



Attendees:

Brian Barbour (BB)	Chair
Mark Cook (MC)	Vice Chair
Craig Black (CB)	Board Member
Graeme Eunson (GE)	Board Member
David McColl (DMcC)	Board Member
Tom Wilson (TW)	Board Member
Brian Casson (BC)	SPPA Customer Service Team Leader
Iain Coltman (IC)	SPPA Senior Policy Manager
Dev Dey (DD)	SPPA Head of Customer Services
Stuart MacArthur (SMacA)	SPPA Governance Manager
Clare Moffat (CM)	SPPA Governance Delivery Lead - minutes
Sally Paterson (SP)	SPPA Customer Service Manager

Apologies:

Gordon McKay (GMcK)	Board Member
Claire Pullar (CP)	Board Member
Kay Sandilands (KS)	Board Member
Matt Valente (MV)	SPPA Head of Business Management

1. Welcome, introductions and conflicts of interests

BB welcomed everyone to the meeting and introduced Clare Moffat, new member of the SPPA Governance team who will lead on NHS and Teachers.

No conflicts of interest declared.

2a. Draft Minutes and Action Points from previous meeting and updates

Minutes from the meeting on 9 July 2020 were adopted.

2b. Action Points

The action points were reviewed and the following noted:

- **N18.06 07/11/2019 – Action remains open**
BB explained that the Programme Board had been asked to consider a temporary hold on MSS project which he had not approved.
- **N19.06 06/02/2020 – Action remains open**
MV unable to attend today's meeting; SMacA will provide a general risk update.
- **N22.01 09/07/2020 – Action remains open**
DD confirmed recruitment is underway for Partnership Manager role, with internal interviews w/c 02/11/2020. When appointed, review of Employer Charter will be one

of first tasks undertaken. BB requested update at next meeting in February 2021.

- **N22.02 09/07/2020 – Action remains open**

SP advised dashboard changes require further investigation due to complexity of saved source data. BB requested update at next meeting in February 2021.

- **N22.03 09/07/2020 – Action remains open**

SP confirmed email autoresponse was updated following feedback to better manage customer expectations and will circulate confirmation of the new wording. DD advised that SPPA are monitoring Liberty data to ensure weekends are not recorded as business days for accurate response times. BB requested action carried forward.

- **N22.04 09/07/2020 – Action closed**

BB confirmed that SPPA Business Continuity Plan shared 08/10/2020. MC did not receive copy - CM to resend.

BB advised further information required on test plan including when test performed, update on success of test and improvements identified. SMacA confirmed SPPA Head of Security offered to update at future meetings and agreed to arrange this.

AP 1020.01	Update on Business Continuity test plan <ul style="list-style-type: none">• When test performed• Was test successful• Improvements identified from test
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MC highlighted that five of the six actions from the previous meeting were not resolved or a comprehensive update not provided, and suggested SPPA provide visibility of action progress prior to the scheduled meetings. BB agreed in principle and confirmed schedule now agreed so additional standing items will appear on agenda next year.

3. Customer Service

3b. Customer Service Update

DD explained the risk-based checking model implemented, with level of checking based on administrator's previous outputs, had enabled NHS and Teachers awards teams to deliver higher volumes of retrials. This checking method will be extended across Customer Services.

Business planning sessions were held from which three key focus areas were identified as priorities:

1. **Learning and development** to ensure Managers and Quality Service Coaches (QSCs) have the right tools and learning to support staff working remotely. Training has been arranged as a priority and should be completed by March 2021.
2. **Removing single points of failure** with sharing of knowledge through the production of desk guides and support tools to enable all work tasks to be completed when specific team members are absent/on leave.
3. **Workflow redesign** to identify a more efficient way to report on the stage each work area is at e.g. awaiting information from employer or response from member.

DD confirmed that homeworking is expected to continue until March 2021 at least and may extend beyond. As staff have already been working from home for seven months and will continue doing so over the dark winter months, managers will keep in close contact with

their teams to check staff wellbeing. This will be supported by the targeted people management training planned for Managers and QSCs.

Achievements included answering 45,000 emails and 7,400 critical calls, 2,400 new pensions processed and completion of business planning sessions. DD anticipated customer insight work will be commissioned to explore the contact channels and available contact times preferred by customers e.g. web chat facilities or evening availability.

DMcC queried whether the 45,000 emails answered figure includes the generic responses or if this reflects 45,000 resolved enquiries. DD confirmed that the generic automatic responses are included in this figure along with the fully resolved enquiries. The board raised concerns with the wording of the autoresponse which they felt was not informative for customers. DD confirmed that as the phone service is reduced, dedicated to critical calls - relating to death, ill health and injury benefit – the email channel is the route for all other queries and that email service has not been reduced. SP confirmed that specific feedback previously received on autoresponses had been investigated and wording had been amended. See action point N22.03

BB asked if improved statistics could be separated to establish how many customer emails were handled at first point of contact and how many were closed to customer satisfaction. DD agreed that this could be provided and reflected in future dashboard.

AP 1020.02	DD to update MI to reflect number of customer emails resolved at first point of contact
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MC asked what changes were made and what learning was embedded to achieve the improved email response times between July and September, and how the KPI could be reached. DD advised managers are deploying the right people to action email enquiries and use additional resource when required with balance of BAU. By closely monitoring this, it is expected that progress will continue towards KPI. DD confirmed the KPI for emails is 100% answered within 24 hours.

3a. Customer Service Dashboard

Customer First – Critical Tasks

SP explained that whilst further improvement is required, some of the progress made on email responses was due to sharing resources across NHS and Teachers work areas. The critical call line remains focussed on deaths, ill health and injury benefits and an amalgamation of resource has streamlined the bereavements process along with access of electronic confirmation.

SP advised payment accuracy was adversely affected due to the very high volumes received in July. The estimates teams lent resource to other work areas which has resulted in a backlog of outstanding cases. BB requested information be noted alongside dashboard data to provide context to the statistics, particularly exception reporting. BB asked if checking is in place to ensure payments made are correct and highlighted that the September payment accuracy should be shaded green on dashboard if 100%. SP confirmed that payments were checked on the team, and also by a QA team who perform independent checks so payments are 100% correct.

MC asked if any constructive learnings could be drawn from the complaint themes and noted that a large percentage of complaints were upheld in Q2. SP agreed, and advised that analysis did not show any recurring themes but where areas for improvement were

identified, they were implemented. DD added that Customer Services aim to get it right first time and if something goes wrong, their focus is to understand what that is and resolve any issues before complaint stage is reached. DD acknowledged 12 out of 22 complaints upheld was high so further review will be undertaken. BB emphasised that handling complaints promptly and sensitively is important. MC requested more detail of complaints at future meetings for emerging themes, and updates provided to reflect any findings following analysis. BB agreed that analysis of complaints would provide some comfort to the board.

AP 1020.03	SP to provide analysis of complaints
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SP explained there was a new process in place to review overpayments which includes monthly meetings with Finance team, weekly reports and quarterly reviews. SP outlined that one overpayment was recorded in September 2020 and advised there are processes in place to review every overpayment recorded to analyse reasons and identify errors and learning needs. DMcC asked what had been learned from the practitioners overpayments exercise. DD agreed that identifying errors earlier and improving communication will reduce future payment issues, and explained an update on the ongoing investigation of practitioners funding will be given at the interim board’s next meeting on 13 November 2020.

Customer First – Non-Critical Tasks

SP confirmed that SPPA are reviewing the telephone service with hopes to expand the support available throughout Q4 and are also recruiting Team Leaders and temporary staff. Progress of webchat function will continue and the valuation exercise will be undertaken as well as a review of current processes. BC will provide an update on ABS later.

Operational Excellence

SP advised that BC will provide an update on ABS. SP advised that the GMP reconciliation project is running smoothly but slowly.

Develop Our People

SP explained that the priority is to consolidate and develop training for Team Leaders and Quality Support Coaches and identify single points of failure. Objectives have been agreed at team and individual level and staff in year reviews are underway. Wellbeing remains a focus to ensure staff are supported whilst working remotely. BB asked if any staff members required additional support or were no longer comfortable to work from home. SP confirmed that most people had adapted well and Team Leaders continue to contact staff daily. HR team are also available to provide support.

3d. ABS Update

BB introduced Brian Casson to update on ABS progress. BC explained the majority of statements were uploaded to My Pension Online portal by 31 August 2020 (including statements for GPs and dentists). When an issue was identified through internal QA, all statements were removed from My Pension Online on 4 September 2020 those for GP Practitioners, who were not affected by the issue.

The recovery project was created, led by BC, on 7 September 2020 with the aim to replace online statements by 23 October 2020 and upload any residual statements by 31 October 2020. The Dental Practitioners’ ABS were unaffected but had to be removed as part of a bulk process, then uploaded again on 9 September 2020.

The recovery team have received support from other groups within the agency but have been unable to fully meet the target set. To date, the team have completed 87% ABS upload for officers and GP Practitioners with some work ongoing to establish whether some GPs and Dentists are eligible for an ABS or not. 166,000+ officers were identified eligible for an ABS and to date, 143,953 of these have been uploaded (87%). A technical issue is affecting the progress of 22,000 member ABS. The team are discussing the issue with Heywood and hope to resolve by the end of November 2020.

GE asked how close SPPA were to being able to issue combined ABS/AA statements which members are proactively requesting and when the member self-service portal might be available. BC advised that SPPA do not currently prepare combined statements because of volume and because they are not a legislative requirement but it is the member's responsibility to request this if they suspect they have a combined breach. SPPA can only produce combined statements manually and would require resolution of system and technical issues before they would be able to provide automated statements efficiently in future.

GE asked how quickly SPPA are processing manual requests for AA statements. BC advised the team are working to the three month legislative timeframe but demand is very high and sometimes further information is needed from members or employers before statements which can delay production.

GE asked if ABS are being prepared for deferred members. BC confirmed members who are active on 31 March 2020 (31 March 2019 for Practitioners) are eligible to receive a statement. If a member is not currently active, they must individually request a statement as the system cannot run a bulk process for these members and there is no legislative requirement to provide statements for deferred members. As a result the estimate requests received tend to be driven by deferred members who do not have access to online services. BB asked if SPPA are monitoring demand prioritising future IT development. DD confirmed that SPPA aim to better understand the ABS queries and the demands of annual allowance to plan for future readiness and system development to deliver these services more effectively and efficiently. DD confirmed BC's knowledge and experience will assist the team with planning for 2020 ABS, which is already underway.

The board reconvened after a 10 minute break.

4. Risk Summary

SMacA gave apologies for the lateness of the risk papers and from MV, who was unable to attend, and provided a general update on risk. On 12 October 2020 MV held a risk session with the PB Chairs and Vice-Chairs which BB and MC attended. At this session, MV provided an overview of the risk management framework and received very useful feedback and input on the development of the framework. MV is currently awaiting the Risk & Assurance Manager to take up her post and on a regular basis going forward, it is likely she will attend the pension boards. The strategic risk register has been developed along with a risk profile card for each risk, and these are being reviewed on a regular basis by SLT. Individual risk registers will be developed for each of the Pension Boards and this will give the board a view of operational and strategic risks.

BB emphasised that the board must fully understand the SPPA's risks, even though they may be owned by other areas from the structure chart in the risk paper, and must monitor the top risks to SPPA from an operational viewpoint as well as the PB risks e.g. succession planning and ensuring the board have the right skills to fulfil their role. BB reiterated that the board are seeking succinct papers at each meeting going forward to cover these top

risks which the board may challenge, and positively influence SPPA - as shown cyber security when their concerns raised the level of assessment of the risk.

GE highlighted that the risk profile must incorporate lessons learned from data quality issues, as with the Practitioners' funding issue, with aligned documents and also anticipate future risks that may arise. He anticipated that the remedy from McCloud/Sargeant will place SPPA under enormous pressure to recalculate member benefits, pension entitlements, tax implications as well as additional demand for statements.

SMacA anticipated the Risk Manager, Hannah, will work closely with the operational team to embed the risk framework in SPPA and risks will be reviewed all risk registers on a regular basis, at least quarterly. SLT are regularly reviewing strategic risks and within this will consider upcoming and future challenges for the Agency.

DD confirmed lessons learned from the Practitioner funding exercise will identify what needs to be put in place to mitigate future risk and anticipated that the Partner Relationship Manager will play a vital role to engage with employers on data quality. DD acknowledged the enormity of the McCloud/Sargeant administration and welcomed the appointment of a Project Manager to oversee the remedy action along with engagement with suppliers to enable delivery of the right service for our customers during the transition.

BB confirmed that the addition of horizon scanning to the risk update at each meeting would be useful to see what's anticipated over the next 12 months or longer and suggested quarterly review of strategic risks maybe viewed as tactical. BB reminded that the board have an obligation to look at the data quality in terms of scheme specific data and common data and should schedule this at least annually to discuss targets, achievements and plans.

MC asked for further information on the residual heat map in Annex A and it was agreed that feedback at this risk session on 12 October 2020 had been given on this map which requires amendment.

AP 1020.04	Clarify residual risk heat map in Annex A of Paper 4a
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SMacA noted the board's concerns and assured the board he will highlight this to MV. BB expressed disappointment that MV had been unavailable to update the board on two occasions now and hoped he could attend the next meeting. BB summarised that the board require a regular risk report, summary risk report with horizon scanning covering both the SPPA risks and PB risks, with development of PB risks. SMacA advised that SPPA Governance team will assist and support this development.

5. Policy Update

BB welcomed IC to the meeting.

5.1 Internal Dispute Resolution Procedure (IDRP)

IC explained that the team experienced significant challenge during quarter 2 with the implementation of lockdown which resulted in the KPI to address appeals within four months not being met.

MC noted that five non-medical appeals were rejected and referred back to the earlier discussion on complaints and the need to look for trends and learnings from these. BB

highlighted the high number of medical IDRP's upheld and noted the figures show improvement on previous year. IC confirmed that 12 out of 13 medical IDRP's were upheld in the members' favour which evidenced rigour and thorough research at IDRP stage. SPPA are implementing actions to improve internal learning which will ensure thorough investigation at initial stage to reduce stress for members and progression to IDRP and expected results to take 2-3 months to improve. BB welcomed the action and hoped to see some positive change in February stats.

AP 1020.05	IC to provide update on change of process to improve research at initial stage of medical applications
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5.2 *Sargeant/McCloud Appeal Case*

IC explained the UK Government's consultation on the remedy for the age discrimination which resulted from the 2015 scheme reforms ran for three months and ended on 11 October 2020. SPPA responded to the consultation and also supported the NHS Scheme Advisory Board coordinate a response to the consultation. IC offered to approach the SAB to organise sharing the response with the Pension Board.

The two key options provide for an immediate or deferred choice to determine the benefit accrued during the remedy period. With immediate choice, members decide in 2022 and with deferred choice, the members are given the choice at retirement. IC explained that the SAB leaned towards the deferred choice but highlighted concerns around timescales and that significant discussions which would need to take place in advance of legislation being passed in the timescales required. IC confirmed he is encouraging UK-wide cross department working in order to make sure the administration and implementation of the remedy is as smooth as possible, and that member communication is paramount. Now that consultation is concluded, HM Treasury are considering the 3000+ responses and it is anticipated they will publish their position in January 2021, after which the cost cap work will recommence.

In the meantime officials are working cross-UK in an overarching steering group, a litigation group and a technical working group which Whitehall departments and devolved administrations attend in support of HM Treasury reaching conclusion. IC confirmed that SPPA's new Project Manager will attend a new overarching project management group with him going forward.

Legislation is dependent on HM Treasury's conclusion but IC anticipated primary legislation over the course of 2021 to make changes to the Public Service Pensions Act 2013. The aim is that the bill will be completed towards the end of 2021. IC confirmed that where possible, SPPA will seek to consult on scheme specific legislation but reiterated the ambitious timescales create risk to administrative processes and supply of able software. IC advised that supplier engagement is already underway and this work will accelerate with the project group.

DMcC expressed concern that individual consultation responses were treated with the same weight as large professional bodies, like the BDA. GE confirmed that this was his also understanding and the BMA, whose preference was for the deferred choice underpin, encouraged individuals to respond. DMcC advised that BDA had received feedback from individuals who responded but who did not fully understand the choice and implications and raised concerns over this.

BB requested that the NHS SAB response is shared with the board and noted that in England, the SAB and PB both responded.

AP 1020.06	SPPA to request permission to share NHS SAB response to HMT consultation with PB
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IC advised HM Treasury would likely give a higher weighting to organisational responses than individual responses.

GE raised concerns over the additional workload the remedy will create for SPPA and asked if additional budget will be made available to accommodate this. IC confirmed that when the consultation was launched the Chief Secretary to HM Treasury wrote to Scottish Ministers, explaining the reason for the consultation and updating on cost cap process and acknowledged the additional financial burden on scheme managers and administrators and intimated that there would be some mechanism for financial support. SPPA and the Minister responded to highlight significant concerns on the additional work and system development, and their associated costs, and requested more detail of the funding mechanism.

GE confirmed that BMA strongly support SPPA's request for additional funding to resource this project and asked if the board should take a position of this matter. BB confirmed that the board will express their concern.

IC advised that by the year end the project will have considered the scope and associated costs and if insufficient additional funding is forecast, concerns will be escalated.

AP 1020.07	IC to provide update on remedy project at next meeting
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BB thanked IC for his contribution. DMcC left the meeting.

6. Governance

6a Governance Update

Team structure

SMacA welcomed CM to the governance team and explained that she will be leading on NHS and Teachers governance for SPPA, and highlighted recruitment is ongoing for the vacant Agency & Relationships role which affects corporate boards.

Training update

SMacA thanked BB and MC for their comments and feedback on the training induction pack which is near complete and will be rolled out to all board members as a refresher by the end of November 2020. SMacA asked all board members to supplement this by renewing their training on TPR Public Service toolkit and provide an updated toolkit certificate to Governance team at least once per year.

SMacA confirmed he is developing a series of webinars for all board members. The first webinar was in September 2020 with The Pensions Regulator on their governance administration survey and the next session is scheduled in December 2020 with Government Actuary's Department. SMacA advised he aims to provide 4-6 webinars per year as a solid foundation for board members, along with the TPR toolkit training and induction pack.

Membership

SMacA will provide an update of membership with each Governance update for the board to focus on succession planning and membership and highlighted the current employer vacancy.

GE suggested that webinars be recorded for those who are unable to attend scheduled sessions. SMacA supported this idea and advised that future training sessions will be recorded and made available to the board.

MC expressed thanks for development of the training and emphasised the training is critical to the successful working of all the boards.

BB acknowledged good progress has been made on membership in the last year and asked for confirmation whether CP received an invitation to the meeting. SMacA confirmed that the invitation was sent to all members and suggested that some members may not have managed to attend today because the date had been rearranged in the summer.

6b Terms of Reference

SMacA requested approval of revised Terms of Reference. No comments raised – approved.

Annual Report

BB explained that the NHS PB Annual Report is drafted and requested this be circulated to all board members to day with comments to be returned by 6 November 2020.

AP 1020.08	SPPA to circulate Annual Report to all board members for comment and feedback by 6 November 2020
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7. Any other competent business

No other business raised.

8. Date of next meeting

BB confirmed next meeting will be on 9 February 2021 and requested invitations be issued for future meetings as soon as possible to promote best attendance, thanked everyone for their attendance and closed the meeting.

AP 1020.09	CM to issue 2021 meeting invitations
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Summary of new actions:

Action No.	Para	Action	Assigned	Target Completion Date
1020.01	2b	Update on Business Continuity test plan at next meeting <ul style="list-style-type: none">• When test performed• Was test successful• Improvements identified from test	JS	09/02/2021

1020.02	3b	Investigate updating MI to reflect number of customer emails resolved at first point of contact	DD	09/02/2021
1020.03	3a	Provide analysis of complaints	SP	09/02/2021
1020.04	4	MV to clarify residual risk heat map in Annex A of Paper 4a	MV	09/02/2021
1020.05	5.1	Update on change of process - initial stage medical applications	IC	09/02/2021
1020.06	5.2	Request permission to share NHS SAB response to HMT consultation with PB	IC	ASAP
1020.07	5.2	Update on remedy project at next meeting	IC	09/02/2021
1020.08	6	Circulate Annual Report to all board members for comment and feedback by 6 November 2020	CM	ASAP
1020.09	8	Issue 2021 meeting invitations	CM	ASAP

These minutes were approved on 9 February 2021 as a correct record of the meeting held on 29 October 2020.