board members do not get involved in individual cases or complaints about the SRA; and that they have passed the email to the SRA who will be in touch.

The same message should be given if contact is by telephone (rather than by email) or in person. Please also let Jane Tandy and Dominic Tambling know that a complainant has contacted you.

What will the SRA do?

Complaints are dealt with in line with our comprehensive three stage procedure on our website here: https://www.sra.org.uk/sra/complaints-service/

We will respond to the individual to explain that Board members are not involved in individual cases or complaints about the SRA, that the Board's role is to set our strategy and policy direction and oversee our operational performance as a whole. We will then take matters forward as appropriate in line with our complaints procedure.

If you have any queries, please do contact Board Secretary Dominic Tambling Dominic.tambling@sra,org,uk, or on 07976 182140.

The SRA's updated Complaints Policy which went live on 1 April 2025 says:

I have written to the Board. Will it consider my complaint?

- 47. No, the Board does not have a role in handling individual casework matters or complaints. Rather, its role is to set our strategy and policy direction and oversee our operational performance as a whole.
- 48. Any complaints sent to the Board will be re-directed to our Corporate Complaints Team. The team will decide whether a response is necessary under the Complaints Policy or outside the Complaints Policy (if, for example, the matter is out of time). If a response is needed, the complaint will be sent to the relevant team within the organisation and it will respond.
- 49. A response will not be provided if we have managed contact with you under our <u>Managing unreasonable behaviour towards SRA staff policy</u> and/or we have previously explained our position and already let you know we are unable to respond to you on the same issues.