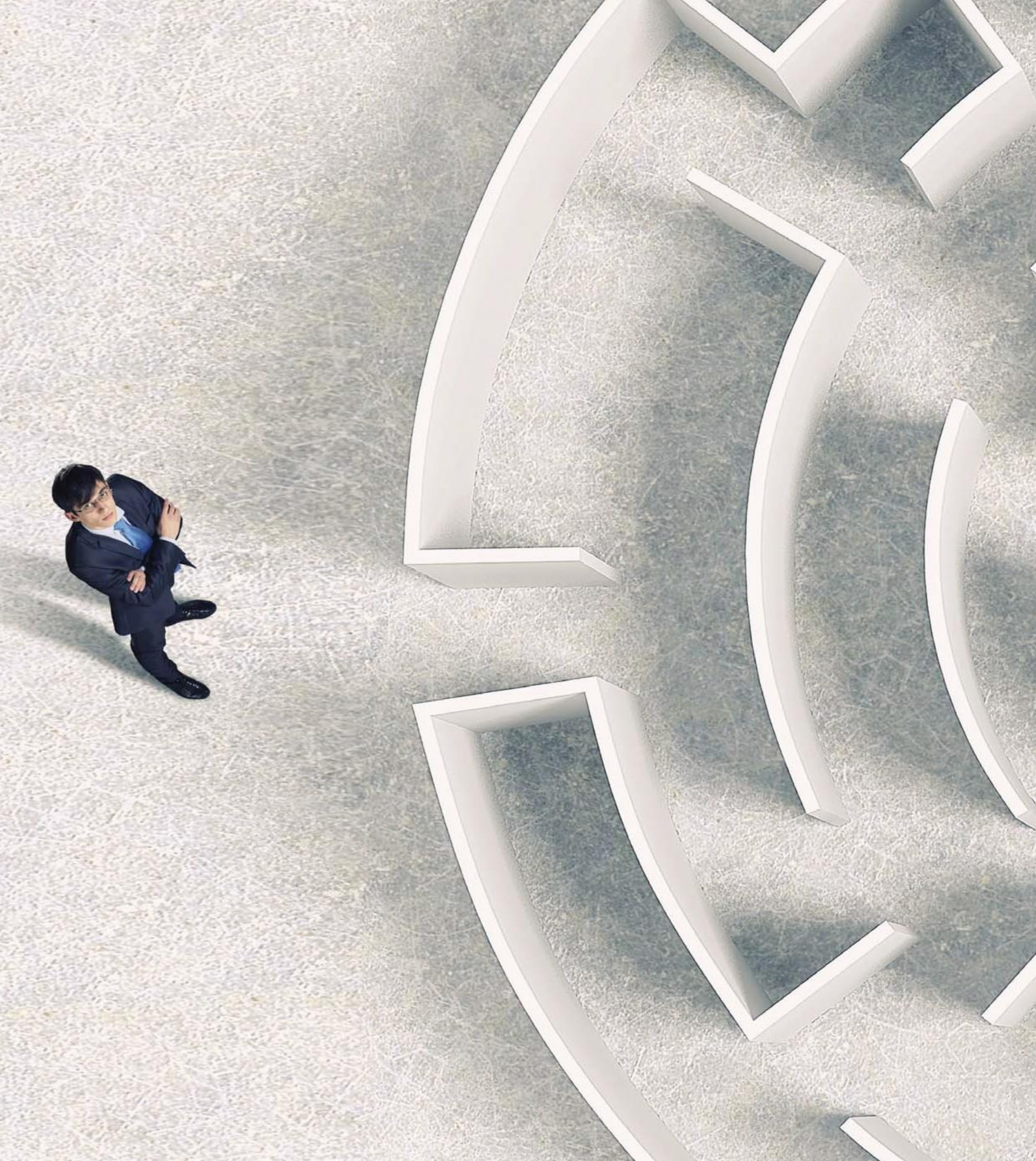

Quality Manual

ARISTONE
SOLICITORS
Solicitors | Commissioners for Oaths

ISSUE REGISTER

Issue	Effective Date	Revision / Description of Change	Approved by
1.0	20 March 2023	First issue of Quality Manual incorporating the requirements of the SRA's Standards and Regulations and the Specialist Quality Mark.	M. Ferreira K. Lally

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INTRODUCTION

All members of staff have an important role to play in the success of the firm. In order to ensure the business is a success, all staff should aim to deliver a high level of client service. This manual outlines the quality system adopted by the firm to help achieve this.

This manual provides a guide as to how our quality system works. Because we want everyone to be familiar with its contents, this document is not meant to be a detailed A-Z of every practice and procedure that the firm follows which nobody reads. Rather, it is intended as a guide, which should be easily understood by all members of staff.

As an SRA regulated practice, our aim is to ensure that we maintain the right culture and environment for the delivery of competent and ethical legal services to our clients in full adherence with the SRA's Standards and Regulations. It is intended that the controls and procedures we have implemented comply with all of the SRA's regulatory arrangements, as well as with other regulatory and legislative requirements, which apply to our firm and to individual solicitors.

In addition, it is intended that the manual documents procedures that meet or exceed the requirements of the Specialist Quality Mark and Law Society's Conveyancing Quality Scheme (CQS)).

Whilst we observe many of the procedures in the manual across the entirety of our practice, we observe the procedures and requirements of the Specialist Quality Mark in relation to our Family work only.

We are committed to ensuring that both our quality system and manual are operating effectively. Therefore, if members of staff have any suggestions on how these may be improved, they should contact Mariyam Ferreira.

SECTION 1. GOVERNANCE

1.1. Overview

This section explains who we are and what we do. It also provides an overview about how the firm operates.

1.2. Legal Framework

This firm operates as a Limited Company. The owners of the firm are the Directors, Kuljit Lally and Mariyam Ferreira.

1.3. Independence & Regulation

The firm operates as an independent body. This means that it provides advice and services without being influenced by any pressure that might prevent it from acting in clients' best interests.

As a firm of solicitors, the organisation is authorised and regulated by the Solicitors Regulation Authority (SRA).

1.4. Organisation Chart

At **Appendix One** is an organisation chart showing how the organisation is structured and all lines of accountability.

1.5. Our Services

Advice and services are provided in the following categories of law:

Categories of Law
Child & Family Law – Private & Public funding
Landlord & Tenant Disputes
Immigration & Asylum Law
Civil & Corporate Litigation
Personal Injury
Property – Commercial
Property – Residential Conveyancing
Wills & Probate
Trusts & Estate Planning

Clients are signposted or referred to other organisations where we do not have the capacity to take on the case, there is a conflict of interest or the problem presented is outside our expertise. Further details are set out in Section 9 below.

The firm's services are delivered from its offices at;

HEAD OFFICE	BRANCH OFFICE	BRANCH OFFICE
Ground Floor, 12 Cardiff Road, Luton LU1 1QG	Summit House 12 Red Lion Square, London WC1R 4QH	Fountain Court 2 Victoria Square, St Albans AL1 3TF

However, where a client is unable to visit our offices, we may be able to arrange a home visit. The firm also acts and advises clients at other locations such as Police Stations, Courts and the Home Office.

The firm's offices are open to clients between the hours of 9.00am to 5.30pm, Monday to Friday.

Charging rates for publicly funded work appear in the Legal Aid Agency manual. Rates for private work will change according to market conditions. Details of our private rates are kept by all fee earners and are available on request.

Further details about the firm's services are contained in the firm's Business Plan. Our Directors conduct a review of the services which we offer and how those services are delivered and whether any changes or improvements could be made. These service reviews are conducted as part of our six-monthly Business Plan review and which are documented in the Plan.

1.6. Clients Served

The firm serves any client regardless of colour, age, marital status, gender, sexual orientation, race, belief, religion, disability, national or ethnic origin. For the firm's Equality and Diversity Policy, see Section 2 below.

Specific client groups which we serve are set out in our Business Plan.

1.7. Strategic and Marketing Planning

In common with most legal firms, the firm considers the majority of its business is derived from recommendation from previous clients. Word of mouth has been and will always continue to be the best form of marketing. Therefore, the firm is keen to ensure that its clients are highly satisfied with its services.

The firm is listed:

- on the MoJ's directory at https://find-legal-advice.justice.gov.uk
- on the Law Society's website: www.lawsociety.org.uk/choosingandusing/findasolicitor.law.

The firm also has its own website: www.aristonesolicitors.co.uk.

We maintain a Business Plan which incorporates a Marketing Plan. We consider this to be a key management tool which feeds in to our overall business and financial strategy.

The Plan documents our firm's objectives including any planned developments for the current year and for the following years.

Lines of Communication

It is important to us that we have a means for staff members to be engaged in the business planning process and that there are clear lines of communication to enable staff to contribute ideas and escalate any concerns about service or management.

We therefore maintain an Internal Communications plan as part of our approach to business and strategic planning documented within the Business Plan. As part of this we have business planning as an agenda item during our monthly team meetings.

In addition to the various means by which communication is overseen and managed (as set out in our Internal Communications plan), should any staff member have any concerns, wish to raise any issues regarding service and management and/or have any proposals or solutions, they may approach our COLP or either of our Directors at any time.

When agreeing our objectives, consideration is given to which members of staff within the firm need to be involved in order to achieve the objective, taking account of the individuals' skills and experience. Where key roles are identified, all relevant individuals are made aware of what is expected of them when executing the Plan. We also consider in detail the money and resources to fund any planned measures and review this as part of our overall financial management.

Review and Evaluation

Our Directors are responsible for all changes to the Business Plan and for evaluating performance of our objectives in order to ensure that progress can be assessed and any necessary changes implemented. As part of that process, we conduct a risk evaluation of our objectives, in particular, evaluating the risks associated with our achieving or not achieving any of our objectives. They report to other key staff on the results of this evaluation and ensures that all changes to the plan are communicated to relevant staff members.

The person with overall responsibility for our Business Plan including our marketing objectives is Mariyam Ferreira. Our COFA, Kuljit Lally, also has a key role in the planning process and in particular, with regard to our financial strategy. Both of our Directors have responsibility for ensuring that the objectives set out in our Plan are put into effect.

Our Directors conduct six-monthly reviews of our Business Plan to ensure that it remains effective and in particular, so that developments are reflected in the Plan as a means to ensure that we are making sufficient progress and are on schedule to achieve our objectives. Records of all reviews are maintained at the beginning of the plan/in a review log and any necessary amendments are made to the Plan as appropriate. The most up-to-date version of the Plan is then made accessible to all staff.

1.8. Separate Business

We maintain a **Register of Other Business Interests**, which records all interests maintained by the Directors and staff, outside of the firm.

This register is maintained by our COLP.

1.9. SRA Compliance Officers

All individuals in the firm have a role to play in complying with the regulatory requirements of the SRA together with our other statutory and regulatory obligations. In particular, all members of our key personnel take responsibility for ensuring compliance.

However, we have appointed Kuljit Lally, who is a Director, to act as our Compliance Officer for Legal Practice (COLP) and our Compliance Officer for Finance and Administration (COFA).

She has a key role in our firm for ensuring that the systems and controls we have in place are effective and for reporting serious issues to the SRA.

1.10. Compliance Office for Legal Practice (COLP)

The primary role of our COLP is to take all reasonable steps to:

- ensure that the firm complies with all terms and conditions of our SRA authorisation
- ensure that our systems and controls enable the firm, its managers and employees and anyone who has any interest in the firm to comply with the regulatory requirements of the SRA
- ensure that the firm complies with relevant statutory obligations
- record any failure to comply with our authorisation or statutory obligations and make such records available to the SRA and to
- report any serious failure(s) to the SRA as soon as reasonably practical.

The key responsibilities of our COLP are to oversee and ultimately take responsibility within our firm for compliance in the following areas:

Area of Responsibility	Specific Responsibilities
Risk Management	Risk Management Policy and Procedures Regulatory compliance including overseeing such matters as renewal of our PI insurance, renewal of our practising certificates and the firm's registration with the SRA, renewal of all lawyers' licences to practise and provision of regulatory information Conflicts of interest Confidentiality & disclosure to clients Business Continuity Plan and reviews Outsourcing & use of suppliers Undertakings
Quality and Client Care	Client care and commitment to quality

Area of Responsibility	Specific Responsibilities
	Client satisfaction & referrals (including annual review of referrals) Quality manual reviews and updates Complaints
Business Planning	Business and service planning Marketing
Equality & Diversity	Equality & diversity Equality and diversity training and communication
Financial Crime Prevention	Financial crime prevention Money laundering Anti-bribery and gifts & hospitality
Data Protection and Information Management	Data protection, information management and security
Health & Safety	Health & safety Fire safety and first aid
Performance Management, supervision & Training	Performance management, training and development File review Supervision of staff

1.11. Compliance Officer for Finance and Administration (COFA)

The primary role of our COFA is to take all reasonable steps to:

- ensure that the firm, our employees and managers, comply with any obligations imposed under the SRA Accounts Rules
- ensure that our systems and controls enable the firm, its managers and employees and anyone who has any interest in the firm to comply with the SRA Accounts Rules
- keep a record of any failure to comply and make this record available to the SRA and
- report any serious failure(s) to the SRA as soon as reasonably practical.

The key responsibilities of our COFA are to oversee and ultimately take responsibility within our firm for compliance in the following areas:

Area of Responsibility	Specific Responsibilities
Financial Management	Overall responsibility for financial procedures Overseeing billing and accounts Monitoring financial stability
Financial Risk Management	Risk management to ensure compliance with the SRA Accounts Rules Financial undertakings File and ledger reviews Regulatory compliance
Supervision and training	Supervision and training of staff and external suppliers and accountants in relation to financial procedures and compliance

1.12. Managerial & Supervisory Responsibilities

Managers' responsibilities

Whilst our COLP/COFA retains overall responsibility for overseeing compliance, both of our Directors have responsibility for ensuring that all responsibilities and objectives are met.

Senior Responsible Officer

We have appointed Kuljit Lally, who is our COLP, to undertake the role of Senior Responsible Officer (SRO).

She has a key role in our firm for being the point of contact with the Law Society and for overseeing our compliance with the Conveyancing Quality Scheme (CQS).

Specialist Quality Mark Quality Representative

Our Quality Representative is Kuljit Lally.

They have a key role in our firm for being the point of contact with the Legal Aid Agency and SQM assessment body and for overseeing our compliance with the Specialist Quality Mark. They have overall responsibility for ensuring that the firm's quality procedures are up to date and are reviewed at least annually.

Legal Aid Agency Contract Liaison Manager

Our Contract Liaison Manager is Kuljit Lally.

Any change of this role will immediately be notified in writing to our Legal Aid Agency Contract Manager.

The Contract Liaison Manager is responsible for ensuring that they are up to date with the requirements of the LAA Standard Contract, for being the point of contact with the LAA and for overseeing any action arising out of LAA Contract audits.

Individual responsibilities

In addition, specific managerial and supervisory responsibilities may be delegated on a day to day level to other personnel and who are required to report at least monthly to the COLP as appropriate. The specific responsibilities are listed below:

Area of Responsibility	Role Profile	Person
Risk Management	Our Risk Manager	Kuljit Lally
	Risk Register	
	Compliance Policy & Plan	
	Risk Management Policy and Procedures	
	Conflict of Interest Policy & Identification and Managing Conflicts Procedure	
	Confidentiality Policy & Disclosure to clients	
	Whistleblowing Policy	
	Outsourcing Policy	
	Contractors Policy	
	Business Continuity Plan and Reviews	
File Management	Accepting and declining Instructions	Kuljit Lally
	File Allocation	
Quality and Client Care	Client Care and Commitment to Quality Policy	Mariyam Ferreira
	Client Satisfaction & Referrals (including annual review of referrals)	
	Quality Manual Reviews and updates	
Complaints Handling	Complaints Handling Procedure	Kuljit Lally
	Complaints Representative	
Equality & Diversity	Equality & Diversity Policy	Mariyam Ferreira

Area of Responsibility	Role Profile	Person
	Equality and Diversity Training and Communication Plan	
Financial Crime Prevention	Financial Crime Prevention Policy and Procedures	Kuljit Lally
	Our Money Laundering Reporting Officer (MLRO) responsible for our Anti-Money Laundering and Countering Terrorist Financing Policy and Procedures	
	Our firm's Anti-Bribery Officer responsible for Anti-Bribery and Gifts & Hospitality Policies	
	Anti-Tax Evasion Policy	
	Property and Mortgage Fraud Policy	
	Benefit Fraud Policy	
	Financial Sanctions Policy	
Insurance Distribution	Insurance Distribution Officer (IDO)	Kuljit Lally
Business and Strategic Planning	Business Plan	Mariyam Ferreira
	Evaluation and Reviews of our Business and Strategic planning and objectives	
	Internal Communications Plan (action plan documented within our Business Plan)	
Financial Management & Billing	Financial & Billing procedures	Kuljit Lally
Information Technology (IT) including email and internet use	Our IT resources	Kuljit Lally
	Our E-mail and Acceptable use of the firm's IT Facilities policies	
Data Protection and Information Management and Security	Our Data Protection Officer (DPO) with responsibility for our **Data Security & Information Governance Manual**	Kuljit Lally
Promoting our services and marketing, website, social	Marketing Objectives	Kuljit Lally

Area of Responsibility	Role Profile	Person
media & publicity	Marketing & Services Plan	
	Website Management Policy	
	Social Media Policy	
	Publicity Policy	
Human Resources & Recruitment	Recruitment & Selection and procedures	Mariyam Ferreira
	Flexible Working Policy and procedures	
	Home Working Policy and Arrangements Procedure	
	Grievance and Disciplinary Procedures	
	People Management	
Health & Safety	Health & Safety Policy & Risk Assessment	Genevieve White
	Fire Safety and First Aid	
	Office Equipment	
Performance Management, Learning & Development	Performance Management, Learning and Development Policy	Mariyam Ferreira
	Performance Management and Learning and Development Procedures	
	Library & sharing of legal research/information	
	Training Plans	
Environment	Environment Policy	Mariyam Ferreira
Child Protection and Safeguarding of children, young people and vulnerable adults	Safeguarding Policy	Mariyam Ferreira
	Vulnerable Clients Policy	
Modern Slavery	Modern Slavery Policy	Mariyam Ferreira
Conveyancing	Stamp Duty Land Tax / Land Transaction Tax Policy	Mariyam Ferreira
	Purchase of Leasehold Property Policy	

Area of Responsibility	Role Profile	Person
	Acting for Lenders Policy	
	HM Land Registry Policy and procedures	

1.13. Compliance

Compliance Systems

This section is linked to our Compliance Policy.

Overall responsibility for ensuring compliance within our firm lies with our COLP/COFA as set out above.

Our COLP/COFA retains overall responsibility for the plans, policies and procedures set out or referenced in this Quality Manual. They oversee compliance against all plans, policies and procedures at least annually as part of their compliance monitoring programme. In particular, an annual compliance review is undertaken each year by our COLP to ensure that all our plans, policies and procedures are up-to date and that any necessary amendments are made. Further details about our compliance monitoring programme are contained in our Compliance Plan.

Records of all reviews of our plans, policies and procedures are maintained by our COLP and documented in our compliance monitoring records.

Any amendments made to any Plan as a result of these reviews are documented in the issue register of the relevant Plan.

Quality Manual

This manual is reviewed at least annually to ensure it is in effective operation across the practice and will be kept up to date by the Directors. Any updating of the Manual must be authorised and implemented by Mariyam Ferreira.

Whenever the manual is updated, the following actions will be undertaken:

- amendments are incorporated into the manual
- the amendment(s) in the Issues Register are recorded at the front of the Quality Manual and
- all staff are informed of the change.

Copies of the manual are kept:

- in our COLP's office
- in hard-copy format in our library
- electronically.

SECTION 2. OUR POLICIES

2.1. Compliance Policy

We consider the maintaining of a compliant, organised and well managed firm to be an important part of the way in which we conduct our business. For us, this means that we acknowledge that, as a business, we have a responsibility to maintain high levels of quality and care and we owe a responsibility to our employees and other staff members, clients, suppliers and other stakeholders.

We acknowledge that failure by our firm or any of its staff members to comply with regulatory requirements can have the following consequences:

- our clients may not receive the appropriate level of service which may justify a complaint or negligence claim

- our firm or individual staff members could face disciplinary action by the SRA or another regulator

- our firm or individual staff members could be exposed to criminal prosecution and/or

- our firm's reputation could be affected.

We are committed to:

- establishing proper policies and processes in all areas of compliance

- consulting with our employees, staff members and other stakeholders on compliance matters

- providing adequate control and monitoring our activities and practice to ensure that our plans, policies and procedures are followed

- appointing a Compliance Officer for Legal Practice (COLP) and a Compliance Officer for Finance and Administration (COFA) and allowing her the time and resources to enable them to carry out their roles properly

- maintaining our Breach Register of all compliance failures or omissions and notifying the SRA of any serious breaches in line with our regulatory obligations

- ensuring all staff members are aware of their obligations and are provided with adequate training and

- having an ongoing reviewing mechanism.

We are committed to ensuring compliance with all statutory and regulatory requirements and professional standards. In particular, we acknowledge that our firm's compliance obligations include those contained in:

- the SRA's Standards and Regulations
- the Equality Act 2010 and other relevant legislation in force from time to time relating to discrimination in employment and the provision of goods, facilities or services

- the Data Protection Act 2018, the Data Protection, Privacy and Electronic Communications (Amendments etc) (EU Exit) Regulations 2019 and the relevant provisions relating to the General Data Protection Regulation contained within the European Union (Withdrawal) Act 2018 (UK GDPR) and other relevant legislation in force from time to time relating to data security
- the Computer Misuse Act 1990
- the Health & Safety at Work etc Act 1974 and other related health and safety legislation
- the Financial Services Act 2000
- the Bribery Act 2010
- the Criminal Finances Act 2017
- the Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (more commonly known as the Money Laundering Regulations 2017)
- the Proceeds of Crime Act 2002
- the Terrorism Act 2000
- the European Union Financial Sanctions (Amendment of Information Provisions) Regulations 2017

together with our obligations to HMRC and in particular in relation to the payment of VAT and PAYE/NIC.

We also provide publicly funded legal services and have to ensure compliance with the contractual obligations set out in our contract with the Legal Aid Agency.

We maintain the Conveyancing Quality Scheme (CQS) and are working towards achieving the Specialist Quality Mark.

Data Security & Information Governance

One of our primary objectives is to ensure that we continue to maintain and develop established systems and controls to protect us from the associated risks to our business, in particular the risk to data security and confidential information.

Designed to work alongside the policies and procedures in our Quality Manual, we have devised our **Data Security & Information Governance Manual** to assist us in ensuring that we meet the standards required in relation to the handling and processing of data. In particular, the **Data Security & Information Governance Manual** sets out the policies and procedures we have implemented to mitigate against risks to the security and integrity of data and confidential information.

Our approach to compliance

We take seriously our obligation to notify the SRA of all serious breaches of compliance. We have therefore implemented the policies and procedures outlined in this manual and our **Data Security & Information Governance Manual** to ensure compliance.

We maintain a Compliance Plan which provides a summary of our arrangements for compliance with statutory and regulatory requirements. The Plan documents our procedures for reviewing our policies and procedures and for the handling and maintenance of any compliance breaches.

The Compliance Plan is kept under constant review by our COLP/COFA and from time to time, they may update the plan to ensure that improvements are made where necessary and that it remains effective. Both of our Directors have responsibility for ensuring that the objectives set out in our Plan

are put into effect.

Awareness and Training

All staff members are notified of any changes to the Compliance Plan or to any of our policies and procedures and must ensure that they are familiar with their contents and understand their obligations.

Each staff member must adopt the highest professional standards and not act in such a way so as to compromise the integrity of our firm. Staff members are required to notify our COLP in the event that they are the subject of bankruptcy proceedings or subject to any financial or criminal investigation.

We are committed to providing appropriate training to ensure that all staff members are properly trained to meet all of their responsibilities. If any staff member is unsure of what is expected of them, they must consult their supervisor for guidance.

Incidence Management

Each staff member is responsible for managing his or her own compliance and for ensuring that no breaches of compliance result from their actions. Failure to comply with our Compliance Plan or any of our policies or procedures by any member of staff may invoke our Disciplinary Procedure and may result in disciplinary proceedings.

We have an open-door policy and encourage all of our staff members to share their opinions regarding compliance.

All staff members are responsible for making our COLP aware of any incident in which one of our procedures or policies has not been followed in order that the circumstances can be evaluated. Staff members are not expected to decide whether the matter they are concerned about constitutes a compliance failure. They should simply report their concerns or suspicions as soon as possible to our COLP and they will decide whether an actual compliance failure has occurred. Irrespective of whether an incident amounts to or could amount to a breach of compliance, our COLP needs to know about any such incidents in order that future breaches or problems can be averted.

Staff members must not obstruct our COLP/COFA from properly fulfilling her roles.

Each staff member is responsible for reporting any breach, or suspected breach, of compliance by another staff member to our COLP in accordance with our Whistleblowing Policy.

Where a staff member is aware that their own actions amount to an actual or suspected breach (or there is a risk of such a breach), they shall personally and immediately report the circumstances of the incident to our COLP/COFA.

Our COLP will, in respect of any breach, consider an appropriate incident management plan to include:

- immediately invoking any necessary procedures to contain the breach and limit the adverse consequences
- assessing any risks associated with the breach to determine the gravity of the breach and whether it is a serious breach of any appropriate legislation or regulations (including the SRA's Standards and Regulations), either in its own right, or as part of a pattern of failures

- determining what needs to be done when the breach is contained

- ensure that any breach (serious or otherwise) is recorded in our Breach Register and evaluated as part of our COLP's ongoing compliance regime

- notification to all relevant individuals and bodies such as the Information Commissioner's Office, the SRA or other third parties such as the police or banks. In particular, serious breaches of the SRA's Standards and Regulations, such as those where there has been a detriment to a client and/or a significant impact on our practice, will be notified to the SRA as soon as reasonably practicable and

- evaluating the causes of the breach and ensuring that any unsatisfactory procedures are corrected.

All breaches will be rectified promptly and monitored in accordance with the requirements of the SRA's Standards and Regulations and as more particularly set out in our Compliance Plan.

Review

Our COLP is responsible for the operation of this Policy and will review it annually to verify that it is in effective operation across our firm.

2.2. Commitment to Quality and Client Care Policy

We are committed to delivering a high level of service to all our clients and to ensuring that both our quality system and manual are operating effectively.

We endeavour to treat our clients fairly and with respect and in all cases to deliver a professional and courteous service. This is achieved by following the policies and procedures outlined in this manual.

In particular, we:

- appreciate that we owe a duty of confidentiality to our clients. To this effect, we maintain a Confidentiality Policy

- consider whether a conflict of interest is present or has arisen in accordance with our Conflict of Interest Policy and procedures for the Identification of Conflicts

- consider our clients' needs, vulnerabilities and their specific requirements in accordance with our Vulnerable Clients Policy. We only accept the instructions where we are confident that we have the required resources, skills and procedures necessary to carry out client's instructions in a competent and timely manner. To this end, any new matters are only accepted in accordance with our procedures for Accepting and Declining Instructions and ensure specific roles are allocated to fee earners in accordance with our File Allocation Procedures. Specific procedures are set out in Section 8 of this manual

- deal with all enquiries from clients in accordance with our Client Enquiries Procedures

- provide services to clients in a manner that protects their interests and is compliant with the SRA's Standards and Regulations and Price Transparency Rules. To this effect, we follow specific procedures at the start of a matter and ensure that we provide sufficient information to clients to ensure they can make an informed decision about our services. Specific procedures are set out in Section 7 of this manual

- safeguarding and promoting the welfare of children and young people who access our services or who we may otherwise come into contact with while providing our services in accordance with our Safeguarding Policy

- ensure that we follow procedures when engaging the services of an external supplier. Our Use of External Suppliers procedures are set out in Section 8 of this manual

- ensure that we explain to clients their rights as data subjects and meet the standards required in relation to the handling and processing of data. Our policies and procedures are set out in our **Data Security & Information Governance Manual**

- ensure that in the event that we are unable to continue to deal with our clients' matter, they are referred properly to another legal provider. Our referral procedures are set out in Section 9 of this manual, and

- take steps to promote equal opportunity and respect for diversity in relation to access to the legal services that we provide. We make reasonable adjustments in order to ensure that our services are accessible to all clients. Our services are provided in accordance with our Equality and Diversity Policy.

All staff members are responsible for maintaining quality and high levels of client care within this practice. Compliance will be monitored through our regular file review process and from reviews of complaints conducted as part of our COLP's compliance regime.

Our COLP maintains overall responsibility for client care. They review our policy and manual at least annually to ensure that we are delivering an optimum service to our clients and to verify that our policy and procedures are in effective operation.

2.3. Risk Management Policy

We acknowledge the importance of managing risk as it helps us to ensure that we are running a successful business and are committed to properly managing all risks that may affect our practice.

As part of our ongoing business planning, we have given (and will continue to give) consideration to risks that may affect our business.

We aim to comprehensively identify and analyse the risks we face in order that we may seek to reduce the probability of those risks occurring and/or develop measures to minimise the impact of them on our business.

The Directors are committed to achieving effective risk management. They are responsible for ensuring adequate resources are available to meet all of our firm's risk management needs.

Our COLP is our Risk Manager and has been assigned specific risk management responsibilities. In

particular, they are responsible for:

- maintaining our Risk Register
- reporting to staff members on risk management
- promoting a culture of risk awareness and compliance and
- reviewing this policy and our risk management procedures annually to verify they are in effective operation.

The Risk Manager's responsibilities are more particularly set out within our Risk Management Procedures in Section 6.

All staff members have a role to play in ensuring effective risk management. Staff members are encouraged to keep abreast of any changes to the services being offered by them or their department and to report any concerns or any new risks or changes to existing risks that come to their attention to our Risk Manager in accordance with our Compliance Policy.

Our risk management procedures are outlined at Section 6 of the manual. However, a number of additional risk management systems and procedures are mentioned throughout the manual. Failure to comply with these procedures may mean that we expose ourselves to unnecessary claims or issues that could be detrimental to running a successful business.

From time to time, we may update our systems and procedures to ensure they remain effective. All staff members are notified of any changes.

All staff members are trained on this policy and our risk management procedures during their induction. Updated or additional training is provided to staff members as and when required, for instance, when we make amendments to this policy or our procedures or where specific responsibilities have been assigned to them.

2.4. Equality and Diversity Policy

We are committed to eliminating unlawful discrimination and to promoting equality and diversity within our policies, practices and procedures. We aim to encourage, value and manage diversity and are committed to equality for all our staff members including potential staff members. These principles of equality of opportunity and non-discrimination also apply to our professional dealings with clients and others.

We treat everyone equally and with the same attention, courtesy and respect regardless of:

- sex (including pregnancy, maternity and paternity)
- marital or civil partnership status
- gender reassignment
- sexual orientation
- race or racial group (including colour, nationality and ethnic or national origins)
- religion or belief
- age (or perceived age)
- caring responsibility or

- disability (past or present).

We take all reasonable steps to ensure that the firm and its staff do not unlawfully discriminate under:

- the Equality Act 2010
- the Employment Rights Act 1996
- the Human Rights Act 1998
- the Part-Time Workers (Prevention of Less Favourable Treatment) Regulations 2000
- the Fixed-Term Employees (Prevention of Less Favourable Treatment) Regulations 2000
- the Work and Families Act 2006
- the Civil Partnership Act 2004, and

  any other relevant legislation in force from time to time relating to discrimination in employment and the provision of goods, facilities or services.

Our firm is particularly concerned that the principles of equality of opportunity and non-discrimination are maintained in the following areas:

- existing staff members
  - progression including promotion and transfers
  - performance management, learning and development including appraisals and training opportunities
  - terms of employment, benefits, facilities and services
  - grievance and disciplinary
  - dismissals, resignations and redundancies
- job applicants
  - recruitment and selection
- clients and access to our services
- engagement with third parties including suppliers and experts.

All staff are expected to pay due regard to the provisions of this policy and their obligations in the SRA's Standards and Regulations and have personal responsibility for ensuring compliance with them when undertaking their jobs or representing our firm and which extends to their treatment of job applicants, existing or former employees, clients, external suppliers and/or visitors.

Discrimination

Discrimination may occur in a number of forms. The more common forms of discrimination are as follows:

- Direct discrimination: where someone is treated less favourably than another person because they are thought to have a protected characteristic (discrimination by perception) or because they associate with someone with who has a protected characteristic (discrimination by association)

- Dual discrimination: where someone is treated less favourably because of more than one protected characteristic

- Discrimination arising from a disability: where a person with a disability is treated unfairly because of something arising in consequence of a disability and that this treatment cannot be justified as a proportionate means of achieving a legitimate aim

- Indirect discrimination: where the same rule is imposed on everyone but which has the effect of excluding one group of people or putting them at a disadvantage because they cannot comply with the rule or only a proportion of the group could comply

- Victimisation: where a person is subjected to a detriment because they have asserted their right not to be discriminated against because of a protected characteristic

- Harassment: where there is unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual.

Staff members & Job applicants

We will appoint, train, develop, reward and promote staff members on the basis of merit and ability.

We treat all job applicants equally and fairly and do not unlawfully discriminate against them. We do this by ensuring that we operate an open and fair recruitment process, using selection criteria which does not discriminate, and making fair and lawful decisions. In particular:

- assumptions that only certain types of person will be able to perform certain roles will not be made
- individual job applicants will be assessed according to their individual qualities and personal merit
- qualifications or criteria including the requirement for the use of years of experience which may have the effect of inhibiting applicants will only be retained where they can be objectively justified
- age limits which may have the effect of inhibiting applicants will generally not be permitted unless there is a particular objective justification for their requirement
- where any criteria for recruitment and selection may have the effect of putting a person with a disability at a substantial disadvantage due to their disability, reasonable adjustments may need to be made to eliminate or reduce the disadvantage.

Our procedures for recruitment and selection and the interview process are set out in Section 5.

We consider all staff members to be equal and aim to create a working environment which is free from unlawful discrimination. This applies equally to voluntary positions and anyone undertaking work experience with us. This will, for example, include arrangements for employment, recruitment and selection, terms and conditions of employment, progression, access to training opportunities, conditions of service, access to promotion and transfers, grievance and disciplinary processes, dress code, work allocation and any other employment related activities. In particular:

- our policies and procedures for performance management, learning and development are developed and reviewed so as to ensure that they are not discriminatory and do not normally result in an imbalance in treatment between staff members
- terms of employment, pay, benefits, facilities and services available to staff members are reviewed regularly so as to ensure that they are provided in a way which is not discriminatory
- qualifications or criteria for promotion, appraisal, transfer and training, such as length of service or years of experience which may discriminate against certain staff members will only be permitted where they can be objectively justified

- where any criteria for promotion, appraisal, transfer or training or the provision of terms of employment, pay, benefits, facilities and services may have the effect of putting a person with a disability at a substantial disadvantage due to their disability, reasonable adjustments may need to be made to eliminate or reduce the disadvantage. In particular, in accordance with our Flexible Working Policy, we actively consider the making of reasonable workplace adjustments to ensure that staff members with a disability, vulnerability or particular need are fully supported and are not put at a substantial disadvantage compared to other staff
- we will monitor the physical features of our premises to improve access and working arrangements for all staff but staff members who experience any difficulties at work are encouraged to raise these issues as soon as possible in accordance with our Flexible Working and Workplace Arrangements Procedures.

Clients and access to services

Wherever possible, we take steps to promote equal opportunity and non-discrimination in relation to access to the legal services that we provide, taking account of the diversity of the communities that we serve, in order to ensure that, subject to funding or other reasonable constraints, our services are accessible to all clients.

We are committed to meeting the diverse needs of clients. We take steps to identify the needs of clients in the community and we document in our Business Plan and within our quality procedures how we will meet clients' needs and how we will ensure the services which we provide are accessible to all. We take into account, in particular, the needs of clients with a disability and clients who are unable to communicate effectively in English. In particular, we consider the need to make reasonable adjustments to ensure that clients with a disability, vulnerability or particular need are not placed at a substantial disadvantage and do not pass on the costs of adjustments to these clients. We consider whether particular groups are predominant within our client base and, where possible, ensure that their needs are met.

Experts & Third Parties

We do not unlawfully discriminate in dealings with experts and third parties. All experts and third parties are instructed from a register of experts and have been assessed by the firm as being capable of meeting both our firm's and our clients' requirements. Experts and third parties are instructed because they satisfy our selection criteria in accordance with our Use of External Suppliers Procedure.

Monitoring Diversity & Collating Equality Data

We monitor and record, at least annually, equality & diversity information about job applicants on the basis of gender, marital status, age, disability, religion and ethnic groups. We ask job applicants if they would be willing to complete our Equality & Diversity Monitoring Form, a copy of which is at **Appendix Two**, noting that they have the right to refuse to do so or to choose only to answer selected questions at their own discretion.

We monitor and record equality & diversity information about existing staff members including key personnel on the basis of gender, sexual orientation, age, disability, religion, ethnic groups as well as other questions based upon the staff member's social and educational background as requested by the SRA. We ask staff members to complete the SRA's diversity monitoring form as recommended and updated by the SRA from time to time, noting that staff members have the right to refuse to do so or to choose only to answer selected questions at their own discretion. The data is collated and submitted to the SRA as and when required, usually bi-annually.

All monitoring data will be reviewed by Mariyam Ferreira and they will be responsible for consideration of whether any remedial action should be implemented in particular where any equality and diversity issues including any under-representation of any of the groups above is identified. In such cases, the firm may seek professional advice from an employment specialist and/or the Equalities and Human Rights Commission in relation to the appropriate remedial action to be taken. It is recognised that such remedial action could include the identification of specific training needs and/or the taking of positive action to increase employee diversity.

Implementation and Review

Mariyam Ferreira is responsible for implementing and monitoring our Equality & Diversity Policy. In particular, they are responsible for:

- ensuring that adequate resources are available to meet equality and diversity needs
- providing equality & diversity information to the Legal Aid Agency as required in relation to staff and clients under the terms of the LAA Contracts
- reporting to staff members on compliance
- collating and reporting diversity data to the Solicitors Regulation Authority as and when required and, where applicable, overseeing the publication of such data
- promoting a culture of equality and diversity awareness and compliance by means of education and training and overseeing arrangements for the sharing of information on equality and diversity. This may include informing staff of any new updates on equality and diversity including bulletins or articles published by regulators and/or in the legal press
- providing assistance to any individual staff members who have been assigned responsibility for any specific equality and diversity actions
- considering whether clients have any vulnerabilities which may, in accordance with our Vulnerable Clients Policy, require us to take additional care and/or make reasonable adjustments to ensure that we meet their needs and provide our services in a manner in which facilitates their ability to make informed decisions.
- considering whether reasonable adjustments need to be made for clients, third parties and staff members. Requests for adjustments and flexible working arrangements are considered in accordance with our Flexible Working Policy
- ensuring that appropriate action is taken in relation to any non-compliance identified under this policy or barriers to equal opportunities and
- reviewing this policy annually to verify it is in effective operation.

Equality & Diversity Training

Our equality & diversity training and communication objectives are reviewed at least annually and detailed in our Equality and Diversity Training and Communication Plan.

All staff members are informed of this policy as part of their induction.

We ensure that all managers and supervisors with responsibility for any of the areas of particular concern as set out above are provided with appropriate equality and diversity training and/or written instructions where necessary, which may be updated as required.

Other staff members may also be required to attend training on compliance with equality & diversity requirements. We identify additional equality and diversity training needs as and when appropriate and address them as part of staff members' training plans.

Non-compliance

We treat seriously all complaints of unlawful discrimination made by any of our staff, clients, barristers, experts or other third parties and will take action where appropriate.

Any staff member who believes that they may have been unfairly discriminated against are invited to raise a grievance in accordance with our Grievance Procedure. Staff members will not be victimised for raising a grievance in good faith. Grievances will be dealt with seriously in accordance with our Grievance Procedure and the complainant will be informed of the outcome.

Other complainants of unlawful discrimination including job applicants, clients and other third parties are invited to raise a formal complaint which will be handled in accordance with our Complaints Handling Procedure.

Where acts of unlawful discrimination, harassment or victimisation and/or failure to comply with this policy by any member of staff are identified, Mariyam Ferreira will ensure that our Disciplinary Procedure is followed and this may result in disciplinary proceedings being instigated.

They also monitor the number and outcome of complaints of discrimination.

2.5. Vulnerable Clients Policy

As a business, we endeavour to ensure our services available to all clients in a manner which may facilitate their ability to make informed decisions.

We aim to ensure that the service we provide to vulnerable clients takes into account their needs and that we have proper regard for their mental capacity or vulnerability.

In accordance with our Equality and Diversity Policy, we recognise that there may be some clients to whom we may need to make reasonable adjustments to ensure that we properly meet their needs.

As a result of their vulnerability, some clients may lack capacity to make decisions and provide us with instructions and we may need to ensure that statutory or other safeguards are followed. For other clients, whilst they may have capacity to make decisions and provide instructions, they may need us to provide extra support to enable them to fully engage with us and/or access our services.

Identifying vulnerable clients

A person may be vulnerable because of:

- physical disability
- mental health issues
- learning difficulties or low literacy
- another illness or impairment
- undue influence or duress
- bereavement
- drug or alcohol dependency issues
- social or welfare issues, and/or
- a combination of any of the above factors.

It may not always be easy to identify vulnerability. Some signs may be obvious while others are only just perceptible or hidden. Staff members should not assume that a client will tell us of any difficulties.

Simple observation will identify many mobility problems, physical or sensory disabilities or more severe impairment of mental capacity. However, if we engage with any client primarily by telephone or other remote means, rather than seeing them face to face, it may not be easy to identify vulnerability.

Signs of vulnerability to be alert to, may include:

- a client asking the staff member to speak more slowly, speak up or repeat things
- a client seeming confused/flustered
- a client who sounds out of breath, indicating a lack of mobility due to age and/or illness
- a client who says "*my son/daughter/partner deals with these sort of things*"
- a client's first language is not English, or
- a client who appears to struggle to understand.

It is important that staff members appreciate that they do not necessarily need to feel inhibited about asking for more information for fear of being intrusive. Many clients will be open about any disability they have or specific assistance they require and to discuss how you can best meet their needs.

To identify and deal appropriately with a vulnerable client, staff members will also need to use their active listening skills to:

- identify the client's individual needs
- adapt their approach to suit the client's needs.

Responding to the needs of vulnerable clients

All staff members need to be alert to the fact that they, as individuals, or the firm as a whole may be talking or otherwise corresponding with a vulnerable client and that they:

- may need us to provide additional support
- may need us to make reasonable adjustments.

If a staff member identifies that a client may be vulnerable, they should consider the following when engaging with them, especially during telephone calls:

- be careful and be sure to explain everything very clearly
- speak clearly and slowly

- keep the call focused
- be patient and do not rush the client
- be prepared to repeat information if necessary
- clarify the client's understanding, perhaps by asking them if there anything they would like you to explain
- offer alternatives to talking on the phone – letter/text/email and check if Large print or Audio is required
- check if there is a better time to call
- check if they need to talk to or involve anyone else before making their decision, (i.e. trusted family member, guardian or carer)
- make sure the client is not flustered, agitated or in a confused or emotional state when they make their decision to proceed. If in any doubt, we must:
    - offer to give the client more time to consider
    - check if there is a better time to call and/or
    - offer to "conference call in" a trusted third-party carer, guardian or family member if this would help.

Occasionally, because of a particular vulnerability, it may be the case that a client may pose a threat to their own safety or the safety of others. Where a staff member has concerns that a client is angry, abusive or whose behaviour is so extreme that it poses a possible danger to health and safety, this should be reported immediately to Genevieve White in accordance with our Health & Safety Procedures (Section 3).

Where staff members identify any vulnerabilities that may require other tailored reasonable adjustments to be made, they should notify Mariyam Ferreira.

Where special measures or reasonable adjustments are identified, this is evidenced on the file opening form within the casefile.

Mental capacity

When we think about vulnerabilities, we should also consider mental capacity and, in particular, the ability to make decisions and to give instructions. Staff members need to be satisfied that the client has demonstrated that they understand the service we are providing and that they are in agreement to proceed with the matter in question (with full understanding of what that means). Staff members must also be satisfied that we are acting in the client's best interests by proceeding with the service.

Occasionally, it may become apparent that a client may lack mental capacity, either temporarily or permanently. There may be other instances where we feel that we cannot give the appropriate support to a client and that we are not acting in their best interests by continuing to advise or assist them. We may determine that a client needs health assistance or other safeguarding measures by another professional but may have to accept that we cannot compel a client to accept any recommendation or other adjustment.

Where staff members have any concerns about a client's capacity to give instructions or make decisions or if there are any other concerns about a client's wellbeing, they should notify Mariyam Ferreira in order that they may make determine how best to protect our client's interests. They will determine whether our firm needs to make any reasonable adjustments or consider positive action.

Safeguarding

Staff members need to remain vigilant to incidents where any client's appearance or behaviour cause suspicion of harm, abuse, neglect or exploitation which would require notification in accordance with our Safeguarding Policy.

Review

Mariyam Ferreira reviews our policy as part of our overall approach to client care at least annually to ensure that we are delivering an optimum service to our clients and to verify that our policy and procedures are in effective operation.

2.6. Social Media Policy

Social media is a popular means of communication and may be used as part of our business. This policy outlines the use of social media when carrying out the business of our firm and provides guidelines for staff who wish to participate in social media in which they are identifiable as members of our staff.

Social media may include but is not limited to:

- social networking sites (for example, Facebook, Myspace or LinkedIn)
- video and photo sharing websites (for example, You Tube or Flickr)
- internet blogs and
- micro-blogging (for example, Twitter).

We do not wish to discourage nor unduly limit staff members' personal use of social media and staff members are personally responsible for the content they publish in a personal capacity on any form of social media. However, those staff members participating in social media should recognise the potential for harm to our business in circumstances where they can be identified as an employee or consultant of this firm. Therefore, staff members are forbidden from making reference to our firm or our services when participating in social media in a personal capacity.

All staff members must obtain prior approval from the Directors before they participate in any form of social media as a representative of our firm or by which they are otherwise identifiable as members of our staff. They will then agree with the staff member any limits on this authority and the manner in which they may participate in the social media.

All communications or information submitted via social media as part of or on behalf of our business or in which the author would otherwise be identifiable as a member of our staff must be approved in advance by the Directors. All such communications or information must:

- be accurate and not misleading

- comply with all of our firm's policies in this manual including but not limited to those relating to confidentiality and publicity

- comply with all of our firm's policies in our **Data Security & Information Governance Manual** including but not limited to those relating to data protection, internet and email

- be within the staff member's area of expertise and within the scope of their authority

- adhere to the terms or conditions of use of the relevant social media site

- not consist of confidential information obtained in the staff member's capacity as an employee or consultant of our firm

- not be offensive, discriminatory, threatening, harassing or that might otherwise be construed as such

- not consist of any content which could cause damage to the firm or our reputation and

- not infringe legal or other obligations as regards copyright, data protection and confidentiality and must not otherwise be unlawful.

All staff members accessing social media via our network, internet and intranet must do so in accordance with the policies and procedures set out in our **Data Security & Information Governance Manual**.

The Directors are responsible for monitoring staff members' use of social media and any communications or information submitted via that media as part of or on behalf of our business. Staff members' use of the firm's computers, network and domain for participating in social media in a personal capacity may be monitored by our firm in accordance with the policies and procedures set out in our **Data Security & Information Governance Manual**.

The Directors have overall responsibility for this Policy and for monitoring compliance. They carry out an annual review of the Policy to verify it is in effective operation.

2.7. Website Management Policy

Our website is primarily used to convey information about the firm. It states who we are, the services we deliver and gives clients our contact details. We do not provide any legal advice through our website.

Review

Mariyam Ferreira is responsible for managing our website. They review the website every month to ensure that:

- the content is up to date

- the content does not infringe copyright

- it complies with the Data Protection Act 2018, the UK GDPR, and is in accordance with all of our firm's policies in this our **Data Security & Information Governance Manual**

- it is accessible to disabled clients and potential clients and considers the recommendations in the Web Content Accessibility Guidelines

- the means by which the website is hosted remains secure and accessible

- it accurately conveys the services we offer

- whether we are able to add more content so as to raise the profile of the organisation such as any community focused activities or events

- any publicity conforms with the requirements in the SRA's Standards and Regulations and is in accordance with our Publicity Policy and

- it complies with Equalities legislation and is in accordance with our Equality & Diversity Policy

- it complies with the SRA's Price Transparency Rules in terms of service levels, costs and complaints handling.

The review is recorded on our website review record, which can be found at **Appendix Three**. All content material to be published and/or uploaded onto the website or existing material to be removed from the website is approved by Mariyam Ferreira.

Security

It is imperative to us that our website is secure.

The security of our website is reviewed as part of our website management review.

Means by which we ensure that the website is secure include:

- the website being hosted on an external server which is backed up daily as part of our hosting package
- the website being managed by a reputable external service provider which has been instructed and is monitored in accordance with our Contractors Policy
- we maintain an SSL certificate.

Details of our website hosting and all agreements with the service provider, including the means by which the provider keeps our website secure (such as any security software and assets) are held by Mariyam Ferreira.

Maintenance

Any material to be published/uploaded onto the site or instructions on any existing content to be removed or amended is sent to Mariyam Ferreira / our external web consultants so they can ensure it is uploaded onto or removed from the site.

Mariyam Ferreira is responsible for this Policy and reviews it annually to verify it is in effective operation.

2.8. Health & Safety Policy

We consider the maintaining of a positive health and safety culture to be an important part of the way in which we run our firm and conduct our business. For us, this means that we acknowledge that, as a business, we have a responsibility to our employees and other staff members, clients and suppliers.

As an employer, we acknowledge that our firm is obliged:

- to comply with the Health and Safety at Work etc Act 1974 and all other relevant legislation, Codes of Practice, Health and Safety Executive Guidance Notes, and recommendations of HSE Inspectors and Environmental Health Officers during visits or inspections
- to comply with all relevant fire safety regulations including pursuant to the Reform (Fire Safety) Order 2005 and to cooperate with any local authority or Fire Service recommendations
- to consider and comply with the Equality Act 2010 and the need to make reasonable adjustments to avoid placing someone with a disability or an older person at a substantial disadvantage and not to discriminate against employees who suffer from a disability under the Act including long term ill health caused by stress at work
- to encourage the consideration of safety matters both in and outside of our firm and to promote a culture of discussion and engagement on such matters
- to ensure that the operations of our firm do not cause injury or damage to any person or adjacent property
- to identify and provide adequate information, instruction, training and supervision to employees and others to ensure their health and safety
- to provide adequate facilities for the welfare of employees
- to provide effective support to employees in managing stress and other mental health problems and to encourage better recognition of mental health issues across our firm, and
- to conduct appropriate risk assessments and ensure proper procedures as necessary to ensure the health and safety of employees and other persons in line with all statutory and regulatory requirements.

We are committed to:

- take all reasonable steps to ensure that our firm and its representatives comply with:

    - the Health & Safety at Work etc. Act 1974
    - the Management of Health and Safety at Work Regulations 1999
    - the Workplace (Health, Safety and Welfare) Regulations 1992
    - the Equality Act 2010

  as well as all other relevant legislation, Codes of Practice, Health and Safety Executive Guidance Notes, and recommendations of HSE Inspectors and Environmental Health Officers during visits or inspections.

- maintaining the health & safety of all of our employees and other staff members including agents and consultants (working from our premises or from other locations) and all those who visit our premises

- providing adequate control of the health and safety risks arising from our work activities

- consulting with our staff members and other relevant parties on matters affecting their health and safety

- providing and maintaining safe equipment

- ensuring safe handling and use of substances

- ensuring all staff members are competent to do their tasks and are provided with adequate training

- ensuring that the work done by or on behalf of our firm does not adversely affect the health and safety of any contactors or members of the public

- preventing accidents and cases of work-related ill health

- promoting an environment which prevents and manages stress and reduces risks to mental health

- maintaining safe and healthy working conditions, and

- having an ongoing reviewing mechanism with regard to health and safety.

We will strive to maintain excellence in health and safety matters and will so far as reasonably practicable, ensure that we provide satisfactory financial resources and the support needed to meet these objectives and that systems are in place which ensure the effective planning, control, monitoring and review of the measures and arrangements.

We provide our staff members with training on our Health & Safety Policy and seek to raise awareness of the impacts of our business and methods to reduce them.

All members of staff are also encouraged to make further suggestions in relation to our procedures or other initiatives we could undertake. If a member of staff has a suggestion, they should contact the Directors.

We are fully committed to the highest possible standards of openness, honesty and accountability and actively encourage all of our staff members, who have serious concerns about health and safety issues, to voice those concerns openly and in accordance with our Whistleblowing Policy.

The Directors have overall responsibility for compliance and will review this Policy on an ongoing basis and at least annually to verify it is in effective operation. Records of the reviews are maintained and any necessary amendments are made to the Policy as appropriate.

Day to day responsibility for ensuring the policy is incorporated into our working practices and overseen by Genevieve White.

Section 3 of this manual outlines further information in relation to health and safety and any other key roles including the details of our first aiders.

2.9. Performance Management, Learning & Development Policy

We recognise that our staff members are our most important resource and are committed to ensuring that all staff have access to the training they need both for their own development and to enable them to deliver a high-quality service.

We therefore wish to ensure that:

- staff have a clear understanding of what is expected of them and how they contribute to the success of the firm

- staff members are competent to perform the tasks they are employed to carry out and are further developed in a way in which both the individual and the firm think appropriate

- the firm has sufficient solicitor competencies across all practice areas and is able to provide a proper standard of service to its clients

- solicitors in the practice meet the SRA's Competence Statement, required of them personally

- all relevant members of staff involved in Conveyancing work stay up to date in residential conveyancing including the core client care and risk management areas associated with that practice and attend and complete relevant CQS training on time. In addition, that relevant members of staff are aware of, understand and follow:

    - the Core Practice Management Standards of the Law Society's Conveyancing Quality Scheme and the manner in which our firm complies
    - the CQS and National Conveyancing Protocol, wherever possible

- all identified and necessary training is completed on time

- the firm identifies the necessary resources, training and support that staff members need to carry out their roles, and

- the firm recognises individual contribution from staff members.

Section 5 of this manual outlines our procedures in relation to learning & development (including supervisor training & training evaluation).

Our performance management procedures (see Section 5 below) are designed to encourage good staff management practice and improved communication between the Directors and staff. All staff will be subject to an annual performance management appraisal (further details are available at Section 5 below). In addition, staff performance will be considered on an on-going basis (through supervision methods) and where appropriate, further training or performance management tools will be utilised in line with this policy and the procedures at Section 5.

Mariyam Ferreira is responsible for our Performance Management, Learning and Development Policy. They review this Policy at least annually to verify it is in effective operation.

2.10. Whistleblowing Policy

We are fully committed to the highest possible standards of openness, honesty and accountability. In line with that commitment, we actively encourage all of our staff members, who have serious concerns about any aspect of our firm or the work that the firm or its members of staff undertake, to voice those concerns openly under this Policy. To that end, this Policy applies to our Directors as well as all employees including other workers such as agency workers, consultants and home workers.

Our Policy is designed to take account of the Public Interest Disclosure Act 1998 (PIDA) as amended by the Enterprise and Regulatory Reform Act 2013 and which protects staff when making disclosures about certain matters of concern, where those disclosures are made in accordance with the provision within PIDA.

With that in mind, this policy is intended to:

- encourage staff members to feel confident in raising any serious concerns within the firm

- ensure that all concerns raised are responded to and that staff members are able to pursue them if they remain unsatisfied

- ensure that we comply with our obligations under the Public Interest Disclosure Act 1998 and the Enterprise and Regulatory Reform Act 2013

- enable all of our staff members to raise any concerns within the firm and to make what is known as a 'protected disclosure' of certain information without fear of possible reprisals or victimisation, and

- understand their rights in relation to this area of law in order that they can make an informed decision about what action they may take.

The Position at Law

The Public Interest Disclosure Act 1998 as amended by the Enterprise and Regulatory Reform Act 2013 (and with what is known as 'the public interest test' introduced by the government in 2013) protect workers against dismissal and detriment where they raise a legitimate concern about a specified matter. These are known as 'protected disclosures'.

A 'protected disclosure' involves a worker making a disclosure of information:

1. which amounts to what is defined in the relevant legislation as a 'qualifying disclosure'
2. is in the public interest and
3. is made in the correct way.

A 'qualifying disclosure' is where a worker has a reasonable belief that one of the following is being committed, has been committed in the past, or is likely to be committed:

- a criminal offence
- a breach of a legal obligation including serious misconduct by any person or firm authorised by the Solicitors Regulation Authority, or any employee, manager or owner of the firm
- a miscarriage of justice
- damage to the environment
- a danger to the health or safety of any individual or
- the deliberate covering up of information tending to show any of the above matters.

The belief does not need to be proved to be correct. The worker only needs to show that they held the belief and that it was a reasonable belief in the circumstances at the time they made the disclosure.

It would not be a qualifying disclosure if:

- by making the disclosure, the worker has committed an offence, e.g. under the Official Secrets Act 1989

- the information should be protected from disclosure because of legal professional privilege, e.g. the disclosure has been made by a legal adviser (or their secretary) who has acquired the information in the course of providing legal advice.

Public Interest

Staff members are permitted by law to make a disclosure of information in such cases providing that they reasonably believe that the disclosure of information is in the public interest. A disclosure made only in their own personal interest will not be protected.

The disclosure doesn't need to be made in good faith although making a disclosure in bad faith (i.e. arising out of an ulterior motive such as self-interest) may affect any compensation awarded by an Employment Tribunal should that be relevant.

Whistleblowing v Grievances

Whistleblowing is different from raising a grievance.

Whistleblowing relates to concerns about a danger or illegality that has a public interest to it, such as where it may threaten third parties or the public.

A grievance generally relates to a staff member's own employment position which is not in the wider public interest. Staff members with a grievance should follow our Grievance Procedure.

Staff members will not suffer any detriment for making a protected disclosure provided that the disclosure is made in accordance with the following procedure. Although staff members are not expected to prove beyond doubt the truth of an allegation, they will be expected to demonstrate that there are reasonable grounds for their concern.

Procedure for disclosure

Staff members with a concern about any form of wrong-doing or malpractice covered by this policy should raise the matter with Kuljit Lally. Where it may not be appropriate to report a concern to Kuljit Lally for example if she is the subject of the concerns, staff members should report this to Mariyam Ferreira.

This includes serious concerns that a staff member has about any aspect of the provision of our services and/or the conduct of other staff members or others acting on our behalf and where a staff member reasonably believes that any information tends to show one or more of the above specific subject matters.

Concerns may be raised verbally or in writing.

Responding to concerns

Following the disclosure, initial enquiries will be made by the person to whom the disclosure was made to decide whether an investigation is appropriate and, if so, what form it should take. They will then inform the staff member of the outcome of any investigation and proposals for dealing with the matter (where relevant).

Following the investigation, where appropriate, the matters raised may:

- be investigated internally
- be referred to the SRA
- be referred to the police and/or
- form the subject of an independent inquiry.

Subject to any legal constraints, the staff member will be informed of the outcome of any investigation, enquiry or referral.

Confidentiality

The purpose of this Policy is to give staff the opportunity and protection they need to raise concerns internally and that this would be considered, in most cases, to be most appropriate course of action. Those following this procedure should be assured that they will not suffer any form of detrimental treatment.

We recognise that, in some circumstances, it may be appropriate for staff members to report concerns to an external body such as a regulator such as the SRA, the Health and Safety Executive or to the Police.

However, staff must be aware that if they make a wider disclosure of this type, they will only be protected in certain circumstances and so we therefore encourage all staff members to seek advice from Kuljit Lally before reporting a concern to anyone outside of the firm. If a staff member does regard this as appropriate, it is recommended that they seek independent legal advice before following this course of action. Further guidance can be obtained from the following resources:

- ACAS, the Advisory, Conciliation and Arbitration Service (https://www.acas.org.uk/advice)
- Citizens Advice (https://www.citizensadvice.org.uk/)
- Protect, a whistleblowing charity (https://protect-advice.org.uk/).

It is the duty of all staff members however to avoid breaches of confidentiality and therefore, except where the disclosure is in the proper performance of their duties, staff members are normally forbidden from disclosing, or making use of, confidential information.

Where staff members feel it is appropriate to report a concern to anyone outside of the firm, they need to ensure use of the appropriate prescribed person (under Schedule 1 of the Public Interest Disclosure (Prescribed Persons) Order 2014) or the additional requirements for reporting to other external bodies. The list of prescribed persons can be accessed at: https://www.legislation.gov.uk/uksi/2014/2418/made.

Employees raising a concern should be aware of the need to follow this whistleblowing procedure and in particular to maintain confidentiality. Allegations of breaches in confidentiality will be dealt with in accordance with our Disciplinary Procedure.

It is recognised that where an individual makes a subject access request under the Data Protection Act 2018, the personal information to be disclosed may include information in relation to whistleblowing. When responding to a subject access request, we must consider how best to protect the identity of a whistleblower or an individual contributing to an investigation.

Review

The person responsible for the operation of our Whistleblowing Policy is Kuljit Lally and they will review this Policy annually.

As part of this process, they will consider any changes in law and guidance and will determine if lessons can be learnt and how these can be communicated to staff. The results of the review will be considered as part of our overall risk and compliance assessment process and overall approach to learning and development. They will oversee any changes which are subsequently made to our internal processes to ensure they remain sufficiently rigorous and efficient. Any findings will be communicated to colleagues and the Policy will be updated accordingly to ensure it remains in effective operation.

2.11. Flexible Working Policy

In accordance with our Equality and Diversity Policy, we are committed to promoting equality and diversity within our firm and to having a working environment which promotes and ensures equality of opportunity.

We are committed to:

- taking all reasonable steps to ensure that our firm and its representatives comply with the:

  - Flexible Working (Eligibility, Complaints and Remedies) Regulations 2002
  - Flexible Working (Procedural Requirements) Regulations 2002
  - Employment Rights Act 1996
  - Work and Families Act 2006
  - Equality Act 2010 and
  - Children and Families Act 2014

  as well as all other relevant legislation

- considering any requests for a flexible working arrangement in a reasonable manner and to only refuse a request for flexible working if there is a clear business reason to fully justify that decision

- wherever possible, to endeavour to assist our staff members with putting in place positive working arrangements that are both flexible, family-orientated and help our staff to achieve a good work-life balance. These arrangements may include, but are not limited to:

  - job sharing
  - home working
  - having flexible working hours or offering part-time positions
  - parental leave
  - seasonal, term-time or school hours working arrangements
  - sabbaticals and career breaks
  - annual hours working arrangements
  - compressed hours

- considering any requests for time off to attend training

- in accordance with our Equality and Diversity Policy, making reasonable adjustments or considering positive action so as to provide working opportunities for people who may otherwise encounter obstacles or restrictions hindering their ability to work and

- positively consider flexible working arrangements when implementing our recruitment and selection procedures

- consider requests for time off for training.

Requests for reasonable changes or adjustments unique to a staff member's needs that will enable them to undertake their role will always be considered. We are not obliged to consider all other flexible working requests from staff members who have not been continuously employed by our firm for at least 26 weeks. However, even new staff members should feel free to submit a request. If we cannot consider revisions to their arrangement at that time, we may at least be able to consider future working arrangements.

Flexible working arrangements and time for training requests will be considered in accordance with our Flexible Working and Workplace Adjustments Procedures.

Mariyam Ferreira is responsible for the operation of this Policy and will review it annually to verify that it is in effective operation across our firm.

2.12. Home Working Policy

This Policy has been implemented to ensure that maintain a structured approach to home working.

The aim of this policy is to:

- provide a basis for a clear understanding of the arrangements made for any staff members who work from home some or all of the time
- make clear both the responsibilities of the firm and of each staff member
- ensure all work conducted at home is done in a secure and safe manner with preventative measures to mitigate against risks.

Agreement to work from home

During the Covid-19 pandemic, steps had to be taken by the firm to implement home working for most staff members and steps were taken to deal with the urgent operational demands posed by the pandemic. Where Government guidance continues to direct that staff should work from home where they are able to, the measures and controls required will be evaluated as part of our Covid-19 Risk Assessment process and overall approach to business continuity during the pandemic.

Where our working arrangements are no longer determined by Government controls or where any arrangements for home working will be operating on a longer term or more permanent basis, they will be managed in accordance with this Policy. The arrangements will continue to be assessed based upon the needs of our business and clients and will be determined by the firm's management team in line with employment legislation.

In particular, it may be agreed that some of our staff members be permitted to continue to work from home for some or all of the time. Any requests that are deemed a statutory request for flexible

working arrangements, for instance, requests for changes to a staff member's working arrangements on a more permanent basis (and which may necessitate a formal change to the staff member's contract of employment) will also continue to be considered in accordance with the Flexible Working (Eligibility, Complaints and Remedies) Regulations 2002 as more particularly detailed in the firm's Flexible Working Policy.

Firm's responsibilities

The firm will work to ensure that staff members who are permitted to work from home are provided with sufficient equipment to enable them to do their job.

Maintaining our staff members' well-being and health and safety is also extremely important and the firm is committed to supporting its staff whilst they work from home so far as it is able to do so.

In particular, the firm will:

- oversee the conducting of home working risk assessments in accordance with our Home Working Arrangements Procedure
- provide necessary equipment and ensure necessary, ongoing repair of such equipment to enable staff members to work effectively from home
- provide ongoing telephone or online support to all staff members working at home in relation to issues relating to the case management system or equipment supplied by the firm
- endeavour to ensure that all staff members are made fully aware of the support available to them and arrangements for supervision
- comply with its obligations to staff members under the Health and Safety at Work Act 1974 and other relevant legislation as more particularly set out in the firm's Health and Safety Policy
- continue to maintain its Employer's Liability Insurance to ensure that staff members are covered for injury arising out of and in the course of employment at home as well as effective insurance to cover the firm's equipment supplied to staff members to enable home working.

Staff Members' responsibilities:

All staff members are expected to:

- work and engage proactively with the firm's management team and their individual supervisors or supervisees to agree home working arrangements that are effective in accordance with our Home Working Arrangements Procedure
- being available to work and contactable during their full contractual or core working hours unless absence is for an authorised form of leave or sickness
- maintaining a workable method of contact with colleagues and, where necessary, with clients
- ensure, so far as is reasonable, that they maintain a suitable environment in which they can conduct work on behalf of the firm
- assist with the required home working risk assessments and to work with the firm to ensure that necessary and reasonable identified preventative measures can be implemented
- ensure that there are no restrictions to home working in any of the staff member's own mortgage, rental or insurance agreements
- take reasonable care of any equipment provided by the firm for the purposes of home working
- complying with the firm's policies and procedures that relate to their work and their professional conduct whilst working. In particular:

- taking reasonable steps to ensure that confidential data is not viewed, accessed or interfered with by unauthorised third parties including family members or others occupying the same premises in accordance with the firm's Confidentiality Policy
- keeping secure all documents and data that belong to the firm or clients in accordance with the firm's policies and procedures as more particularly set out in the firm's **Data Security & Information Governance Manual**
- taking reasonable care not to expose themselves and others to risks to health and safety in accordance with our Health and Safety Policy
- maintaining quality and high levels of client care in accordance with our Commitment to Quality and Client Care Policy
- reporting any incident to the firm as soon as possible in accordance with the firm's Compliance Policy.

Each staff member is responsible for managing his or her own compliance with this Policy and for ensuring that no breaches of compliance result from their actions. Failure to comply by any member of staff may invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Responsibility and Review

Mariyam Ferreira retains overall responsibility for the operation of this Policy and for overseeing our home working arrangements across our firm to ensure ongoing business continuity.

They will review this Policy annually. The results of the review will be considered as part of our overall risk and compliance assessment process. They will oversee any changes which are subsequently made to our internal processes to ensure they remain sufficiently rigorous and efficient. Any findings will be communicated to colleagues and the Policy will be updated accordingly to ensure it remains in effective operation.

2.13. Publicity Policy

The SRA's Standards and Regulations implicitly require the firm to ensure that any form of publicity in relation to our firm is accurate, is not misleading and is not likely to diminish the trust the public places in us and in the provision of legal services. Clients and other members of the public must at all times have appropriate information about our firm and how we are regulated.

We are committed to ensure that:

- our firm presents and promotes itself externally in a professional, positive and effective manner
- all publicity material is properly representative of our firm, consistent and accurate without being misleading
- any professional obligations including the requirements in the SRA's Standards and Regulations, SRA's Price Transparency Rules and statutory requirements in respect of the preparation of promotional publications and publicity materials are fully observed and
- all promotional publications and publicity materials including electronic and web-based publicity are legally and morally appropriate.

Mariyam Ferreira is responsible for publicity in our firm for monitoring compliance and implementing remedial action where appropriate. They are responsible for ensuring that:

- the content of all promotional and publicity materials is up to date and accurate
- all forms of publicity conform with the requirements in the SRA's Standards and Regulations
- all forms of publicity comply with the SRA's Price Transparency Rules in terms of service levels, costs and complaints handling
- all forms of publicity are in accordance with our [Equality & Diversity Policy]
- our publicity materials and marketing campaigns do not infringe legal or other obligations as regards copyright, data protection and confidentiality and must not otherwise be unlawful
- all electronic marketing is compliant with the Privacy and Electronic Communications (EC Directive) Regulations 2003
- the content does not consist of any content which could cause damage to the firm or our reputation and
- all staff are trained appropriately on our publicity policy and procedures.

Marketing

Mariyam Ferreira is responsible for overseeing any targeted publicity or marketing campaigns and for ensuring that:

- where possible, our marketing campaigns are permission-based, in that they are sent only to individual recipients who have given their permission to be contacted
- where they are unsolicited, they are sent only where the following conditions are met:
    - the firm has obtained the individual's details in the course of a sale or negotiations for a sale of a product or service
    - the messages are only marketing similar products or services and
    - the individual is given a simple opportunity to refuse marketing when their details are collected, and if they don't opt out at this point, are given a simple way to do so in future messages
- the publicity material explains clearly what the individual's details will be used for
- the recipient is advised who we are and are provided with a valid contact address
- we do not market to individuals or organisations who have registered their numbers with the Telephone Preference Service or Fax Preference Service
- the recipient is advised that they are entitled to complain about our marketing using our [Complaints Handling Procedure]. They should be made aware of the manner in which the firm handles complaints (including how they may obtain a copy of our firm's complaints procedure).

Staff Training & Compliance

All staff are provided with training on publicity during their induction.

We identify further training needs as and when appropriate and address them as part of their individual training plans.

Each staff member is responsible for ensuring that no breaches of this policy result from their actions. Failure to comply with this policy by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Each staff member is responsible for reporting any breach, or suspected breach of this policy in accordance with our Compliance Policy.

Publicity Approval Procedure

No publicity material, publication or other form of promotional marketing shall be issued by and on behalf of our firm unless it has been approved. Therefore, all publicity communications or information (including the details of any targeted publicity or marketing campaigns) to be submitted as part of or on behalf of our business or in which the author would otherwise be identifiable as a member of our staff must be approved in advance by Mariyam Ferreira.

Any draft publicity communication or other information (and in the case of any targeted publicity or marketing, the details of any recipients) must be forwarded to Mariyam Ferreira who will review it to ensure that it:

- is accurate and not misleading
- complies with all of our firm's policies
- is within the staff member's area of expertise and within the scope of their authority
- does not consist of confidential information obtained in the staff member's capacity as an employee or consultant of our firm
- is not offensive, discriminatory, threatening, harassing or that might otherwise be construed as such
- does not consist of any content which could cause damage to the firm or our reputation and
- does not infringe legal or other obligations including the requirements of the Data Protection Act, the UK GDPR, the Privacy and Electronic Communications (EC Directive) Regulations 2003 and the SRA's Standards and Regulations and the SRA Price Transparency Rules.

They are responsible for ensuring that any remedial or correction action is implemented. They will retain copies of the final and approved publicity material or communication in a central file.

Mariyam Ferreira is also responsible for the approval of the design and content of all letterhead, email signatures and web pages. They will oversee the ordering of all printed materials and the distribution across the firm.

Mariyam Ferreira has overall responsibility for our publicity and will review our Publicity Policy and procedures annually to ensure they are in effective operation.

2.14. Prevention of Financial Crime Policy

We must ensure that our services are not used to further a criminal purpose.

The types of financial crime that our firm or staff members could be exposed to include:

- money laundering
- terrorist financing
- fraud, including cyber or internet-enabled fraud
- tax evasion
- offences under the financial sanctions/assets seizure regimes
- property and mortgage fraud
- benefit fraud, and
- bribery.

Further detail on each of these areas and our policies and procedures for preventing our involvement in these financial crimes are outlined in our:

- Anti-Money Laundering and Countering Terrorist Financing Policy
- Anti-Tax Evasion Policy
- Property and Mortgage Fraud Policy
- HM Land Registry Policy
- Benefit Fraud Policy
- Anti-Bribery Policy
- Gifts and Hospitality Policy.

Due to the risks associated with individuals and entities attempting to circumvent the financial sanctions legislation and that a breach of financial sanctions is a criminal offence, we also maintain an associated Financial Sanctions Policy which incorporates an Office of Financial Sanctions Implementation Reporting Procedure.

In addition to the above, there are additional policies in our **Data Security & Information Governance Manual**, not least our **Cybercrime and Fraud Prevention Policy**, which support our overall awareness programme.

All staff members are provided with training on these policies and procedures during their induction.

An ongoing awareness training programme is maintained in order to ensure that crime prevention awareness is refreshed and updated regularly.

Where appropriate, any specific information about crime prevention responsibilities is included within the relevant job descriptions.

Each staff member is responsible for ensuring that no breaches of our crime prevention policies result from their actions. Failure to comply with the policies by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Kuljit Lally is responsible for this financial crime prevention policy together with the associated policies and associated procedures in this Quality Manual and is responsible for monitoring compliance. They carry out a documented review of our financial crime policies and procedures annually to verify they

are in effective operation.

2.15. Anti-Money Laundering and Countering Terrorist Financing Policy

Money laundering arises as a concern whenever criminal conduct results in a gain ("criminal property"), whether for the client or for any other person. It is also important to bear in mind the related area of terrorist financing which is any activity intended to fund terrorist organisations or activities. Whereas there must always have already been some form of acquisitive crime for money laundering to arise, potential liability for terrorist financing could become a concern even where the funds have been lawfully acquired. In cases of terrorist financing, it is the intended use of funds that triggers liability rather than their origins, though these are often the proceeds of crime also.

<u>Legislation</u>

The various criminal offences that can be committed in relation to money laundering and terrorist financing are found in the Proceeds of Crime Act 2002 ("POCA 2002") and the Terrorism Act 2000 ("TA 2000"), both as amended. In addition, certain types of businesses are subject to The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 as amended by The Money Laundering and Terrorist Financing (Amendment) Regulations 2019 that came into force on 10 January 2020 and the Money Laundering and Terrorist Financing (Amendment) (EU Exit) Regulations 2020 (“MLR 2017”). This includes most law firms, but only if they undertake the sorts of activities that are set out in the regulations. These are, broadly:

- conveyancing
- corporate transactions and related commercial advice
- the creation and operation of companies and trusts
- Trusts or Company Service Provider (TCSP) services
- probate, and/or
- tax advice

<u>Money Laundering Reporting & Compliance Officer</u>

Whilst primary responsibility for compliance rests with the firm’s senior managers, Kuljit Lally, who is our COLP, is our nominated Money Laundering Reporting Officer (MLRO) and Money Laundering Compliance Officer (MLCO).

They are considered to be a member of senior management with sufficient knowledge of our firm's exposure to the risks of money laundering and terrorist financing and sufficient authority to take decisions affecting that risk exposure. As such, they also undertake both reporting and compliance roles and are responsible for overseeing compliance with relevant money laundering and counter terrorist financing legislation on behalf of the firm as well as reporting suspicious activity. For ease of reference, they will be known as the MLRO and referred to as such in the remainder of this policy.

Our MLRO’s responsibilities are to:

- assume day to day responsibility for overseeing our money laundering and countering terrorism financing (referred to generally throughout this Policy and our internal controls as ‘AML’) prevention procedures and ensuring that satisfactory internal procedures are maintained

- oversee the firm's compliance with current money laundering and terrorist financing legislation
- oversee the documentation of the firm's risks of money laundering and terrorist financing in its Anti-Money Laundering and Countering Terrorist Financing Risk Assessment
- receive and consider any suspicious activity reports received in the light of any relevant information available to the firm, and determine whether the report gives rise to knowledge or suspicion (or reasonable grounds for knowledge or suspicion) that a person is engaged in money laundering or terrorist financing
- provide advice when consulted on possible reports and receive reports of suspicious circumstances
- report such circumstances, if appropriate, to The National Crime Agency (NCA) on behalf of the firm
- direct colleagues as to what action to take and not take when suspicion arises and a disclosure is made, and
- report annually to management and relevant colleagues on the operation of the anti-money laundering policy and procedures verifying that they are in effective operation.

Should any member of staff have any concerns on anti-money laundering or counter terrorist financing issues, they should refer them to our MLRO.

<u>Practice Wide Risk Assessment</u>

In accordance with our obligations as specified in regulation 18 of the MLR 2017, our MLRO conducts a practice wide risk assessment in relation to our potential exposure to possible money laundering, terrorist financing, proliferation financing activity as well as financial sanctions risks. As part of that risk assessment process, they consider the level of risk arising from our:

- clients
- countries or geographic area of operation
- services
- transactions and
- delivery channels.

In addition, the MLRO considers all available compliance data including any identified non-compliances, disclosures/reports and any relevant information obtained from discussions with key personnel dealing with AML related risk assessment and administration.

They have assessed our general risk of becoming involved in money laundering and/or terrorist financing.

This Policy has been drawn up in order to translate the findings and mitigate the identified risks arising from our risk assessment.

This Practice Wide Risk Assessment is considered a living document and will be reviewed periodically by the MLRO to reflect emerging risks, updates in law and regulation and significant changes in our practice. As a minimum, the Practice Wide Risk Assessment will be reviewed annually as part of the MLRO's monitoring of compliance.

<u>Compliance</u>

Some of our activities are within the 'Regulated Sector' as defined by the MLR 2017 because they

involve transactional work (which is defined as the participation in financial or property transactions e.g. buying and selling real property, trust management and/or the managing of client money).

Work within the Regulated Sector

Our MLRO has determined that all work in the following categories of law should be regarded as being covered by the MLR 2017, with the consequential need to follow our screening, AML risk assessment and due diligence procedures in all matters:

- conveyancing
- corporate transactions and related commercial advice
- the creation and operation of companies and trusts
- probate, and/or
- tax advice.

It is our policy to conduct due diligence (identification and verification) checks in relation to all matters irrespective of whether the work falls within the Regulated Sector. An assessment of the Matter Risks is conducted on all matters as a matter of course and AML risks associated with that client and matter must also be assessed to determine the level of due diligence required.

Where there is low risk, this may dictate a lower level of verification required. As the controls are being applied voluntarily in non-regulated cases, rather than pursuant to legislation, there is also the discretion to waive the need for checks entirely, where appropriate.

In all matters, our MLRO's permission must be sought to approve a waiver or other divergence from our Policy.

Training

In accordance with our overall approach to Performance Management, Learning & Development (as more particularly set out in Section 5), all staff (including agents where relevant) are provided with training on this policy and our anti-money laundering and countering terrorist financing procedures to ensure that they are alert to the possible risks of money laundering when carrying out any work and are able to recognise suspicious activity of money laundering or terrorist financing occurring.

In particular, our MLRO oversees the arrangement and content of:

- training to be given to relevant staff members during their induction
- periodic or update training for all relevant personnel within the firm especially where their work is relevant to the AML compliance of the practice.

All training is planned, evaluated and recorded in firm wide and/or individual training plans as appropriate in accordance with our training procedures in Section 5.

Screening of employees

We undertake screening processes on relevant staff members both at pre-employment stage and on an ongoing basis as required.

As more particularly set out within our People Management Procedures in Section 5, whenever a new fee earner is employed, irrespective of whether they will undertake casework within the regulated

sector, the following checks are undertaken before they commence work at the firm:

- checks on the individual's disciplinary record are made with the Solicitor's Regulation Authority or, where possible, an equivalent regulatory body
- the fee earner will be asked to complete and sign our Employment Declaration Form stating that there have been no disciplinary actions taken against them (**Appendix Four**)
- taking up references.

Additional screening checks are taken on relevant staff members (including managers, fee earners and support staff) where:

- their work is relevant to our AML compliance
- they have responsibility for or assist with the identification or mitigation of money laundering and terrorist financing risks
- they are capable of contributing to the prevention and detection of money laundering and terrorist financing in our firm.

Our MLRO will determine the extent to which checks are to be undertaken dependent on the nature of that person's role and with a view to ensure that they are able to carry out their role effectively and in compliance with our regulatory obligations.

These checks will be undertaken before they commence employment as part of our People Management Procedures in Section 5. They will also be undertaken for existing staff before they assume a relevant role such as when they are appointed to a new role within the firm. Depending on the role and level of involvement with AML compliance, the screening may include:

- checking relevant qualifications such as requesting original certificates or verified copies
- taking up available references
- obtaining a disclosure & barring service (DBS) check
- conducting a finance or credit check
- conducting adverse media checks (including social media)
- using an electronic identity & verification tool to verify their identity, and also check their names against PEPs, sanctions and adverse media lists.

Additional screening checks will subsequently be conducted on the relevant staff member during the course of their employment on a risk sensitive basis. This may involve conducting further checks using the same screening methods listed above.

The relevant staff member's continued competence to undertake their role will be assessed in accordance with our Performance Management and Appraisal Procedure and Learning and Development Procedure (Section 5). In particular, the staff member's skills, knowledge and expertise will be assessed as part of their appraisal with training needs being incorporated into their training plan. Our MLRO will be made aware of and will oversee any additional AML training needs in accordance with this Policy (see Training, above).

In light of the size and nature of our practice, we do not consider it necessary to conduct any additional screening of employees. We maintain a thorough and comprehensive screening process for all staff members at the pre-employment stage. We also ensure that their continued competence is assessed annually as part of our Performance Management and Appraisal Procedure with training and development needs governed in accordance with our Learning and Development Procedure (as more particularly set out within our People Management Procedures in Section 5).

Screening and assessment of AML risk

Our policy and procedures are risk-based meaning that the level of scrutiny and steps are designed to be adjusted to the level and type of work done and to the risks present.

It is especially important that we obtain sufficient information on the risks inherent to our firm and in any particular client or matter to enable us to determine and then apply the appropriate checks and controls to mitigate those risks adequately and effectively.

Red flags

To assist in identifying potential AML risks, fee earners should be aware of and act on any red flags or warning signs that may provide a basis for making further enquiries of the client and conducting further verification checks. Examples of possible red flags are set out as part of our AML proforma which are at **Appendix Five**.

In circumstances where any red flag or warning sign is identified, this must be evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly. Any one of the red flags may provide a basis for making further enquiries and conducting further checks and, in most cases, this will require EDD measures.

Wherever possible or relevant, we aim to follow the guidance issued by the Legal Sector Affinity Group: lsag-anti-money-laundering-guidance-for-the-legal-sector-2021.pdf. Staff members are encouraged to review the latest version of the guidance and use it a resource when considering the risks and relevant checks which may be required in particular cases. Our MLRO will also review the guidance when required to advise another staff member or when overseeing any matter in accordance with this Policy.

Client risk

At the beginning of a client relationship and in conjunction with our CDD (and, where relevant SDD or EDD) procedures, an assessment is conducted by the fee earner to identify and assess the AML risks associated with that client.

As part of this client risk assessment, fee earners will take into account:

- the purpose of the matter or client relationship
- the size and complexity of the matter(s) and the work to be undertaken on behalf of that client
- the duration of the client relationship taking into account any significant gaps between instructions
- the client’s financial circumstances (including source of wealth and source of funds as appropriate) and main business activities (where relevant) to assess whether they align with what they know about the client’s background and any wider client profile.

Other considerations which may be relevant and may need to be taken into account by fee earners include the extent to which:

- the services will be delivered online or via any other channel that may facilitate anonymity (including where we will act for a client without meeting them face-to-face)
- the clients and any new business that may be perceived to have a higher risk profile

- the structure, complexity or nature of the client entity or relationship makes it difficult to identify the true beneficial owner or any controlling interests
- the client appears to be attempting to obscure understanding of their business, ownership or the nature of their matters
- the client is a PEP, or is closely related to or associated with a PEP (see further details below)
- the instruction from the client is channelled through a third party and there is a lack of direct interaction with the client
- there are any geographic risks associated with the client
- the client wishes to conduct the business relationship or request services in unusual circumstances
- our firm is aware that clients hold residence rights or citizenship in a jurisdiction in exchange for capital transfers, purchase of property or government bonds, or investment in corporate entities in that jurisdiction
- the client is seeking advice or implementation of an arrangement that has indicators of a tax evasive purpose, whether identified as the client's express purpose, in connection with a known tax evasion scheme or based on other indicators from the nature of the matter.

AML client risks must be evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly.

Politically Exposed Persons (PEPs)

PEPs are individuals who:

- have or have had a high political profile
- hold or have held public office, or
- due to their position could be vulnerable to corruption.

PEPs are individuals who are entrusted with prominent public functions, other than as a middle-ranking or more junior official, and can include:

- heads of state, heads of government, ministers and deputy or assistant ministers
- members of parliament or of similar legislative bodies
- members of the governing bodies of political parties
- members of supreme courts, of constitutional courts or of any other judicial body the decisions of which are not subject to further appeal except in exceptional circumstance
- members of courts of auditors or of the boards of central banks
- ambassadors, charges d'affaires and high-ranking officers in the armed forces
- members of the administrative, management or supervisory bodies of state-owned enterprises, and
- directors, deputy directors and members of the board or equivalent function of an international organization.

Being a PEP does not itself incriminate individuals or entities but it can pose a higher money laundering risk. This risk also extends to members of their immediate families and to known close associates.

Families and known close associates of PEPS include:

- spouse or partner
- children of the PEP and their spouses or partners
- parents of the PEP

- an individual known to have joint beneficial ownership of a legal entity or a legal arrangement or any other close business relations with a PEP
- an individual who has sole beneficial ownership of a legal entity or a legal arrangement which is known to have been set up for the benefit of a PEP.

Fee earners must therefore consider what they know about any client's background and question this if necessary. They should also question any client with a foreign connection (including UK passport holders who have recently been based abroad) to see if they have held a high-ranking position in a foreign government or international organisation within the last 12 months, bearing in mind that PEP status continues for 12 months after a person ceases to have this role.

It is important that fee earners remain alert to situations which may need further review including where there is:

- evidence of receipt of funds from a government account
- correspondence on official letterhead paper from the client or a related person
- any suspicions from general conversations with the client or person related to the retainer linking the person to a PEP, or
- news articles, social media or other reports which suggest the client is a PEP or is linked to a PEP.

Depending on the circumstances, an electronic search may be needed to highlight PEP status.

If it is established that a client is a PEP (or a family member or known close associate of a PEP), we must apply EDD measures to that client.

Financial Sanctions

The financial sanctions regime applies to all the services we offer irrespective of whether they are also regulated under the MLR 2017.

Therefore, for any matter undertaken by our firm, where it is established that there is has an increased risk that a client or another person may appear on one of the sanctions lists, EDD measures may well need to be conducted in accordance with our Financial Sanctions Policy. Depending on the specific circumstances and the identified risk factors, it may also be likely that an enhanced sanctions risk assessment may need to be documented and signed off by our MLRO (see **Appendix Five**).

Staff members must also follow the reporting procedures in our Financial Sanctions Policy.

Source of wealth and source of funds

The extent to which fee earners will need to review and consider a client's financial position will be dependent upon their risk profile in terms of them as a client and also the matter we are instructed on. The extent to which source of wealth and source of funds checks are necessary must be considered on a case by case basis.

Source of wealth refers to the origin of the client's entire body of wealth (their total assets) and having a general understanding of how the client (whether individual or company) has financed their lifestyle and/or survived business.

Source of funds refers to the specific funds being used for the transaction or matter we are being

asked to act for or become involved with.

The types of data and documents required for verification purposes will depend on the circumstances. This may include bank statements, receipts, pay slips, wills and/or financial accounts.

The key is to verify:

- which financial institutions the funds in question originated from
- other accounts and institutions the monies have passed or transferred through
- that all names on the client's bank account match the client
- the identity of any related parties such as where funds have been acquired by salary or gift
- the source of income, as applicable, from share capital, business activities or gifts.

CDD checks may also need to be conducted on third party donors or the original owners of funds and to verify the origin of funds and the transfer of funds to the client (including bank statements and other relevant financial documents).

Matter risk

Fee earners are also required to consider specific risk factors that the matter presents, in light of or in addition to any client risks already identified.

As part of our file opening procedure, in accordance with our procedure for assessing Matter Risks an assessment is conducted by the fee earner. As part of the assessment, fee earners must be assured that:

- they know the identities of all related parties who might be involved (those with a 'beneficial interest')
- due diligence is conducted where obliged to do so pursuant to the MLR 2017 and in accordance with this Policy
- they are satisfied that they are aware of the nature and purpose of the instructions and that the work will not put them or the firm at risk of involvement in illegal or unprofessional conduct.

As part of that assessment, fee earners should consider and aim to identify any matters that:

- are unusually complex
- are unusually large
- have an unusual pattern of transactions
- have no apparent economic or legal purpose
- are at high risk such that they are particularly likely of being related to money laundering or terrorist financing
- involve products or services that might facilitate anonymity
- involve the introduction of new technology into our firm
- present significant financial barriers to entry
- may be seen as entering a new or unproven market, and/or
- trigger a requirement to report a suspicious activity report.

AML matter risks must be evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly.

New products and business practices

Particular care is to be taken on matters which present significant financial barriers to entry or may be seen as entering a new or unproven market and such matters should be considered as potentially higher risk.

Sectors that may indicate higher risk, particularly when coupled with a high-risk jurisdiction include (but are not limited to):

- domestic and international public work contracts and construction, including post-conflict reconstruction
- businesses utilising new or unproven technology, that might make them vulnerable to being used for money laundering
- high value goods businesses
- items of archaeological, historical, cultural and religious significance or of rare scientific value (this may be of particularly high risk in jurisdictions with exposure to terrorism or terrorist financing activities)
- aspects of the nuclear industry with vulnerability to proliferation risk
- mining (including precious metals, diamonds or other gemstones and trading of these materials)
- arms manufacturing/supply and the defence industry
- tobacco products
- gambling
- crypto-asset wallet providers and exchanges
- unregulated charities (particularly those operating in higher risk jurisdictions)
- money transfer businesses
- ivory and other items and materials related to protected species
- real estate and property development, and
- the oil and gas industry (with the exception of the buying and selling of fuel for domestic consumption or retail).

Of course, not all work in these sectors will be higher risk in all instances, but it is essential for staff members to be aware of the higher risks inherent in these industries in order that they can ensure they are alert to the possible risks and can implement appropriate and proportionate CDD and ongoing monitoring procedures.

In circumstances where any of these sectors are involved, they must be evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly. Consideration must be taken as to whether EDD is required (see below).

Matters that involve products or transactions which might favour anonymity

Depending on the risk, there may be additional measures needed to prevent products or transactions that support anonymity being used for money laundering or terrorist financing.

There may be higher risks in the following types of matters:

- those involving opaque trust or company structures, including those featuring, for instance bearer shares, some offshore trusts, legal entities like foundations
- overly complex matters such as those that have the effect of obscuring parties or source of funds

- transactions involving cash, electronic or crypto currency or virtual assets
- services where we act as trustee/director that allows the client's identity to remain anonymous
- dealings with shell companies or companies with nominee shareholders.

There may be particular client risks where:

- clients are not met face-to-face
- clients wish to remain anonymous such as celebrities or those in the public eye
- clients that are evasive as to the identity of the parties involved.

In circumstances where any of these risks are highlighted, they must be evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly. Consideration must be taken as to whether EDD is required (see below).

High Risk Jurisdictions

As part of the risk assessment, consideration must be taken as to whether the matter involves/has links to a high-risk jurisdiction or the client or other relevant party is established in a high-risk jurisdiction.

The European Commission publishes a list of 'high risk third countries' which changes from time to time. Guidance will be circulated by the MLRO to alert staff to changes in the list. The up to date list can be found at: https://ec.europa.eu/info/business-economy-euro/banking-and-finance/financial-supervision-and-risk-management/anti-money-laundering-and-countering-financing-terrorism/eu-policy-high-risk-third-countries_en.

Where a client is established in a 'high risk third country', the MLR 2017 mandates that EDD measures and enhanced ongoing monitoring are required in addition to CDD measures (see below).

A client or counterparty to a transaction is established in a 'high risk third country' by reason of the fact that:

- (if a corporate entity) it was incorporated in the country
- (if a corporate entity) it has a principal place of business in the country
- (if a financial or credit institution) its principal regulatory authority is based in the country, or
- (if a natural person) being resident in the country, but not merely because they were born in the country.

However, there may be other jurisdictions that equally pose higher risks of money laundering that are not on this list and, although this may not be mandated by the legislation, may still also require EDD measures to be conducted.

Fee earners may use the following resources to consider whether a country has indicators of higher risk:

- Know your Country rating table
  https://www.knowyourcountry.com/

- FATF and HM Treasury statements on unsatisfactory money laundering controls in overseas jurisdictions

https://www.fatf-gafi.org/publications/high-risk-and-other-monitored-jurisdictions/?hf=10&b=0&s=desc(fatf_releasedate)

- FATF jurisdictional information
  https://www.fatf-gafi.org/countries/

- Transparency International's corruption perception index
  https://www.transparency.org/en/cpi/2021

- The Basel AML Index
  https://baselgovernance.org/basel-aml-index

- Consolidated sanctions list for details of countries in which sanctioned individuals or organisations are based and which may give an indication of the relative risk of the jurisdiction https://www.gov.uk/government/publications/financial-sanctions-consolidated-list-of-targets/consolidated-list-of-targets.

Relevant jurisdictions must be identified and the risks associated with that jurisdiction evaluated and recorded as part of the client or matter risk assessment with the measures to mitigate the risk being adjusted accordingly. Consideration must be taken as to whether EDD is mandated or otherwise required (see below).

Recording the Risk Evaluation

The results of the client and matter risk evaluation are documented and stored on the file opening checklist/relevant CDD form (our suite of documents are at **Appendix Five**).

Fee earners will assess the appropriate standard of due diligence required in line with this Policy and ensure that the appropriate verification checks and due diligence measures are undertaken and recorded.

Where it is determined that there is a higher client or matter risk, consideration is taken as to whether enhanced due diligence (EDD) is mandated by the MLR 2017 or otherwise required to mitigate the higher risks to our firm.

In accordance with our Matter Risk Procedure, fee earners involved in matters that are given a high risk rating must also complete a Matter Risk Notification Form or otherwise notify and obtain direction from our MLRO. In applying a risk-based approach to the situation, our MLRO will be responsible for giving advice on any additional EDD measures and checks (including in relation to any internal enhanced supervision arrangements and/or ongoing review) which need to be undertaken (see below). Enhanced ongoing assessment may also be needed during the lifetime of the client relationship, for instance, if additional information emerges as the relationship or matter progresses (see below).

Unless otherwise sanctioned by the MLRO, EDD measures will need to be conducted on all matters and for all clients that are assessed and rated as being high risk in terms of money laundering or terrorist financing either:

- as a result of the client and matter AML risk assessment
- where defined as high risk in our PWRA and a reason to conduct EDD
- where required by the MLR 2017.

In particular, EDD and enhanced ongoing monitoring must be applied if any of the following high-risk situations has been established:

- there is a risk that the client or someone else involved in the matter is or could be a politically exposed person (PEP) (or a family member or known close associate of a PEP) or on the UN/UK Sanctions list
- the client has provided false or stolen identification documentation or information on establishing the relationship and we have decided to continue dealing with the client
- there is a higher risk of fraud
- there is a higher risk of money laundering or terrorist financing, indicative factors may include where:
- the client is a beneficiary of a life insurance policy and the retainer with our firm bears direct relevance to that policy
- the client is seeking residence/citizen rights in exchange for investments in an EEA state
- the client is involved in the trade of oil, arms, precious metals, tobacco products, cultural artefacts, ivory and other items related to protected species, and other items of archaeological, historical, cultural and religious significance, or of rare scientific value
- there is any other situation which can present a higher risk of money laundering or terrorist financing
- the client or counterparty to a transaction is established in a 'high risk third country' (as determined, from time to time, by AML legislation) by reason of the fact that:
- (if a corporate entity) it was incorporated in the country
- (if a corporate entity) it has a principal place of business in the country
- (if a financial or credit institution) its principal regulatory authority is based in the country, or
- (if a natural person) being resident in the country, but not merely because they were born in the country
- the transaction involves products or services that might facilitate anonymity
- it involves a 'red flag' transaction such as where
- the transaction is either complex or unusually large and this is to be judged both in relation to the normal activity of our firm and the normal activity of the client,
- there is an unusual pattern of transactions or the transaction(s) has no apparent economic or legal purpose, or
- in any other case which by its nature can present a higher risk of money laundering and terrorist financing, taking into account various specified risk factors set out in the MLR 2017.

<u>Due Diligence Identification and Verification Procedures</u>

The due diligence procedures should be followed in the following circumstances:

- when the firm establishes a new retainer or business relationship with a client
- when the firm is to carry out an occasional transaction/matter for a client
- when there is a suspicion of financial fraud such as money laundering or terrorist financing
- when there is doubt as to the veracity or adequacy of information or documents previously supplied for the purposes of identification or verification
- through the course of a single matter particularly where there is an element of duration to the matter, and parties to the matter, or the source of funds and source of wealth involved may have changed
- for existing or standing clients, as set out below.

Simplified Due Diligence (SDD)

SDD is the lowest permissible form of due diligence and therefore can only be used where the client and matter risk assessment process has determined that there is a very low risk of money laundering or terrorist financing.

For work outside the Regulated Sector, where it is appropriate to waive the requirement for CDD, it may still be appropriate to conduct SDD.

For our work within the Regulated Sector, fee earners should follow our CDD procedures in all cases and it would generally not be appropriate to use SDD. The only time when it may be appropriate for us to consider SDD is where we are required to conduct due diligence on a professional trustee, intermediary or representative which is itself a regulated entity (or owned by one) or is large, well-known and/or listed on a regulated market. In all cases where SDD is considered fee earners need to document the rationale for their actions, seeking guidance from the firm's MLRO, if and when appropriate.

Client Due Diligence (CDD)

Identification of a client or a beneficial owner is simply being told or otherwise coming to know a client's identifying details, such as their name and address. Verification is obtaining evidence which supports this claim of identity.

The results of the client and matter risk assessments will dictate the level and extent of due diligence undertaken on a client or matter required to mitigate those risks.

As applicable according to the risk, fee earners must obtain sufficient information and evidence to be able to identify, assess and verify:

- the identity of the client
- the identity of the beneficial owners and/or the ownership and control structures of non-natural persons
- other parties in the transaction
- the nature and purpose of the retainer
- the source of funds and source of wealth to be used, where relevant.

Fee earners must identify the client and verify their identity from documents and resources capable of providing an appropriate level of assurance that the person claiming a particular identity is in fact the person with that identity, to a degree that is necessary for effectively managing and mitigating the AML risks. Steps can include:

- obtaining or viewing original documents from a reliable and independent source which is independent of the client (public or private) such as, for an individual, a passport or driver's license, or, in the case of a corporate entity, evidence of registration from the relevant registry or reputable company services provider
- on a risk sensitive basis viewing copies of documents (certification of a copy may give fee earners a higher level of confidence than an uncertified copy, but they should consider and document the risks of relying on certified copies for this (see below))
- conducting electronic verification, through a platform that is a reliable source and secure from fraud and misuse

- obtaining information from other regulated persons (although fee earners must note our policy on reliance below).

Translation of documentation

Whenever we need to translate documentation into English, fee earners must:

- not accept translations provided by the client or third party who is the subject of or linked to the verification
- ensure the document is translated by someone or a reputable service independent of the client or third party.

Enhanced Due Diligence (EDD)

As part of our file opening procedure, in accordance with our procedure for assessing Matter Risks, an assessment is conducted to determine if the matter is or could potentially be high risk. EDD may be required in certain high-risk situations.

All fee earners must conduct an assessment of risk for each client and/or matter and which identifies any indicators of higher AML or sanctions risks. This assessment should be used to determine how much work will need to be done to assess and verify the background of the client including appropriate checks as to where they have derived their wealth and relevant jurisdictions.

When the results of any client/matter risk evaluation suggest that the client or matter is potentially high risk (and thus where EDD should be applied), fee earners must complete a Matter Risk Notification Form and obtain direction from our MLRO in accordance with our Matter Risk Procedure. Our MLRO is responsible for overseeing and approving the additional EDD checks to be undertaken.

In applying the risk-based approach to the situation, the MLRO will consider whether it is appropriate to:

- seek further verification of the client or beneficial owner's identity from independent reliable sources
- obtain more detail on the ownership and control structure and financial situation of the client
- conduct checks against the sanctions lists and assess the possibility that a designated person is exercising control over the individual or entity that is our client or the transaction counter-party in accordance with our Financial Sanctions Policy
- request further information on the purpose of the retainer or the source of the funds and source of wealth
- conduct further checks on the legitimacy of the transfer of any funds to our firm and any firm involved in the transfer including checking funds are coming via a registered Money Services Provider, checking the Application for Funds (Transfer) Form, and/or
- conduct enhanced ongoing monitoring.

Where the EDD is to be applied due to a party to the transaction being established in a high risk third country, the checks must include:

- obtaining additional information on the client and on the client's beneficial owner
- obtaining additional information on the intended nature of the business relationship
- obtaining information on the source of funds and source of wealth of the client and of the client's beneficial owner

- obtaining information on the reasons for the transactions
- obtaining the approval of senior management of the practice for establishing or continuing the business relationship, and
- conducting enhanced monitoring of the business relationship by increasing the number and timing of controls applied and selecting patterns of transactions that need further examination.

If a client or someone else involved in the matter is identified as a PEP, the MLRO must take and record on file more detailed instructions as to not only the source of their funds but also of their wealth. Little extra questioning may be needed if someone identified as a PEP were to instruct us on a low value and more routine matter but the MLRO would need to enquire further on transactions and investments, especially if the value involved is unusually high given the client's background or that of their close associate or immediate relative.

If a client or someone else involved in the matter is identified as being (or potentially being) on any of the Sanctions Lists, all work on the matter must be suspended and be immediately reported to the MLRO who will consider in accordance with our Financial Sanctions Policy which incorporates our Office of Financial Sanctions Implementation Reporting (OFSI) Procedure whether:

- this needs to be reported to the OFSI
- there is a suspicion of money laundering or terrorist financing which requires a report to the NCA.

Even where the MLRO is satisfied that the firm does not need to make a report to the NCA, our MLRO will still need to assess the circumstances and determine whether the firm wants to continue to act.

If it does then, the MLRO will:

- seek advice from the OFSI
- contact the OFSI to get a licence to deal with the funds as our firm will not be able to deal with the resources of the designated person without the OFSI's approval.

Timing of checks

Fee earners must conduct CDD procedures for all new clients as soon as possible after contact is first established between the firm and the potential client and before delivering any substantive work on the matter or accepting funds into our bank account. Fee earners must always be alert to the possible risks of carrying out any work before obtaining suitable evidence of the client's identity (see our file opening procedures and risk management procedures in Section 8).

It is only in exceptional cases will our MLRO sanction the conducting of substantive work and/or the receipt of funds before checks have been fully completed and then only on a risk sensitive basis.

Where the clients fail to provide sufficient information, there is a lack of supporting documentation to conduct our CDD procedures and/or there are other factors which prevent a fee earner from completing CDD procedures in time, the fee earners must raise this with our MLRO. The MLRO will consider the circumstances on a risk sensitive basis and consider whether we can act for the client and, if so, provide direction as to alternative steps that may need to be taken. The MLRO will keep a full documentary record of their decision. In the absence of any mitigating factors, it may also be necessary for the MLRO to consider whether a formal disclosure should be made.

Face-to-face checks and/or other assurances

Every attempt will be made to meet the client in person to verify the evidence provided. Where a client is a natural person and they are not physically present for identification purposes, the fee earner must take this into account when assessing the risk of money laundering or terrorist financing.

Whilst the fact that the client is not seen face-to-face is a risk factor to be considered under the MLR 2017, this does not necessarily mean that EDD must be undertaken as standard CDD measures may be sufficient where the risks associated with the retainer and the client are otherwise low. However, even if we act for lower risk clients without meeting them face-to-face, we need to be confident that we can mitigate the risks of identity fraud.

In these circumstances, the adviser should query why a client is unwilling to meet them and consider this as part of their client and matter risk assessment. The steps to be taken will depend on the circumstances of the individual client and matter.

If face-to-face documentary verification is not possible or there is a justification for using a different method, other alternative options could include:

- asking the client to obtain certification of documentation through local solicitors or other professionals. In these circumstances, the adviser must make a check of the validity of the referring firm or organisation and note how this has been done on the file opening checklist/ relevant CDD form (in **Appendix Five**). The client should not be asked to send their passport or driving licence through the post
- conducting an electronic identity and verification search in line with our Policy (see below)
- gathering and analysing other identity data to build up a better picture of the client such as IP addresses, geolocation and verifiable telephone numbers
- verifying telephone numbers, emails and/or physical addresses where possible, and/or
- using live videoconferencing systems such as Zoom and Microsoft Teams to 'meet' the client and asking them to show their face and original photo identification documents so that fee earners can compare them to our copies of the same documents. In such cases where fee earners use digital video or photography to support CDD, the client's consent will be needed as a data subject for the capture and storage of their personal data in accordance with data protection requirements.

Other methods may not be sufficient where the AML risks are greater. In higher risk situations, further risk verification (including, where necessary, EDD) will likely be required. In higher risk situations where the acceptance of non-standard verification would not be sufficient, the fee earners must raise this with our MLRO and seek their direction as to the alternative steps that may need to be taken.

In all cases, fee earners must keep a record and evidence of the process followed, including any video calls made.

Electronic Identity Verification (eIDV) Checks

As a firm, it is part of our Policy to use an electronic identification and verification tool to assist with the conducting of CDD and ongoing monitoring in Conveyancing and Wills, Probate, Trusts and Estate Planning.

We use Dye Durham, a service deemed reliable and secure for these purposes, on the basis of copy documents and/or details provided by the client. The system uses the following resources and data

sources:

The system incorporates searches for data to confirm the name, address and date of birth of an individual from many different electronic sources and uses that either in conjunction with traditional paper based documentary evidence or another form of ID or address confirmation. The data sources checked also vary depending on the country of residence of the individual being searched.

The system uses the following resources and data sources including public data, open data and proprietary databases:

For the UK, it checks against the following databases:

- HM Treasury Sanctions File (Terrorist File)
- Full Electoral Roll
- Mailsort Data (corroborative)
- Non-Standard Address File
- CIFAS Stolen Passport Records
- County Court Judgements
- BAIs (Bankruptcies, Administrative Orders, Insolvencies)
- Bereavement Register
- HALO File
- Share/Insight/CIAS Record Count
- Share/Insight/CIAS Record Performance Information
- Post Office Address File
- Politically Exposed Persons File
- OFAC Specially Designated Nationals File
- Directors at Home (corroborative)
- UK Investors data, and
- a number of other proprietary data sources only available to legitimate credit reference agencies and their partners for the purposes of AML Searching.

For International Searches, there isn't a single source of data for all countries, as each country covered uses a unique set of data for that country but might include:

- credit or consumer information
- alternate source of credit or consumer information
- simple business information
- Department of Motor Vehicle information (Driver License info)
- current telephone directory
- historic telephone directory
- legal resident information
- property transaction data
- voter record (e.g. electoral roll) and previous voter records.

The system will return the best match from all available sources using multiple sources including the same type of source but different years of acquisition.

The negative data sources are not specific for each country, and comprise a combination of (but not limited to):

- the Central Intelligence Agency's (CIA) list of Chiefs of State and Cabinet Members of Foreign Governments
- the HM Treasury Financial Sanctions Consolidated List of Targets
- the US Department of The Treasury Specially Designated Nationals List
- the European Union Consolidated list of persons
- groups and entities subject to EU financial sanctions, and
- proprietary commercially sensitive data sources relating to similar types of individuals.

If a member of staff uploads any proof of documentary evidence, then it will be checked by the system against any reference supplied against appropriate data sources to check algorithmic integrity, and whether it has been listed as lost, stolen or fraudulent.

Privacy

Prior to obtaining and entering data into the electronic verification system, fee earners will ensure that the client is made aware of our Privacy Policy and aware that their data is being used in this way and that they have rights as a data subject in relation to the capture and storage of their personal data in accordance with data protection requirements.

Limitations and importance of manual checks

This service is a supporting tool and is not considered as a substitute for our full risk assessment and verification process. Fee earners must mind be mindful of the limitations of the electronic identity and verification/biometric system and ensure additional checks and reviews are conducted manually depending on the client and matter risk.

The service will not conduct a manual or physical check of the uploaded data or documents and compare likenesses of data manually (by human intervention). As such, it is the relevant staff member's responsibility for uploading data or documents to the system to manually check data and/or documents themselves beforehand. If there are any concerns about the validity of data or documents or if it looks potentially fraudulent, this should be factored into the risk assessment process and may need to be brought to the attention of the MLRO (see below).

Any staff members who are responsible for using the system to conduct searches will need to attend training to ensure they can ensure the validity and accuracy of data input and can discount or escalate potential screening matches.

The evaluation of search results will be conducted by the relevant fee earner(s) as part of their assessment of client and matter risks.

Ongoing monitoring

The system facilitates ongoing monitoring by automating verification monitoring and provides ongoing screening for updates in verification as well as other screening against sanctions, adverse media, PEPs. However, it is not simply sufficient to rely on this process in isolation and the results of these checks must be evaluated by the relevant fee earner in conjunction with manual checks and in light of any new and varied risks which may have been identified (see ongoing monitoring below).

Review and functionality of the system

As part of their annual review process (see below), our MLRO is responsible for taking steps to ensure that our outsourced eIDV screening provider is appropriate in accordance with our Outsourcing Policy. Checks will likely need to include:

- checking the functionality and data integrity of the system
- checking the resources the provider uses for its data collection
- ensuring the system can be calibrated in accordance with our firm's risk profile and not necessarily using the settings suggested by the outsourced provider
- ensuring that they fully understand the systems capabilities and limits in order that this information can be fed back to staff members who use the system.

Manual identification and verification checks

All matters:

- fee earners must record the risk assessment and checks undertaken on the file opening checklist/relevant CDD form (at **Appendix Five**) and store this on the casefile. Copies of the identity and other verification information and documents should be stored in a separate clip on the casefile

- where a fee earner requests that personal or sensitive data be sent by email or other electronic means in support of CDD, due consideration should be given and steps taken to mitigate against the associated data security risks such as using encryption

- where fee earners use digital video or photography to support CDD, obtain other personal data from the client and/or enter data into an electronic verification system, fee earners will ensure that the client is made aware of our Privacy Policy and aware that their data is being used in this way and that they have rights as a data subject in relation to the capture and storage of their personal data in accordance with data protection requirements

- the copy of evidence taken to confirm a client's identity and data and results from other AML checks must be kept for a minimum period of five years after the end of the matter the end of the matter or from the date at which they cease to be a client of our firm. In most cases, we will retain the data for our usual file retention period of six years from the date of the file being archived (unless otherwise stipulated) in accordance with our **Archiving, Destruction and Retention Procedure** (in our **Data Security & Information Governance Manual**)

- those advising in matters with a higher risk of money laundering or fraud should conduct checks so as to satisfy themselves as to the source of the funds, especially where there are difficult questions of where moneys come from

- in relevant cases, checks should be conducted against the client's details on the consolidated list produced by the Office of Financial Sanctions Implementation (OFSI) to determine if the client is a target match of a designated person on that list in accordance with our Financial Sanctions Policy

- no client money should be accepted from the client for payment into a client account until the verification process has been satisfactorily completed (or otherwise sanctioned by our MLRO on a risk sensitive basis)

- where our fees or other funds are to be provided not by the client but by a third party then

we will request evidence of identity and address from not only the client but also the individual(s) providing the funds. Where third parties contribute, fee earners need to be able to establish some form of relationship to explain why they are doing so. Fee earners must consider if they need to enquire further as to how any other parties acquired the funds to be able to contribute to the purchase. Where the sums to be contributed are for a significant amount (this is a matter of judgement depending on the circumstances), fee earners must also identify the source of funds prior to our firm receiving funds. This may include asking questions about how the sums were acquired and requesting copies of bank statements to look for regular salary payments or unusual, large receipts

- non-UK individual clients should be asked to produce passports together with separate evidence of the client's permanent address obtained from the best source available.

- all documents must be received in their original form, photocopied and endorsed by the fee-earner with the word 'original seen' and then signed by the fee earner

- where we receive information about a change in identity, we will request and review further documentary evidence.

Non-individual clients:

- in the case of commercial clients, body corporates or other non-natural persons (including trusts), fee earners must take reasonable measures to understand the ownership and control structure. The aim is to seek to verify the beneficial owner's identity, not simply that the identity in question is a beneficial owner. Fee earners must also identify and verify the name of the company, its company number or other registration number, and the address of its registered office, and if different, its principal place of business.

  They must also take reasonable measures to determine and verify the law to which the company is subject, and its constitution (whether set out in its articles of association or other governing documents) and the full names of the board of directors (or if there is no board, the members of the equivalent management body) and the senior persons responsible for the operations of the body corporate. As part of the identity and verification checks, it may be necessary to determine the:

    - name, registered number, registered office and principal place of business
    - board of directors, or members of its management board
    - senior management
    - the law to which it is subject
    - its legal owners
    - its PSCs
    - its memorandum of association or other governing documents

  In particular, fee earners must:

    - at the outset of the first matter for that client, obtain from their own search of Companies House:
        - a copy of the Certificate of Incorporation as proof of registration
        - an excerpt of the company's registration on the PSC Register

    - conduct CDD checks to verify the above information and to establish who ultimately

controls the client and also all beneficial owners who are persons of significant control (PSC), being those who have a 25% shareholding (or greater). As a minimum, this will include evidence to verify the identity of two Directors or other officers who exercise ultimate control over the business and all PSCs listed on the Companies House' PSC Register.

  Where applicable having regard to the circumstances, the identity of the beneficial owners must usually be verified to the same standard as that applied to clients who are natural persons. In lower risk situations and in limited circumstances (such as when our firm has already previously verified the identity of the beneficial owner) there may be other reasonable measures to verify the beneficial owner which might instead be applicable such as taking verification information from non-independent sources (e.g. non certified documents or information from reputable websites).

  - in the case of non-domiciled companies, consider if further checks may be needed. We feel it is, in any case, important to check that those who purport to represent an organisation are actually entitled to do so

- where they have exhausted all possible means of identifying the beneficial owner of a corporate body but have not succeeded or are not satisfied that an individual is the beneficial owner, take reasonable measures to identify and verify the identity of the senior person responsible for managing that corporate body and record all actions taken and all difficulties encountered in doing so. Where they have been unable to verify the identity of the beneficial owners of a non-natural person, they should consider the reasons for this, whether this should lead to a disclosure and/or whether to act or continue to act for the client. In all cases, the MLRO must be alerted to consider which steps are required.

Partnerships (not LLPs):

- For UK partnerships (other than LLPs) and unincorporated associations, the general position is to treat them as a group of individuals and conduct CDD on all partners individually. For larger partnerships, depending on the individual risk assessment, it may be acceptable to treat the partnership as we would a private unlisted company. For fully professional partnerships such as those wholly or substantially made up of regulated professionals (e.g. law firms, accountants etc.), SDD may be appropriate but this will depend entirely on the risk assessment.

Conveyancing specific:

In conveyancing matters:

- fee earners must ensure that all documentary evidence is obtained in accordance with the procedures of the Conveyancing Quality Scheme (CQS)

- fee earners must also commission an electronic identity check for all (new) clients instructing on a sale or purchase and in relation to business and/or property transactions

- fee earners must consult the MLRO if they are not already involved where:

  - the value of a transaction is complex or unusually high for the client or for this firm

- where the fee earner cannot understand the nature and purpose of the client's instructions

- where the fee earner cannot understand the rationale for the contract or its value given the property or business concern which is involved

- fee earners should conduct checks so as to satisfy themselves as to the source of the funds especially where funds are to be used as consideration for a conveyance. Depending on the client's circumstances, fee earners may need to question the source of their wealth and not just the source of funds for completion. Our approach is that the source of funds must always be known about in advance and where the sum is for a significant amount and is a transactional sum and not merely for settlement of our fees (this is a matter of judgement, depending on the circumstances questions must be made as to how that money was acquired). If 'savings' then fee earners should look to profile how this person might have acquired this sum, such as detailing their occupation. Where possible, this will involve a check of the information with a Google search and/or a request for six months of bank statements to look for regular salary payments or unusual, large receipts. Fee earners must record the checks on the file opening checklist/relevant CDD form (at **Appendix Five**). Copies of any documents should be stored in a separate clip in the casefile.

Trusts:

In accordance with regulation 28(4)) of the MLR 2017, fee earners need to identify the beneficial owner of any 'client' which is beneficially owned by another person.

Where we are instructed by someone involved with any existing trust to advise in relation to it (including will trusts and personal injury trusts), fee earners need to take a risk-based approach to verifying the identity of the ultimate beneficial owner(s) of the trust as well as any individual who has control over the trust and must extend our CDD processes to them.

As the trust itself does not have a legal personality, the trust cannot be our client and so our client will be the settlor, the trustees, the protectors and/or one or more of the beneficiaries. If the identified beneficial owner is an entity, fee earners may need to understand who its ultimate beneficial owners are, depending on the entity's status (e.g., whether it is a company or some other type of entity).

In particular:

- CDD will need to be conducted on the individual(s) who is/are deemed to be the client and/or to whom our firm owes a duty of care and who will receive the benefit of our services
- where we act for several beneficiaries, subject to conflict issues, fee earners should ideally note all beneficiaries and potential beneficiaries named in the trust deed and any associated document and conduct CDD on each of them unless:
- we are acting for them as a class in which case fee earners should identify the class by its name
- it has not yet been determined that they will benefit from the trust (i.e. they do not have a determined vested interest in the capital of the trust) in which case CDD is conducted as soon as they are identified
- where beneficiaries have been designated as a class, fee earners need to establish and verify the identity of a specified beneficiary before they are involved in the payment to, or exercising of rights of, that specified beneficiary
- When applying CDD to a trust, or any other legal arrangement/entity which is not a company, involving a class of beneficiaries, fee earners must always verify the identity of the beneficiary

or beneficiaries before any payment is made to them or they exercise their vested rights in the trust or legal entity/arrangement

- where the identified client (i.e., the trustee or the settlor) of a trust is an entity, fee earners must establish the ultimate beneficial owner of that entity with reference to the type of entity (company or other entity) and by following, where relevant, the procedures above in relation to non-individual clients (see above). The ultimate beneficial owner of a settlor, protector or sole beneficiary entity should be fully identified
- If the trust is a relevant trust for registration, fee earners must also identify potential beneficiaries
- CDD may need to be conducted on the non-client settlor, trustees, protectors and/or anyone who controls the trust
- where the trustee is a professional trustee entity, as they should have no interest in the assets placed in trust, reasonable measures should be taken to verify the identity of the beneficial owner(s) of the trustee on a risk-sensitive basis. Higher-risk indicators may be where the professional trustee entity is unregulated or where the professional trustee is not independent of the settlor (e.g. family offices). Lower risk factors may be where the professional trustee is itself a regulated entity (or owned by one) or is large, well-known and/or listed on a regulated market. In such low-risk instances, it may only be necessary to conduct simplified due diligence on that entity. In all cases, fee earners need to document the rationale for their actions seeking guidance from the firm's MLRO, if and when appropriate
- where the client has a trust funding role, checks will be needed to understand the source of wealth and the source of funds which were contributed to the trust (or used to acquire assets contributed to it)
- fee earners need to identify and understand the nature and extent of assets settled on the trust
- fee earners will need to have sight of the trust deed or documents relating to the trust, including, where relevant, explanatory notes to assist with understanding the content of the trust.

Fee earners must record risk assessment and verification checks undertaken on the file opening checklist/relevant CDD form (at **Appendix Five**).

Fee earners must also consider if a trust needs to be registered with HMRC using the Trust Registration Service (TRS). Organisations and persons involved in preventative work in the field of anti-money laundering, counter terrorist financing and associated offences, can now request access to details on the register about the people associated with a trust.

The following trusts established after 10 March 2022 may need to be registered within 30 days of creation:

- All UK express trusts, unless they're specifically excluded
- Certain non-UK express trusts, and
- Non-express trusts and specifically excluded express trusts which are liable to pay any of the following taxes:
- Capital Gains Tax
- Income Tax
- Inheritance Tax
- Stamp Duty Land Tax
- Stamp Duty Reserve Tax
- Land Transaction Tax (in Wales).

Whether a trust is registrable must be considered by the fee earner as part of the AML risk assessment process and, where we are responsible for registering the trust (as an agent or otherwise), overseen as part the legal work associated with the instruction.

The Fifth Money Laundering Directive to the MLR 2017 extended the scope of the trust register to all UK and some non-UK trusts that are currently open as well as new trusts. This means that it may be that some existing trusts may need registering whether or not the trust has to pay any tax (subject to exceptions). Where this applies to any matter, any newly identified risks and steps to be taken should be recorded as part of our ongoing AML monitoring in accordance with this Policy (see below).

Where we act as the Trustee for a relevant trust, there are additional, ongoing responsibilities, including but not limited to maintaining written records and providing certain specified information to HMRC annually in accordance with R44 of the MLR 2017.

Trust or Company Service Provider Work (TCSP):

Our firm is specifically authorised by the SRA as a TCSP. We acknowledge that, as a TCSP, we are at high risk of being used for money laundering or terrorist financing not least because the creation and management of trusts and companies might be readily used to disguise the ownership and control of assets that can aid the concealment of proceeds of crime.

The specific risk factors that relate to our TCSP work have been taken into account as part of AML Practice Wide Risk Assessment.

We always treat all TCSP work as being higher risk and therefore, our approach is to always conduct enhanced due diligence (EDD) in such cases. In accordance with our EDD procedures (see below), fee earners involved with TCSP matters must complete a Matter Risk Notification Form and discuss the circumstances with our MLRO. In applying risk-based approach to the situation, our MLRO will consider the additional EDD checks to be undertaken.

Trustee work:

As a minimum, the following procedural steps must be taken when we act as (as opposed to for) a trustee (such as a professional trustee).

When acting as a trustee, there are additional obligations, in addition to the standard procedures required for trusts work (see above), that we are required to meet pursuant to the MLR 2017. In particular, the MLR 2017 impose obligations on trustees of 'relevant trusts' to maintain accurate and up to date written records relating to the trust's beneficial owners and potential beneficiaries and provide certain information about those beneficial owners and potential beneficiaries to relevant persons and law enforcement authorities upon request.

In particular, the trustee must maintain accurate and up to date written records of all the trust's beneficial owners, who will include its:

- settlor
- trustees
- actual or potential beneficiaries
- any other individual who has control over the trust which may include a protector or protectors, and
- any other potential individual beneficiaries (not entities) referred to in a document from the

settlor, such as a letter of wishes, relating to the trust.

Where we act (even if only occasionally) as a trustee of a taxable relevant trust, pursuant to R44 of the MLR 2017, part of the trustee role is to maintain written records and provide certain information specified in the MLR 2017 to HMRC on an annual basis. As such, in order to be able to provide the information at the relevant period as specified in the MLR 2017, fee earners need to collate the following information at the outset or as soon the identities of beneficiaries or others with relevant interests have been determined:

- in relation to any individual beneficial owner or named potential beneficiary:
    - the individual's full name
    - the individual's month and year of birth
    - the individual's country of residence
    - the individual's nationality, and
    - the nature and extent of the individual's beneficial interest

- If the beneficial owner is a legal entity:
    - the legal entity's corporate or firm name
    - the registered or principal office of the legal entity, and
    - the nature of the entity's role in relation to the trust

- If relation to certain trusts (type A and B) that have a controlling interest in a third country entity or if they subsequently acquire an interest in a third country entity
    - the third country entity's corporate or firm name
    - the country or territory by whose law the third country entity is governed, and
    - the registered or principal office of the third country entity.

Fee earners must record the risk assessment and verification checks undertaken using our CDD forms which are at **Appendix Five** and store them in the casefile.

Where we are professional trustees, we must retain the records referred to above for a period of five years after the date on which the final distribution is made under the trust in accordance with our **Archiving, Destruction and Retention Procedure** (in our **Data Security & Information Governance Manual**).

Probate and deceased persons estates:

When acting for executors or administrators of an estate:

- fee earners will need to verify the identity of at least two executors or administrators
- fee earners will need to obtain certified or official copies of the death certificate, will, grant of probate and any letters of administration, where available
- if a will trust has been created, fee earners should follow our standard procedures for trusts (see above).

In addition, fee earners should verify the identities of all the named beneficiaries of the estate. This is required primarily as a means to verify that assets or money from the estate are being distributed to the correct individuals but also acts as a failsafe against AML risks.

Reliance on a third party to conduct due diligence

The MLR 2017 allow our firm to rely on a third party to apply any or all of the necessary due diligence measures but only in certain circumstances. Importantly, our firm continues to remain liable for any failure in the third party's application of due diligence measures.

It is our policy therefore that, having regard to the risks, staff members may not unilaterally rely on due diligence conducted by a third party. Where a legal practice or other intermediary refers a client to our firm and we have the direct relationship with the client, our firm must treat the referred entity as the client and carry out due diligence on them as the client in the usual way.

If there is a valid reason for the firm to consider relying on due diligence conducted by a third party, fee earners must refer this to our MLRO who will decide whether we can rely on the third party and, if so, will provide guidance on the procedure to be followed. In particular, the MLRO will have to determine, having regard to the risks, the regulated status of the referring entity and the requirements of Regulation 39 of the MLR 2017, the type of reliance agreement with the referring entity which will be appropriate in the circumstances and how we may obtain from the third party all the information needed to satisfy our due diligence requirements.

Reliance by another firm on our due diligence

Our firm can be relied on by other firms to perform due diligence measures on a mutual client. However, agreeing to confirm that we have carried out appropriate due diligence measures in respect of a client carries risks and therefore our firm will only permit reliance on our due diligence in limited circumstances. In particular, counsel or an expert we are instructing may rely on our due diligence regarding the mutual client.

We may confirm that we have complied with our due diligence duties as set out in this policy but, unless specifically approved by our MLRO, any such confirmation shall make clear this does not constitute confirmation that we consent to the relevant party relying on our due diligence.

Any such requests from other parties for reliance on our due diligence must be forwarded immediately to our MLRO to review and confirm if we can agree and, if so, to provide guidance on the procedures to be followed.

Intermediaries, agents or representatives

Where there are third parties involved in the obtaining of client instructions or third parties seek to act as a client's representative or intermediary, we may need to verify who our client relationship is with and/or conduct additional checks on that third party.

We need to ensure we understand who our client relationship is with and who may be the ultimate beneficiary of our advice and assistance.

Where someone is represented by a third party such as a parent/adult on behalf of an adult child or an individual that is not employed by a business client, fee earners will need to undertake checks to identify and verify the intermediary's identity as well as their authority to act on behalf of our client.

Where the intermediary is our client, in that we enter into a retainer with and have a client/contractual relationship with them, we must still consider if the intermediary's client is also an ultimate beneficiary of our services.

CDD checks are to be undertaken on the intermediary/representative as well as the ultimate

beneficiary of our services. This will still be the case where the intermediary is a law firm or other entity acting in their capacity as a professional although, in such cases, it may only be necessary to conduct simplified due diligence (SDD) on that entity.

Where another law firm or other professional entity simply refers a client to our firm and we do not enter into a client relationship with them and/or they do not purport to represent the client, we will likely just consider this a referral or introduction of business and will not need to conduct verification checks on the introducer.

Discrepancies on Public Registers

In the case of a corporate body, where any discrepancies have been identified between the information on beneficial ownership collected as part of our CDD and ongoing monitoring checks and official information obtained or extracted from Companies House, this must immediately be reported to the MLRO in accordance with this Policy. The MLRO will consider if the firm is obliged to report this discrepancy to Companies House in accordance with regulation 30A(3) of the MLR 2017 taking into account that the information may be subject to legal professional privilege. The MLRO will assume responsibility for making any report in accordance with the firm's obligations and recording the report in accordance with this Policy.

Ongoing Monitoring of existing or established clients and transfers between departments

As part of our approach to risk management and, in accordance with R27(9) MLR 2017, we aim to operate a system of regular review and renewal of CDD and take a risk-based approach when acting for existing or established clients.

As part of our approach to risk management and, in accordance with R27(9) MLR 2017, we aim to operate a system of regular review and renewal of CDD and take a risk-based approach to such activity.

Existing matters:

It may be necessary to undertake ongoing monitoring through the course of a single matter particularly where there is an element of duration to the matter, and parties to the matter, or the source of funds and source of wealth involved may have changed.

New matters for existing clients:

Fee earners need to ensure they routinely:

- scrutinise different matters/transactions undertaken throughout the course of an ongoing client relationship, (including where necessary, the source of funds), to ensure that the transactions are consistent with the knowledge of the client, their business and their risk profile, and
- undertake further reviews of existing records as applicable, and
- keep the documents, or information obtained for the purpose of applying CDD, up to date.

Steps may include:

- reviewing the existing CDD to ensure it remains sufficient for the new matter
- renewing and re-evaluating the CDD at appropriate intervals (including during the course of the transaction)

- utilising the ongoing monitoring function within the eIDV system, Dye Durham, which automates verification monitoring and provides ongoing screening for updates in verification as well as other screening against sanctions, adverse media, PEPs
- suspending or terminating a retainer until we have updated information or documents, especially if we cannot be satisfied we know who our client is
- keeping under review any requests made for information or documents, and/or
- using technology to aid ongoing monitoring.

In accordance with R27(9) MLR 2017, fee earners must apply (or reapply) CDD to existing clients on a risk-based approach and this must always be conducted whenever they become aware that the circumstances of the existing client relevant to its risk assessment for that client have changed. For instance, CDD will need updating whenever we become aware of:

- any changes to the client's identification information or where the beneficial owner has changed. This would include change of name, address, beneficial owner or business
- any transactions which are not reasonably consistent with your knowledge of the client
- any change in the purpose or nature of the relationship, and/or
- any other matter which may affect our assessment of the money laundering or terrorist financing risk in relation to the client.

In relation to any new instructions, fee earners must also ensure that:

- copies of all existing CDD documentation/information are placed on the new casefile
- all available CDD documentation/information is assessed against the risks associated with the new instruction and additional checks are undertaken, where necessary
- even if no further documents or checks are deemed necessary, the client's current address should always be checked.

The full CDD process may also need to be renewed on an ongoing basis (annually or more often) if there is an identified need to review information concerning the beneficial ownership of a client (for example, where we need up to date information to understand the current ownership or control structure of an entity that is the beneficial owner of the client) or if our firm has any legal duty to contact a client under the International Tax Compliance Regulations 2015.

If no additional checks have been deemed necessary in the interim period, it is our policy that our full CDD process will always be repeated if there is a gap of three years since the end of the client's last matter with us.

Transfers:

If a client is being transferred from one department to another, a fee earner from the transferring department must provide copies of and/or permit access to all available CDD documentation/information held by the firm on behalf of that client.

For existing or established clients of the firm, fee earners must check any held records or standing checks of identities held by the firm.

Fee earners must be mindful that the CDD procedures undertaken for one type of matter may not be sufficient for another matter and so this must be factored into the client and matter AML risk assessment process for any new matters. The information we hold must be sufficiently robust and be appropriate for the new business the client now wishes to conduct and the money laundering risks

that this now represents.

Recording monitoring:

Each time a fee earner conducts ongoing monitoring, they should record:

- what aspects of the issue were considered
- action taken (if any)
- the reasons for that decision, and
- who undertook the monitoring and the date on which it was undertaken.

Suspicious Activities and Disclosures

Our usual risk-based approach does not apply to reporting suspicious activity, because the relevant legislation lays down specific legal requirements not to engage in certain activities (without appropriate consent) and to make reports of suspicious activities once a suspicion is held. The legislation also applies irrespective of whether the work is also within the MLR 2017 and therefore applies to all the work we undertake.

A disclosure could be necessary for one of two reasons.

- S 330 Proceeds of Crime Act 2002 (POCA 2002) – this imposes a duty to make a disclosure if, in the course of practice in the regulated sector, a person forms a suspicion (or should reasonably have done so) that money laundering is or could be occurring. The position is complicated by the fact that this is stated to be subject to legal professional privilege. The defence of privilege will mean that in some circumstances there may be no need for our firm to make a report to the NCA on the basis of instructions received.

- ss.327–329 POCA 2002 & ss.15–18 Terrorism Act 2000 – a disclosure might also be necessary to gain a defence to a charge under the principal offences most probably that of 'entering into an arrangement whereby money laundering is facilitated' under s.328 POCA 2022 and similar offences in relation to terrorist financing in the Terrorism Act 2000. Where a suspicion arises the firm may, subject to the complex provisions relating to legal professional privilege, need to make a disclosure and gain permission to continue to act. The rules on this requirement differ according to work type.

There are a number of red flags which fee earners should be aware of and to act on them if there is any suspicion that the firm may be being used to launder money. Where are more than one red flag indicators and the client is unable to provide a reasonable explanation, this will more likely provide grounds for suspicion.

If any member of staff may suspect that money laundering or terrorist financing is occurring then we/they are under a duty to consider the matter and, if appropriate, to make a disclosure to NCA.

With that in mind, staff members must report the following circumstances to out MLRO as soon as practically possible:

- where are more than one red flag indicators and they are not satisfied with the response from a client or verification checks have been inconclusive
- where they are aware or become aware or just suspect money laundering or terrorist financing. For instance, this may occur where the matter involves criminal or other illegitimate

property or money or the source of funds is (or might possibly be) from illegitimate means such as from criminal activities.

In such cases, they must complete a disclosure form which is at **Appendix Five** and pass it on to our MLRO in a confidential manner. It is important that all staff complete the relevant forms accurately and forward them to the MLRO at the earliest opportunity. Staff should not store a completed disclosure form on the matter file to which it relates as this would create a risk that the client might see the disclosure report, especially if the file is sent out of the office to another firm or is returned to the client.

Staff members should also make sure that any of their colleagues who might become involved in the work being done on the file or for that client are informed that the issue of a possible disclosure to NCA has arisen so that they may exercise caution and take direction from the MLRO.

Staff members are encouraged to have a discussion with our MLRO at any time. Even if our MLRO does not share their concerns it is their entitlement to make a report to the NCA as in most cases this will be the staff member's defence to a charge that they have committed an offence under POCA 2002.

On receipt of a report, the MLRO will:

- consider the report and make such further enquiries as are necessary to form a view on whether a report to the authorities is needed

- ensure that nothing done by the firm could alert the client in question to the fact that a report and an investigation may ensue. In particular, alerting relevant staff members who might come into contact with the client that a disclosure has been made, not least as a result of the risks of liability for tipping off

- factor in issues relating to legal professional privilege or other matters which may form a reasonable excuse for a disclosure not being made

- make an authorised disclosure, if appropriate, making full notes of the reasons for doing so

- make diary notes in the firm's key dates system indicating when the firm may continue to act and direct the adviser further as appropriate, and

- consider whether the intended subject of a disclosure, if a client, needs to be consulted about the planned disclosure i.e. to seek permission to use the privileged information on which the knowledge or suspicion leading to the need for a disclosure is based.

Ongoing enquiries with authorities and law enforcement agencies

In accordance with regulation 21(8) of the MLR 2017 we are mindful of the need to ensure that we have appropriate systems for responding to enquiries from law enforcement agencies or relevant authorities. It is important that we cooperate fully and respond rapidly to any such enquiries and do not hinder or obstruct justice.

We acknowledge that we have a responsibility to respond fully and rapidly to enquiries from authorities and law enforcement agencies as to:

- whether our firm maintains, or has maintained during the previous five years, a business relationship with any person, and
- the nature of that relationship.

We may receive enquiries from authorities and law enforcement agencies in relation to a financial crime investigation about our relationships with a client and/or they may seek access to client files to investigate whether the client, and possibly the firm or solicitor, has committed a criminal offence. We may also receive enquiries from law enforcement agencies seeking disclosure of information or documents about clients as part of their ongoing investigations into other potential crimes.

Whilst we are required to comply with the law, we are also required to keep our client's information confidential. In particular, whilst Schedule 2 of the UK Data Protection Act 2018 provides that we will not be in breach of that Act if we have to disclose confidential information for the purposes of the prevention, detection or investigation of crime, this does not override our duty of confidentiality to a client under the SRA Code of Conduct for Solicitors.

Therefore, we must not volunteer information about a client to law enforcement agencies but we will be obliged to provide certain information where we are required by law or a court order. Some of the information requested may also be subject to legal professional privilege (LPP) and cannot be disclosed at all.

Where our firm is approached by a law enforcement agency for information about a client or transaction they are investigating, it will normally be appropriate to ask if we can either:

- seek the client's consent to provide the information (noting that we must be wary of inadvertently prejudicing the crime investigation)
- be served with a notice or order requiring disclosure.

In order to ensure that we respond fully and rapidly to enquiries, our MLRO will:

- assume responsibility for handling all enquiries and managing requests from law enforcement agencies or relevant authorities
- dealing with clients who are the subject of investigations
- liaising with relevant third parties
- consider the firm's response to all such enquiries including factoring in considerations of legal professional privilege, which is not overridden by such requests
- consider whether discussions regarding the order or notice could be likely to prejudice a confiscation, civil recovery or money laundering investigation, contrary to section 342 POCA
- co-operate with any production orders or other requests for information made by the proper authorities
- maintain records in accordance with this Policy
- make diary notes in the firm's key dates system of any response deadlines.

Most requests from law enforcement agents will likely be received in writing, initially at least, and they should be forwarded to our MLRO as soon as practically possible for them to respond.

It is possible however that our firm may be visited by law enforcement officers such as when there is a warrant to seize information relating to a client under their investigation.

It is the responsibility of our MLRO to liaise with the law enforcement officers in the event of our offices being visited and staff members must not attempt to oversee the process themselves.

Should any law enforcement officer attend our offices including where they may seek entry to our office for search purposes, staff members must:

- alert our MLRO immediately
- refrain from commenting on any search noting that anything said may be used in later court proceedings.

In the event of the MLRO's absence then they will instruct another manager to oversee the process as a deputy on that occasion.

Our MLRO will be oversee the visit and will check any order or warrant for the following:

- the statutory power that the order or warrant is issued under
- the date of issue
- the premises to be searched
- who may enter the premises and whether anyone accompanying the law enforcement agents during the search should be named on the order or warrant
- what material is covered by the warrant
- whether material subject to LPP is covered.

If our MLRO is satisfied that the warrant gives the investigating officer the power to enter and search the premises, then they will ensure the firm does not obstruct the investigating officers in their search or prevent access to the relevant material. If they are not satisfied, they will make the relevant representations.

Record keeping

In accordance with our **Archiving, Retention & Destruction Procedure** (as set out in our **Data Security & Information Governance Manual**), all records are maintained by our MLRO in order that we have an audit trail of our decision-making process and can justify actions taken. In particular, they record all suspicious activities reported within the firm and disclosures made to the NCA for 5 years.

Our MLRO reviews these records at least annually (and more often if circumstances require).

Cash Receipts

The mere fact that a client pays in cash or wishes to do so is not necessarily itself a cause for suspicion. Nonetheless, the larger the intended cash payment, the more likely it is that money laundering should be suspected.

Our approach to cash receipts is therefore as follows:

- we will avoid, where possible accepting cash payments. However, if there is no alternative, in the absence of any complicating factors the firm will accept sums of up to £500 in cash (complicating factors could include, most obviously, a capital declaration from a client in receipt of public funding that they have less than this sum in capital)

- sums of over this amount should not be accepted and can only be considered in extreme circumstances and with the permission of the MLRO (evidence of their permission to be noted by means of a separate clip on the casefile)

- where a larger payment than we can accept is offered, advisors must be alert to the possibility of money laundering. Any suspicious activities must be reported to the MLRO in order that he can consider if a disclosure should be made and

- where funds held on account amounting to £2,000 or more need to be returned to the client or another individual, then approval of the MLRO is required before the funds will be released (evidence of their permission to be noted by means of a separate clip on the casefile).

Staff duties

It is the duty of all personnel within the firm to:

- attend training arranged within the firm if required to do so

- conduct CDD checks and other due diligence enquiries in accordance with the procedures outlined above

- report to the MLRO without delay all circumstances which could give rise to suspicion that the firm is being involved in some element of the money laundering process for a client or third party

- be wary of payment arrangements different from those anticipated or deposits of cash into our client account

- follow the directions of the MLRO when a disclosure has been made, bearing in mind the personal risk to the adviser of 'tipping-off' the client in question either expressly or by implication and

- maintain the utmost caution in maintaining confidentiality for the client and the firm when suspicious circumstances arise. Do not keep a copy of the disclosure on the case file, as the client may see it. Instead, mark any file where a disclosure has been made with red sticker on the front of the file.

Monitoring Compliance & Review

To help our MLRO ensure that our procedures are effective in identifying and mitigating risks within our firm, compliance with this Policy will be monitored as part of our Independent File Reviews procedure.

In particular, for relevant matters, supervisors are required to check that the fee earner has:

- adequately conducted an assessment of the client and matter risks and appropriately documented their findings in accordance with this Policy
- conducted sufficient CDD (and, where relevant, EDD) taking into account the perceived client and matter risks.

Where a supervisor identifies as part of their file review any non-compliance with this Policy and/or any potential AML issue or concern, this will be reported immediately to our MLRO. The MLRO will seek to identify how the non-compliance or issue can be rectified and oversee any corrective action required.

As part of their annual review of compliance, the MLRO will review:

- data generated from our Independent File Reviews procedure including any identified non-compliances
- all data generated in relation to disclosures
- any changes in law or regulation
- a sample of casefiles themselves
- our use of an electronic identity and verification/biometric screening system, including the screening functionality and data integrity.

As part of this process, the MLRO will determine if lessons can be learnt and how these can be communicated to staff. The results of the review will be considered as part of the practice wide risk assessment process and fed back into the ongoing evaluation of the firm's AML risk profile and overall approach to learning and development. The MLRO will oversee any changes which are subsequently made to our internal processes to ensure they remain sufficiently rigorous and efficient. Any findings will be included in the annual report to colleagues on the operation of this Policy and the Policy will be updated accordingly to ensure it remains in effective operation.

Independent audit function

Having regard to the size and nature of our practice and following an evaluation of our Practice Wide Risk Assessment, the firm has established an independent audit function.

The independent audit is led by Kuljit Lally. She is a Director and is regarded by senior management as having sufficient authority within the practice, the requisite skills and knowledge and sufficient independence from the firm's anti money laundering and countering terrorism functions to undertake the role. She is responsible for providing an objective and impartial report on the operation of our policy and control, to identify specific areas of non-compliance and to make recommendations on areas for future development.

The independent auditor carries out a full and documented audit of our firm's anti money laundering and countering terrorism financing compliance. As part of the independent audit function process, they undertake all or a selection of the following tests and enquiries on a risk sensitive basis in order to be able to evaluate the effectiveness of our controls:

- review our Practice Wide Risk Assessment
- review our current Anti Money Laundering and Countering Terrorism Financing Policy and controls and Financial Sanctions Policy including our Office of Financial Sanctions Implementation Reporting (OFSI) Procedure
- review of a sample of casefiles for compliance with the firm's Anti Money Laundering and Countering Terrorism Financing Policy and controls, as follows:
    - the number of files reviewed will be determined on a risk-based approach in accordance with the risks identified in our Practice Wide Risk Assessment
    - the sample will include some files which have already been reviewed by supervisors as part of our independent file review procedure to determine the extent to which any non-compliances with our AML procedures had been previously identified and whether they had been adequately corrected
- conduct some interviews with relevant staff members to determine the extent to which they are able to recognise and deal with transactions, activities and situations that may relate to money laundering and terrorist financing and that they are aware of and understand and

comply with the firm's policy and controls. In particular, to:
    - ask them to explain how they would evaluate client and matter risks
    - ask them to summarise some red flag situations applicable to their line of work
    - ask them to explain how they conduct AML related tasks or procedures such as CDD or submitting an internal suspicious activity report
- observing some staff members whilst they carry out AML related tasks or procedures
- reviewing learning and development plans and records for all relevant staff to determine whether:
    - they are receiving regular training on anti-money laundering and countering terrorism financing controls and law
    - they are adequately trained on associated compliance areas relevant to the implementation of the MLR 2017 including data protection and equality & diversity
    - they have been made fully aware know how to recognise and deal with transactions, activities and situations that may relate to money laundering and terrorist financing
    - any changes need to be made to staff training and development
- interview the firm's MLRO. In particular, to:
    - ask them to explain the steps they have taken to evaluate money laundering and countering terrorism financing risks
    - verify steps they have taken when any non-compliances have been identified
    - verify the steps they have taken when a staff member has made an internal suspicious activity report
    - verify the steps they have taken when making a formal report to the NCA or other enforcement agencies
    - demonstrate that they have or would be able to fully and quickly respond to enquiries from relevant law enforcement agencies about client relationships across the last five years
- review all internal reports made to and considered by the MLRO including suspicious activity reports and other requests for guidance and support
- review any external reports made on behalf of our firm to the NCA or other enforcement agencies.

At the end of the audit, the independent auditor will document the results and report their findings to the MLRO and senior management. Where relevant, they will make recommendations for the future development of this Policy and our controls.

The audit process is undertaken annually with the results of the review being considered as part of the practice wide risk assessment process and fed back into the ongoing evaluation of the firm's AML risk profile and overall approach to learning and development. The independent auditor will oversee any changes which are subsequently made to our internal processes and will follow-up on any actions identified from previous reports.

2.16. Financial Sanctions Policy

This Policy is designed to ensure we comply with applicable financial sanctions legislation and laws made under the UK sanctions regime including:

- the Sanctions and Anti-Money Laundering Act 2018 – this is the main legal basis for the UK to impose, update and lift sanctions
- Counter-Terrorism Act 2008
- Anti-Terrorism, Crime and Security Act 2001

- the Immigration Act 1971
- the Export Control Order 2008
- the Terrorist Asset-Freezing etc. Act 2010, and
- the Economic Crime (Transparency and Enforcement) Act 2022.

The UK government has also recently imposed a tranche of geographic sanctions on Russia in response to the situation in Ukraine:

- The Russia (Sanctions) (EU Exit) Regulations 2019
- Russia (Sanctions) (EU Exit) (Amendment) Regulations 2022
- Sanctions (EU Exit) (Miscellaneous Amendments) (No. 2) Regulations 2020
- Sanctions (EU Exit) (Miscellaneous Amendments) (No. 4) Regulations 2020.

Other countries and government bodies (including the EU, UN and USA) impose financial sanctions. We do not operate in those jurisdictions but we are aware that, to the extent that this may change, we must comply with any applicable sanctions.

The UK sanctions regime imposes serious and extensive restrictions on dealing with people (or entities or regimes) who are listed, defined in the legislation as 'designated persons' and also referred to as 'targets'. The regime applies to any person or entity in the UK and to all UK persons wherever they are in the world.

As independent legal professionals, there are specific reporting obligations which apply to us and prohibitions on carrying out certain activities or behaving in a certain way where financial sanctions apply. We may also face penalties for financial sanctions breaches. In particular:

- civil monetary penalties can now be imposed on us in respect of financial sanctions breaches on a strict liability basis, that is even where due diligence has been carried out and irrespective of whether there was any reasonable cause to suspect a breach, and
- in addition, where relevant persons have the relevant knowledge or reasonable cause to suspect, they may also face criminal liability.

Reporting obligations

Our firm (including all those working for us) have an obligation to inform the Office of Financial Sanctions Implementation (OFSI) if we, as a firm, know or have reasonable cause to suspect, that a person is:

- a designated person, or
- has committed an offence under the financial sanctions/assets seizure regimes.

If we know or have reasonable cause to suspect that a person is a designated person and that person is a client of our firm, we must also state the nature and amount or quantity of any funds or economic resources held by us for that client.

Reasonable cause to suspect refers to an objective test that asks whether there were factual circumstances from which an honest and reasonable person should have inferred knowledge or formed the suspicion.

When reporting to OFSI (see further below), we must include:

- the information or other matter on which the knowledge or suspicion is based, and
- any information we hold about the person or designated person by which they can be identified.

We are required to report this information, or other matter on which the knowledge or suspicion is based, if it came to us in the course of carrying on our business.

Prohibition

The financial sanctions regime prohibits us from:

- dealing with funds or economic resources owned, held or controlled by a designated person (or where we know or have reasonable cause to suspect this) whether by receiving payment from or making funds available to them including even making legitimate payments to those persons
- making funds, financial services or economic resources available:
  - directly to designated persons, or
  - indirectly for the benefit of designated persons
- knowingly or intentionally participating in activities that would directly or indirectly circumvent these financial restrictions or enable or facilitate the commission of any of the above.

We are also prevented from doing business or acting for listed individuals, entities or regimes unless we have obtained a licence from OFSI. The licence is effectively written permission from OFSI allowing us to act for someone in circumstances which would otherwise breach prohibitions imposed by a financial sanction. Licences cannot be issued retrospectively and so we must obtain one before we act.

In order to act, our firm will need both:

- a licence from the OFSI. This may be, depending on the circumstances:
  - working pursuant to and subject to any conditions of a general licence issued by OFSI, or
  - submitting an application to OFSI for a specific licence
- consent from the National Crime Agency (NCA) if we know or have reasonable cause to suspect:
  - the funds represent criminal property or the matter involves terrorist financing, and
  - the matter involves a designated person.

Asset Freezes

Where the financial sanction is an asset freeze, it is generally prohibited for us to:

- deal with the frozen funds or economic resources, belonging to or owned, held or controlled by a designated person
- make funds or economic resources available, directly or indirectly, to, or for the benefit of, a designated person
- engage in actions that, directly or indirectly, circumvent the financial sanctions prohibitions.

If we know or have reasonable cause to suspect that we are in possession or control of, or are otherwise dealing with, the funds or economic resources of a designated person, we must:

- freeze funds and economic resources immediately (the obligation to freeze them being with the person in possession or control of them)
- not deal with them or make them available to, or for the benefit of, the designated person, unless:
    - there is an exception in the legislation that we can rely on, or
    - we have a licence from OFSI
- report them to OFSI.

All areas of law

It is important to remember that there is no distinction in the financial sanctions regime between regulated and non-regulated sectors or activities. The financial sanctions regime applies to all the services we offer irrespective of whether they are also regulated under the Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (MLR 2017).

Although the sanctions regime is not the same as the Anti-money laundering regime, there are clear links as regards our onboarding and identification procedures. We maintain sanctions controls as part of our overall AML and financial crime regime and so staff members must refer to and consider our Anti-Money Laundering and Countering Terrorist Financing Policy in conjunction with the information set out below.

Responsibility

Our MLRO has been delegated overall responsibility for implementing and operating our financial sanctions controls.

Their responsibilities are to:

- assume day to day responsibility for overseeing our financial sanctions prevention procedures and ensuring that satisfactory internal procedures are maintained

- oversee the firm's compliance with financial sanctions legislation and laws and associated legislation including that relating to money laundering and terrorist financing

- oversee the documentation of the firm's risks in relation to financial sanctions and ensuring that our policy and procedures effectively mitigate against those risks

- promoting a culture of awareness and compliance by means of education and training and overseeing arrangements for the sharing of information on financial sanctions

- as part of their annual review process (see below) taking steps to ensure that our outsourced eIDV screening provider is appropriate in accordance with our Outsourcing Policy. Checks will likely need to include:

    - checking the functionality and data integrity of the system
    - checking the resources the provider uses for its data collection which should include OFSI's consolidated list
    - ensuring the system can be calibrated in accordance with our firm's risk profile and not necessarily using the settings suggested by the outsourced provider

- ensuring that they fully understand the systems capabilities and limits in order that this information can be fed back to staff members who use the system

- receive and consider any reports of suspicious circumstances and/or possible matches against the sanctions lists received in the light of any relevant information available to the firm

- provide advice when consulted on possible reports or and receive reports of suspicious circumstances and direct colleagues as to what action to take

- oversee the submission of reports, if appropriate, to OFSI and/or NCA on behalf of the firm

- reviewing these procedures annually (and more often if circumstances require) and verifying that they are in effective operation.

Risk Assessment

We consider the risks applicable to our firm and take a risk-based approach to sanctions screening as we do for other high-risk factors including dealing with high-risk countries and PEPs.

The UK sanctions regime is one of strict liability and taking a risk-based approach will not necessarily protect our firm or staff if we breach the sanctions regime (even unintentionally). However, as with any risks, there are those which will be more likely to lead to a breach of the sanctions regime or encountering a designated person or frozen asset and so we aim to take a proportionate approach to prevent unintentional or accidental breaches of the sanctions.

Although the sanctions regime is a separate requirement underpinned by separate legislation, there are links to our AML and other crime prevention controls. We therefore assess all financial crime risks as part of our Practice Wide Risk Assessment (PWRA) which considers our potential exposure to possible money laundering, terrorist financing and proliferation financing activity as well as sanctions and other risks. We have assessed the risks posed to our firm by our clients and services as well as the geographic reach of both and this includes considering how likely it is that our clients may be on the sanctions lists.

The results of the PWRA process are fed back into the ongoing evaluation of the firm's risk profile and overall approach to learning and development. This policy and procedures contained within have been developed in response to the results of that assessment. Our MLRO will oversee any changes which are subsequently made to our internal processes to ensure they remain sufficiently rigorous and efficient and this Policy will be updated accordingly to ensure it remains in effective operation.

Risk Profile

Due to the wide range of persons and entities on the financial sanctions lists, it is difficult to categorise any client base as low or high risk. However, our business is not international and so the risk of dealing with clients with links or associations with these countries is not particularly heightened.

Training

In accordance with our overall approach to Performance Management, Learning & Development (as more particularly set out in Section 5), all staff (including agents where relevant) are provided with training on this policy and the procedures within to ensure that they are alert to financial sanctions

risks when carrying out any work and compliance including reporting obligations they need to be aware of.

In particular, our MLRO oversees the arrangement and content of:

- training to be given to relevant staff members during their induction
- periodic or update training for all relevant personnel within the firm especially where their work is considered to have higher sanctions risks.

All training is planned, evaluated and recorded in firm wide and/or individual training plans as appropriate in accordance with our training procedures in Section 5.

Controls

Alongside the controls within our Anti-Money Laundering and Countering Terrorist Financing Policy, we operate a number of measures to minimise our exposure to the financial sanctions regime.

It is especially important for us to consider and be aware of our possible exposure to business, including clients and other persons including counter parties, which may be subject to UK sanctions.

We apply a risk-based approach to check that our clients are not subject to UK sanctions lists and that there are not any other indicators of sanctions evasion risks.

Client and Matter Risk Assessment

At the beginning of a client relationship and in conjunction with our client due diligence procedures, an assessment is also conducted for each client and matter. The assessment is conducted at the outset of the client relationship by the fee earner to identify and assess the client and matter risks and from which they may determine the appropriate standard of client due diligence required. We also continue to assess the risks throughout the client relationship and during the course of each matter with additional and ongoing checks conducted as appropriate.

Further detail is set out within our Anti-Money Laundering and Countering Terrorist Financing Policy.

As part of these individual client/matter risk assessments, fee earners should consider how likely it is that the client may be on the sanctions lists or the matter is otherwise linked to someone on the lists. In order to have confidence in the conclusions of the client due diligence, fee earners need to be able to answer the question of 'who' we are dealing with but also the more challenging questions of 'how' and 'why' we are dealing in relation to the matter. We need to consider the possibility that a designated person is exercising control over the individual or entity that is our client or a counter-party.

As part of this risk assessment (and as and when relevant during the course of the matter), fee earners may need to have regard to the following factors that may increase the risk of a person being on the sanctions list, including clients or matters:

- with links to jurisdictions subject to sanctions, even if the clients are based locally
- involving PEPs from jurisdictions subject to sanctions
- involving complex corporate structures in jurisdictions with high terrorist financing risks.

There may be other red flag indicators such as:

- client resistance to due diligence
- the use of corporate vehicles to obscure ownership and involvement of third parties
- clients who seem unable to receive funds or send funds from a bank account in their name, for no good reason
- the use of newly opened accounts
- clients changing their name by deed poll
- matters being unusual, opaque, complicated or particularly large.

Examples of other financial sanctions and related red flags are set out as part of our AML proforma which are at **Appendix Five**.

Where we encounter a red flag, we need to:

- increase our efforts to understand if there is a legitimate reason for the occurrence of the flag,
- consider whether the presence of a red flag requires our firm to make a report to OFSI and/or to terminate the client relationship (see below).

It is difficult to categorise the clients that may need to be checked simply by their nationality or country of residence and fee earners should be aware that UK nationals and UK residents can also be on the sanctions lists.

It is especially important that we consider the risk of a designated persons sitting behind anonymising legal structures and potentially exercising control over the individual or entity that is our client or a counter-party. Undertaking due diligence on non-natural persons and counter-parties is inherently more difficult than on natural persons that are our client but the aim must be for our firm to look behind the legal structures and/or to access the information we need to be assured that we fully understand the beneficial ownership and the background of the matter.

Where there is an increased risk that the client may be on the UK sanctions lists or the matter is otherwise linked to someone on the lists then the client and/or matter will be deemed high risk and will need to be managed in accordance with our Matter Risks Procedure. In applying a risk-based approach to the situation, our MLRO will be responsible for giving advice on the additional Enhanced Due Diligence (EDD) measures, which need to be undertaken, including sanction checks on clients and/or relevant parties.

Our due diligence processes are set out within our Anti-Money Laundering and Countering Terrorist Financing Policy.

Sanction screening

As a firm, it is part of our Policy to use an electronic identification and verification tool to assist with the conducting of CDD and EDD and screening against the sanctions lists in certain cases as follows:

- for all clients and potentially counter-parties to the transaction instructing us for Conveyancing transactional work
- for all clients and potentially counter-parties to the transaction instructing us for Corporate and M&A transactional work
- for all clients domiciled in Russia or Belarus

We may also conduct other manual screening checks wherever there is an increased risk of a person

being on the sanctions list such as:

- using OFSI's screening platform – https://sanctionssearchapp.ofsi.hmtreasury.gov.uk/. This platform is preferable as it is able to apply 'fuzzy logic' (i.e. it can find a partial as well as an exact match, see below)
- undertaking manual checks (by pressing Ctrl+F to undertake an in-page search) directly against:
    - OFSI sanctions lists, and
    - regime-specific consolidated lists and notices.

In addition to screening individual clients, we may also, depending on the results of our risks assessment of the particular matter, also need to screen:

- directors and beneficial owners of corporate or non-individual clients and/or those who otherwise may be able to exercise control
- counterparties or other third parties, and/or
- intended recipients of funds where we have reason to believe that they may be subject to financial sanctions.

The definition of whether an individual exerts 'control' over an entity within the meaning of the UK sanctions regime, is a subtly different test to whether an individual is a 'beneficial owner' of an entity under the MLR 2017. The shareholding trigger in UK sanctions regimes is commonly 50% share ownership but it must be appreciated that there are several other ways that an individual may have or exert control, independent of their shareholding.

When encountering state-owned entities of a jurisdiction where the premier or other senior politicians are designated persons, we need to consider whether these politicians exercise control over these state-owned entities. 'Control' is defined in OFSI guidance as including 'when it is reasonable to expect that the sanctioned person would be able to ensure the affairs of the entity are conducted in accordance with the [sanctioned] person's wishes' which means, in effect, that any such state-owned entity of such a jurisdiction may effectively be subject to sanctions.

Fuzzy Matching

Fuzzy matching may be used as part of our screening to allow for non-exact matches to be identified. Occasionally, data may have been inadvertently misspelt by a client but also some criminals targeting organisations often transpose names, dates of birth and other personal information to attempt to conceal their true identity.

As part of the screening processes used, we may take into consideration slight nuances in a name or other identification data (including mistakes in client data).

For example, where the circumstances suggest this might be applicable or useful or in in particularly high risk matters, screening checks will include checks on:

- different spellings of names e.g. 'Elisabeth' or 'Elizabeth'
- shortened names e.g. 'Elisa', 'Elsa', 'Beth' etc.
- insertion/removal of punctuation and spaces
- name variations
- abbreviations e.g. 'Ltd' instead of 'Limited'.

However, the risk with this is we then may obtain a false positive result that may then need more scrutiny.

Timing

We conduct this screening before our firm:

- undertakes any work for or on behalf of an individual or entity, and
- receives or transfers any funds to, from or on behalf of the individual or entity.

If the matter is accepted then, irrespective of whether there was a negative result at the outset, ongoing assessment may also be needed during the lifetime of the client relationship. For instance, we may also undertake screening routinely:

- if additional information emerges as the relationship or matter progresses (in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy)
- when sanctions change, we need to consider undertaking a recheck of all clients and related parties (beneficial owners and counterparties) and re-examining all money (including money for fees or disbursements) held across accounts where sanctions status might have changed or risk has increased
- wherever we become aware that a target has been added or removed from the sanctions lists
- when a corporate entity's data has changed such when new directors are appointed or details of the beneficial owners has changed
- in certain higher risk cases, over a defined number of months as deemed applicable (in such cases, the frequency will be noted on the matter risk assessment and appropriate steps taken to ensure checks are diarised and the results documented).

Positive results

Where a client or other party is identified as a possible sanctions match, we will review all the client identity information or other information we hold (including addresses, nationality, dates of birth and/or passport or other identity information) against the sanctions list to make sure we do not have a false positive identification.

Office of Financial Sanctions Implementation Reporting Procedure

Where any member of staff is aware, becomes aware or has reasonable cause to suspect that:

- their own work involves a designated person
- a person that this firm has dealings with (including clients and third parties) is a designated person, has committed a sanctions offence or is subject to an asset freeze, Or
- there has been a breach, and/or
- someone has committed an offence.

they must report this to our MLRO immediately.

If a staff member believes the matter they are dealing with involves financial sanctions as well as possible money laundering or terrorist financing, they must also refer to our Anti-Money Laundering and Countering Terrorist Financing Policy and comply with our AML internal reporting obligations. It may be that the circumstances could also give rise to a suspicion under the Proceeds of Crime Act

2022 (POCA 2022) which may require a suspicious activity report to be filed and pose restrictions on how we may engage with the client or other party.

All relevant information must be brought to the MLRO's attention and guidance sought from them before taking any further action or engaging further with the client.

On receipt of this information, our MLRO may need to:

- alert our COFA to put steps in place to ensure that our firm will not make any transfers of client funds including communicating this to all staff and ensuring that unauthorised staff cannot unblock access to frozen accounts/assets. Similarly, where our firm is owed payment by a designated person and does not have or does not expect to receive a licence, our firm should avoid writing-off the money owed as this may amount to providing a financial advantage to the designated person. To write off non-payment as a bad or uncollectable debt would likely require a licence from OFSI

- where a client already has our client account details, communicate clearly to them that they should not send any funds to our firm until further notice

- instigate a freeze on paid work done for the designated person and communicate clearly to them the reason why

- consider the circumstances and make such further enquiries as are necessary to form a view on whether a report to OFSI is needed. Our MLRO may discuss the person's sanctioned status with them (but not any subsequent official report to OFSI if required) without being concerned about tipping off, as the sanctions list is public information. However, if a suspicious activity report may also need to be filed, notification to the designated person may carry some risk of committing an offence under POCA 2022 so the level to which our firm may communicate with them will need to be considered carefully in advance

- consider if any of the information is subject to legal professional privilege noting that, as a solicitor firm, we are not required to report any information which is received in privileged circumstances or a belief or suspicion based on information which is obtained in privileged circumstance. Whilst legal professional privilege is unlikely to mean we cannot make a report at all, it may need to be considered in relation to what information we can include in the report. Whenever we invoke legal professional privilege to not report to OFSI or to limit the information reported, our MLRO will make a detailed record as to the reasons for the decision taken including:

    - who took the decision
    - when the decision was taken
    - the reasoning as to why legal professional privilege applied
    - who in the firm signed off on this approach
    - any other relevant information for example relevant legal advice received on this point

- prepare a report to the OFSI using the Compliance Reporting Form at **Appendix Six**, if appropriate, including the following information:

    - the information or other matter on which the knowledge or suspicion is based
    - any information the firm holds about the person or designated person by which they

can be identified

  - if there is knowledge or reasonable cause to suspect that a person is a designated person and that person is a client of our firm, details of the nature and amount or quantity of any funds or economic resources held by our firm for that client

  - where reports to OFSI involve a designated person, they include their unique 'Group ID' reference number which is the identifier for a designated person which can be found in their entry on OFSI's consolidated list

- submit a report to OFSI, where appropriate, in the manner prescribed by OFSI. Currently, reports of frozen funds and economic resources, information regarding a designated person, and notifications of credits to frozen accounts are to be emailed to OFSI at: ofsi@hmtreasury.gsi.gov.uk. Reports regarding suspected breaches are currently to be submitted to OFSI using the relevant form on GOV.UK website.

- co-operate with OFSI and ensure the firm obeys any orders or directions relating to the person

- maintain records of all suspicious activities reported within the firm.

Where a client asks us to help them circumvent the sanctions regime or to help them to commit another offence, our MLRO will consider whether they need to make any further reports to OFSI to help prevent offences from occurring.

Our MLRO will also, in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy, consider whether there is a suspicion of money laundering or terrorist financing which requires a report to the NCA. Even where our MLRO is satisfied that the firm does not need to make a report to the NCA, they will still need to assess the circumstances and determine whether the firm wants to continue to act and the extent to which we may communicate with the client. All work will be suspended in the meantime.

Sanctions work

We do not offer services in the area of sanctions such as transactional or litigation services to designated persons or offer sanctions advice.

Where it is determined that a client is a designated person under the UK sanctions legislation or there is an increased sanctions risk that cannot be managed to an acceptable level, this will usually be considered a good reason to decline to act or to terminate our retainer with them. However, this have to be determined by the individual facts of the matter and therefore, it will be brought to the attention of our COLP to oversee in accordance with our Accepting & Declining Instructions Procedure. They will consider the risk of continuing our firm's relationship with the client, including any reputational and regulatory risks as well as the risk that our firm may ultimately not be paid for work done (unless we can obtain a licence from OFSI and there is willing participation by our bank).

We can only act or continue to act on a matter involving a designated person under a licence issued by OFSI. If the firm decides it does still want to act then, our MLRO will:

- seek advice from OFSI on how to proceed

- determine if the work can be conducted pursuant to a general licence issued by OFSI (even if there is, some considerations such as reporting to OFSI, still apply), and

- if there is not a general licence in place, then our MLRO will oversee the following controls:

    - contacting OFSI to obtain a specific licence to deal with the funds as our firm will not be able to deal with the resources of the designated person without OFSI's approval

    - Where OFSI asks for information in relation to a licence application that would rightly be subject to legal professional privilege and that privilege has not been waived, our firm cannot volunteer it. However, in such an instance OFSI is under no obligation to grant a licence without this information and this is a risk that must be considered

    - ensure we have put in place ongoing steps ensure our firm will not make any transfers of our client's funds (see above)

    - engage with our bank and insurers to determine whether they will continue to provide services in this instance.

Monitoring Compliance, Audit & Review

To help our MLRO ensure that our procedures are effective in identifying and mitigating risks within our firm, compliance with this Policy will be monitored as part of our MLRO's overall monitoring regime (see our Anti-Money Laundering and Countering Terrorist Financing Policy).

In particular, compliance will be reviewed as part of our Independent File Reviews procedure. In particular, for relevant matters, supervisors are required to check that the fee earner has:

- adequately conducted an assessment of the client and matter risks and appropriately documented their findings in accordance with this Policy
- conducted sufficient and proportionate screening taking into account the perceived sanctions risk.

Where a supervisor identifies as part of their file review any non-compliance with this Policy and/or any potential issue or concern, this will be reported immediately to our MLRO to determine whether the breach could lead to potential civil or criminal liability and the immediate action to be taken.

As part of their annual review of compliance, the MLRO will also review:

- data generated from our Independent File Reviews procedure
- all data generated in relation to disclosures
- any changes in law or regulation
- a sample of casefiles themselves
- our use of an electronic identity and verification/biometric screening system, including the screening functionality and data integrity.

Our MLRO also arranges for an independent auditor to carry out a full and documented audit of our firm's compliance in conjunction with our anti money laundering and countering terrorism financing audit. As part of the independent audit function process, the auditor is required to undertake enquiries and assessments on a risk sensitive basis in order to be able to evaluate the effectiveness of our financial sanctions controls.

The results of the annual review and audit process are considered by our MLRO and senior

management as part of the practice wide risk assessment process and fed back into the ongoing evaluation of the firm's financial sanctions risk profile and overall approach to learning and development. Our MLRO oversees any changes which are subsequently made to our internal processes and will follow-up on any actions identified from previous reports.

As part of this process, the MLRO will determine if lessons can be learnt and how these can be communicated to staff. Any findings will be included in the annual report to colleagues on the operation of this Policy and the Policy will be updated accordingly to ensure it remains in effective operation.

2.17. Property and Mortgage Fraud Policy

When we assist clients with any form of conveyancing, whether domestic or commercial, we assume a central role in the transfer of property. It is possible therefore that a member of staff may unwittingly assist in property or mortgage fraud.

Property and mortgage fraud can happen in many ways. Some identified threats include:

- fraudsters attempting to acquire ownership of a property either by using a forged document to transfer it into their own name, or by impersonating the registered owner with a view to raising funds against that property
- fraudsters may commonly seek to obtain a mortgage on a property. Once they have raised money by mortgaging the property without the owner's knowledge, they will then disappear without making repayments leaving the owner to deal with the consequences
- fraudsters may also try and convince others to pay sums for properties not yet built. For instance, they may be offered the opportunity to buy properties at a discount that aren't yet built and pay a deposit. In many cases, this land is unsuitable for development, or is bound to have planning permission refused and, as a result, the potential buyer loses all the money they invested
- fraudsters offering 'get rich quick' training. In particular, holding free presentations about making money from property investment during which they may persuade others to hand over money to sign up to a seminar or course promising to teach them how to make money dealing in property
- buy-to-let fraud, where companies offer to source, renovate and manage properties, claiming good returns from rental income whereas, in practice, the properties are near-derelict and the tenants non-existent.

Fraudsters may target a range of different types of properties but particular risks are to those properties:

- owned by a landlord, such as a buy-to-let owner or property developer
- where the owner lives somewhere else for all or part of the year
- where the owner is in temporary or long-term residential care
- where the owner has died and the property is held in trust
- which no longer have a mortgage.

We could unwittingly be involved in such fraud. Providing false information to the lender on the mortgage application would mean that the mortgage is being obtained fraudulently. When the mortgage is drawn down, it may be considered to be proceeds of crime and subject to anti-money

laundering legislation. If diligence is not observed, the firm and members of staff could both be implicated in the fraud.

We must therefore be very vigilant and safeguard our clients and ourselves. We must also ensure we continue to be aware of the risks to our clients and to alert them to means in which they may protect their own interests in properties from fraudsters.

Warning signs of property fraud

Fee earners should be alert to the possibility of property fraud. Some warning signs to watch out for include:

- the only contact details a party provides are their telephone number and email address
- we are instructed by one party and directed to only communicate with the other by post, telephone and email
- the client relies on utility bills as evidence that they live at a certain property
- the seller does not live at the property
- information given by the client is different to information on the electoral register or information we discover when conducting our AML risk review and due diligence
- changes are made during the process to the client's details or the bank account any funds will be paid into.

The client's behaviour may suggest property fraud is being committed if:

- the property has been owned for a long time, but the client selling it is younger than one would expect
- the client is reluctant to answer questions
- the client directs us to write to a different address, though they say they are the owner-occupier
- there are signs of urgency, for instance, the client asks that the process is completed urgently without explaining why or the property is listed at less than its market price, to speed up the sale.

Warning signs of mortgage fraud

Mortgage fraud occurs where individuals defraud a lender through the mortgage process. Some warning signs to watch out for include:

- unusual instructions such as being asked to act on transactions that do not follow the normal course or usual pattern of events. For example, if the firm is instructed to remit the net proceeds of sale to a third party instead of the client or there are plans for a sub-sale or back-to-back transactions
- property value increased, for instance, where the value has increased significantly over a short period of time out of line with open market conditions
- misrepresentation of the purchase price, such as where the true cash price is not reflected in the contract and transfer or is not as shown in mortgage instruction
- adjustments to the purchase price or allowances/discounts/incentives against the purchase price
- deposits being paid direct to the seller, perhaps exceeding the standard 10% or paid by parties other than purchaser

- cash and large settlement requests, such as settlements by cash or payments by third party cheque or transfer where there is a variation between the account holder, the signatory and prospective investor should give rise to additional enquiries and checks
- incomplete contract documentation such as dates missing or party's identities missing (and which can be filled in subsequently and fraudulently)
- secretive clients, especially where they are reluctant to provide details of their identity or seem very uninterested in the purchase
- suspect territory, such as client introduced by an overseas bank or other investor based in countries where production of drugs or drug trafficking may be prevalent
- where the property has been repossessed, there is a County Court judgment against the property or is part of a deceased's estate.

Risk Assessment

Practice Wide Risk Assessment

As part of our overall approach to risk management, the firm conducts at least an annual assessment of the risks to the entire practice to identity the warning signs of fraud and the steps to mitigate the risks. The results of the practice wide risk assessment process are fed back into the ongoing evaluation of the firm's risk profile and overall approach to learning and development. The MLRO will oversee any changes which are subsequently made to our internal processes to ensure they remain sufficiently rigorous and efficient and this Policy will be updated accordingly to ensure it remains in effective operation.

Matter Risks

All fee earners must be aware of the need to consider the risk element of matters before, during and after the life of the matter in accordance with our Risk Management Procedures. In particular, as part of the file opening risk assessment, fee earners must be alert to the warning signs of fraud and give consideration to any fraud risks associated with the transaction, the other party and the client. This consideration is evidenced on the file opening form/our property fraud checklist.

As part of this fraud risk assessment (and as and when relevant during the course of the transaction), fee earners may need to have regard to the following considerations which could be warning signs of fraud:

Parties:

- determining if there are links between the buyer and seller
- determining the location of the parties
- being asked to act for both the seller and the purchaser
- if the seller is a company or the seller has recently purchased from a company, checking that the names and addresses of officers and shareholders of the company appear to be connected with the transaction and whether this is an arm's length transaction
- considering use of off-shore companies or sales between related private companies
- considering additional checks on the purchaser in equity release schemes
- considering additional checks on the purchaser where the property has been repossessed, there is a County Court judgment against the property or is part of a deceased's estate.

Transaction:

- conducting undertaking title searches at the outset of the matter to ascertain whether details are consistent with the instructions from the client or otherwise supplied by the client or other party
- considering if there has been a recent transfer of the land
- being asked to complete a transaction and transfer title in accordance with already exchanged contracts
- being asked to sign an independent legal advice certification where you have not provided that advice.

Purchase price:

- considering whether property valuations appear to be reasonable
- being asked to make alterations to a valuation
- checking whether the buyer proposes to pay or has paid any deposit sums direct to the seller (that are not nominal reservations fees)
- considering whether there is anything that affects the price of the property or amount actually being paid including whether the seller is offering the buyer any incentives to buy the property or making any allowances or other sum is being set-off against the sums payable to the seller
- considering if the mortgage is for the full property value.

Transactions where there is a significant risk of fraud and/or a fraudulent seller

Where a transaction has been identified as having a significant risk of fraud and/or where there is a significant risk of a fraudulent seller, it should be classified as a 'high risk' matter and assessed and managed in accordance with our Risk Management Procedures.

As part of those procedures, fee earners must complete a Matter Risk Notification Form and take instructions from the Risk Manager as to how the matter should be managed.

If instructions are accepted and the Risk Manager confirms that this firm can continue to act, in addition to following any matter specific instructions from the Risk Manager, fee earners must follow our specific file management process in accordance with the CQS. The details are set out in **Appendix Five**.

In addition, fee earners must follow the following general procedures, as appropriate to the identified risk, when proceeding with the transaction:

Parties:

- ensuring that all information received from parties connected to the transaction is scrutinised and verified, wherever possible
- conduct company searches where a private company is the seller or the seller has purchased from a private company in the recent past and ascertaining the names and addresses of officers and shareholders which can be compared with the names of those connected with the transaction and the seller and buyer
- meet our client(s) where possible and get to know them
- ensuring there is ongoing management and review of relationships between the various parties so as to remain vigilant about the nature of the transaction and/or the behaviour of the parties involved

- Inform Kuljit Lally about potential risks that may arise. It is essential that appropriate steps are taken to reduce or eliminate these risks. Kuljit Lally will facilitate setting up strategies to manage and mitigate any potential risks.

Transaction:

- conducting necessary searches to ascertain details that have not been supplied by the client or other party or that are not otherwise revealed in title documentation; including:

  Registered Title

  - Land Registry Search from date of issue of Official Copies obtained at outset of transaction
  - searches conducted in registered names (not trading names)

  Unregistered Title

  - conducting searches against all names and any variations on those names
  - where an address has changed, conducting a search against any former address/county
  - conducting an index map search to ensure extent of land conveyed is consistent with title documentation
  - conducting a Land Changes Search to ascertain any entries details which have not been supplied by clients

- question unusual transactions and discuss any concerning aspects of the transaction with the client and make a note of all discussions on the casefile
- ensuring that all relevant sections of documents are completed before our client signs them to avoid incorrect or fraudulent information from being added later
- only witnessing signatures on transaction documents where the fee earner has actually seen the person signing it
- if any document has been pre-signed, conducting additional verification checks or requiring them to be re-signed
- examining and comparing signatures on transaction documents with other available documentation
- considering the names of any witnesses, for instance where they appear to be those of a related party
- Inform Kuljit Lally about potential risks that may arise. It is essential that appropriate steps are taken to reduce or eliminate these risks. Kuljit Lally will facilitate setting up strategies to manage and mitigate any potential risks.

Purchase price:

- scrutinise the source of funds to ensure it is consistent with our firm's knowledge of that client
- make enquiries of our client as to how they are funding the balance of the purchase price
- checking that deposit monies are from a legitimate source
- ascertaining the true net cash price to be paid and state this amount on all documentation
- Inform Kuljit Lally about potential risks that may arise. It is essential that appropriate steps are taken to reduce or eliminate these risks. Kuljit Lally will facilitate setting up strategies to manage and mitigate any potential risks.

Anti-money laundering

All clients

At the beginning of a client relationship and in conjunction with our Anti-Money Laundering and Countering Terrorist Financing Policy, an assessment is conducted by the fee earner to identify and assess the AML risks associated with that client and the particular transaction.

Client due diligence must be conducted in relation to *all* clients instructing us on property or mortgage-related transactions.

Fee earners must also conduct checks so as to satisfy themselves as to the source of the funds and source of wealth.

High risk clients/transactions

Enhanced due diligence (EDD) checks are required in high-risk matters, in particular, wherever it has been highlighted that:

- there is potential fraud risk or a warning sign of fraud on the particular transaction, or
- if the type of transaction is such that, by its nature, could present a high risk of property or mortgage fraud (even if there are no warning signs in that particular case).

In such cases, fee earners must:

- discuss the particular circumstances with our SRO
- obtain direction from our MLRO in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy
- retain full records of enhanced checking, and
- follow the direction of the MLRO and/or SRO as to any additional steps to be undertaken.

Checks on conveyancer acting for the other party

At the outset of the matter, fee earners must conduct checks on the conveyancer acting for the other party to the transaction.

In particular, fee earners must conduct checks so as to satisfy themselves as to the following:

- identity of the conveyancing practice and name and status of the nominated contact
- whether they are authorised and regulated by the Solicitors Regulation Authority (SRA) or Council for Licensed Conveyancers (CLC) – by means of a check of the recognised directory of their professional body – for instance, the Directory of Licensed Conveyancers, the SRA's Law Firm Search Check and the Law Society's Find a Solicitor directory.
- whether they are regulated for anti-money laundering purposes
- whether they are an established practice
- whether the email address provided by the conveyancer is correct.

Fee earners should be mindful of the SRA's 'Scam Alert' notices for possible fraudulent misuse of another firm's name and reputation.

Wherever possible, fee earners should make initial direct enquiries with the firm by using telephone

numbers and email addresses published by the Law Society and/or SRA.

In accordance with the security, cybercrime and fraud prevention procedures in our **Data Security & Information Governance Manual**, prior to transferring funds to the conveyancer, fee earners should undertake reasonable checks to verify the bank account of the conveyancer prior to the transfer of any funds.

Where the fee earner identifies any concerns about the qualification, identity or suitability of the other party's conveyancer, the fee earner must alert our SRO and follow their direction.

Protecting clients' interests

In accordance with our **Cybercrime and Fraud Prevention Policy** in our **Data Security & Information Governance Manual**, we endeavour to maintain and develop established systems and controls to prevent the firm and our clients from being a victim of fraud.

As part of that approach, it is our aim to keep our clients informed of any steps that they may take to protect themselves and their property to reduce the risk of property or mortgage fraud.

In particular, fee earners must:

- in accordance with our HM Land Registry Policy and associated procedures, advise clients acquiring an interest in property of the steps that our firm and/or they themselves can put in place to ensure that HM Land Registry are able to contact them wherever they live to alert them to any changes to the registered title or other important notifications
- look to ensure clients are aware of what they may do if they believe they may have been the victim of property fraud which could include:
    - contact us for more guidance or assistance
    - contact HM Land Registry's property fraud line on 0300 006 7030 (Monday to Friday, 8.30am to 5pm) or by email to reportafraud@landregistry.gov.uk
    - reporting their concerns to Action Fraud, the national fraud and cybercrime reporting centre on 0300 123 2040 or online www.actionfraud.police.uk.

Suspicious Activities and Disclosures

We must always be alert to the possible risks of property or mortgage fraud when carrying out any work.

Where a transaction does not appear to follow the normal course or usual pattern of events or where any unusual risk considerations present themselves, the fee earner must:

- consider this a high-risk transaction
- discuss the particular circumstances with our SRO who will consider how the matter should be effectively supervised and by whom, and
- alert our MLRO and obtain their direction as to the requirements for EDD in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy (see above).

Where acting for a purchaser client, a determination will be conducted by our SRO as to whether a disclosure needs to be made to the lender. Where there are any discrepancies or other information which could reasonably be expected to be important to the decision whether to grant the mortgage, these would ordinarily need to be disclosed subject to any overriding duty of confidentiality to the

client. It is the responsibility of our COLP to consider the position in accordance with our Confidentiality Policy.

If the circumstances of the transaction are such that a conflict of interest may have arisen, the matter must be passed to our COLP. They are responsible for determining whether a conflict of interest is present or has arisen in accordance with our Conflict of Interest Policy.

Where any member of staff is aware, becomes aware or just suspects that a mortgage has been obtained fraudulently (and the funds have been received by the client, either into their account, or our client account) and/or that our firm is being involved in some element of mortgage fraud then they must make a disclosure to the MLRO on our firm's disclosure form as soon as practically possible in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy. In this respect, the mortgage fraud will also be treated as a money laundering issue and our money laundering procedures apply. Our MLRO will review this and give direction on how to proceed with the transaction.

Our MLRO is responsible for acting on any disclosures and handling all enquiries from law enforcement agencies or relevant authorities.

Training

In accordance with our overall approach to Performance Management, Learning & Development (as more particularly set out in Section 5), all staff are provided with training on this policy to ensure that they are alert to the possible risks of property or mortgage fraud and are able to recognise suspicious activity.

In particular, our MLRO oversees the arrangement and content of:

- training to be given to relevant staff members during their induction
- periodic or annual training for all relevant personnel within the firm.

All training is planned, evaluated and recorded in firm wide and/or individual training plans as appropriate in accordance with our training procedures in Section 5.

Staff Duties

It is the duty of all personnel within the firm to:

- attend training arranged within the firm if and when required to do so

- conduct fraud, AML and other risk assessments and due diligence enquiries in accordance with our firm's policies

- report to the MLRO without delay all circumstances which could give rise to suspicion that the firm is being involved in some element of property or mortgage fraud.

Review

In order to ensure that this Policy remains effective, the MLRO reviews it at least annually. When reviewing the Policy, the MLRO looks at all the data that has been generated in relation to disclosures, the results of our risk assessment processes and any changes in the law. Where necessary, the Policy

will be amended and further training will be provided for all staff on the changes to the Policy.

2.18. Anti-Bribery Policy

As professionals, solicitors' practices must safeguard their reputation for ethical behaviour and financial integrity and must avoid becoming involved in the receiving or making of bribes and/or facilitation payments as defined in the Bribery Act 2010. Failure to act with integrity could mean that both our organisation and the individual member of staff involved could face criminal proceedings.

We are therefore committed to ensuring that we protect both our staff and our reputation from accusations of bribery or corruption. This applies to our professional dealings with all staff (including key personnel), other legal professionals, experts, agents, third parties and with any associated persons as defined by the Bribery Act 2010.

All members of staff and any other persons associated with our organisation such as agents and business partners are not permitted to either offer or receive any type of bribe and/or facilitation payment.

Our MLRO is also our nominated Anti-Bribery Officer and is responsible for implementing and monitoring this Policy and for overseeing our anti-bribery procedures. Their duties in this role are to:

- ensure that satisfactory internal anti-bribery procedures are maintained and that appropriate action is taken in relation to any non-compliance
- ensure that proportionate due diligence is carried out before the organisation enters into any financial arrangements with agents, contractors or third parties and to ensure that what is being paid for the services provided is reasonable and has measurable benefit
- ensure that any donations are made to legitimate charities only and that any pro bono services provided to or on behalf of third parties are for legitimate reasons
- arrange for anti-bribery training to be covered during the induction process
- arrange for periodic training for all members of staff (including key personnel) within the firm
- provide advice when consulted on possible reports and receive reports of suspicious circumstances
- maintain our Gifts and Hospitality Register
- direct colleagues as to what action to take and not to take when suspicion arises and a disclosure is made
- report annually to key personnel on the operation of the Anti-Bribery Policy and procedures
- as part of our overall risk review, carry out an annual risk assessment on areas within our organisation which are most at risk of offering or accepting bribes and analyse those risks to ensure that our anti-bribery procedures remain effective and proportionate and
- undertake a review of this Policy annually to verify it is in effective operation.

Should any member of staff or associated person be in doubt when receiving or issuing gifts and hospitality, he/she must refer to our Gifts and Hospitality Policy.

All members of staff are actively encouraged to report any concern or suspicion of bribery or corruption to our Anti-Bribery Officer who will treat all such disclosures in the strictest confidence and who will endeavour to provide advice and guidance on any action to be taken.

To ensure that all members of staff understand their obligations, training is provided on induction and then updated from time to time. If a member of staff is unsure about any aspect of our anti-bribery obligations, they should speak to our Anti-Bribery Officer immediately.

Failure to comply with this Policy by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings.

2.19. Gifts and Hospitality Policy

It is important that our organisation, our employees and agents behave, and are seen to behave, appropriately and with integrity at all times.

In order to protect both our staff and our reputation from accusations of bribery or corruption, members of staff (including key personnel) are not permitted, directly or indirectly, to accept any gift or hospitality except in the following circumstances:

- they are occasional gifts, excluding money, which are mere tokens and with a low nominal value of under £25. This could include diaries, calendars and pens etc.

- where there are exceptional circumstances for instance where refusing the gift will cause significant offence or embarrassment. In such instances, the gift may be accepted subject to compliance with the procedures set out below.

For the purposes of this policy, 'hospitality' includes any form of accommodation, entertainment or other hospitality provided for a member of staff (including key personnel) by a third party and which is extended to the member of staff by reason of his/her position as a representative of our organisation. Members of staff (including key personnel) are generally permitted, to accept offers of hospitality in the following circumstances:

- where they amount to no more than normal working lunches or refreshments provided during a business visit

- where the hospitality is extended to members of staff attending an approved external seminar, conference or other external event, provided that such hospitality is extended to all who are in attendance

- where they are free seminars, courses or workshops, provided the benefit of our organisation.

Other gifts or offers of hospitality outside of the above perimeters may only be accepted where there has been prior approval from our Anti-Bribery Officer. In such cases, members of staff must provide the Anti-Bribery Officer, as soon as is reasonably practicable, with:

- a description of the gift or hospitality offered
- the reason why the gift or hospitality was offered and
- if possible, an estimation of the value of the gift or hospitality offered.

An accurate record will then be made by the Anti-Bribery Officer in our Gifts and Hospitality Register. In making the decision as to whether to accept the gifts or offer of hospitality, our Anti-Bribery Officer will consider the following:

- the value of the gift or hospitality and in particular, whether it is occasional or ceremonial (such as on a festival) and/or a mere token with a low nominal value of under £25

- whether the offer of the gift or hospitality is appropriate and proportionate

- the reason why the offer was made and whether there could be any perception that it could influence our firm or member of staff and

- whether the offer of the gift or hospitality is or is likely to be in contravention of the Bribery Act 2010.

In a similar manner, the giving of gifts or the offering of hospitality by our firm or any member of staff (including key personnel) to any third party is not permitted unless there has been prior approval from our Anti-Bribery Officer. In making the decision as to whether we are able to give gifts or offer hospitality, our Anti-Bribery Officer will consider the following:

- the value of the gift or hospitality and in particular, whether it is occasional or ceremonial (such as on a festival) and/or a mere token with a low nominal value of under £25

- whether the offer of the gift or hospitality is appropriate and proportionate

- the business case for the offer of the gift or hospitality and in particular, whether it might influence or be perceived to influence a business decision and

- whether the offer of the gift or hospitality is or is likely to be in contravention of the Bribery Act 2010.

An accurate record will be made in our **Gifts and Hospitality Register** of all gifts or hospitality offers made by the organisation or individual members of staff to third parties.

Failure to comply with this Policy by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Our Anti-Bribery Officer will undertake a review of this Policy and our Gift and Hospitality Register annually to verify that our policy and procedures are in effective operation.

2.20. Benefit Fraud Policy

It is possible that a member of staff may unwittingly assist in the making of fraudulent benefit claims. We must safeguard against becoming involved in the processing of illegal or improper gains for clients otherwise both the firm and members of staff could be implicated in the fraud.

Fee earners are reminded that if they dishonestly cause or allow 'to be produced or furnished, any document or information which is false in a material particular' or dishonestly cause or allow 'another person to fail to notify a change of circumstances which such regulations require the other person to notify, with the view to obtaining any benefit or other payment or advantage under the social security legislation (whether for himself or for some other person)' they are guilty of an offence (see s111A Social Security Administration Act 1992 as amended).

In addition, a fee earner may commit a criminal offence if he/she 'knowingly causes or knowingly allows to be produced or furnished, any document or information which he knows to be false in a material particular'. There is also a risk if a fee earner knowingly causes or allows 'another person to fail to notify a change of circumstances which such regulations require the other person to notify, and he knows that he, or the other person, is required to notify the change of circumstances' (see s112 Social Security Administration Act 1992 as amended.)

It is the duty of all staff within the firm to raise with our MLRO, without delay, any circumstances which could give rise to suspicion that the firm is being involved in some element of a fraudulent claim.

We do not act for a client in any benefit claim or appeal without first meeting them, except in circumstances where the potential client's friend or relative is able to produce a properly executed Lasting or Enduring Power of Attorney.

If, in the course of advising and/or acting for a client, it becomes clear that they intend to make or pursue a false claim, we will stop advising and/or acting for them save to advise them of their duty to make an accurate claim and disclose relevant information.

Our MLRO is in charge of our Benefit Fraud Policy and procedures. They review the Policy at least annually to ensure that it remains effective.

2.21. Anti-Tax Evasion Policy

As a company, we acknowledge that we are a relevant body for the purposes of Part 3 of the Criminal Finances Act 2017.

We are fully committed to compliance with the Criminal Finances Act 2017. We remind staff members that it is an offence under the law to be knowingly concerned in, or taking steps with a view to, the fraudulent evasion of tax. We also recognise that firms may be liable for a criminal offence where they fail to prevent the facilitation of tax evasion.

We are committed to ensuring that we protect both our staff and our reputation from accusations of facilitating tax evasion or failing to prevent the facilitation of tax evasion.

All staff members are equally obliged to abide by our Anti-Bribery Policy and Anti-Money Laundering and Countering Terrorist Financing Policy.

Awareness and prevention

We aim to promote a culture of awareness and compliance and ensure that the processes and systems we implement are such that the opportunity for, and incidence of, tax evasion is prevented.

We have implemented procedures governing financial transactions with third parties which are

designed to prevent possible financial fraud including tax evasion. These are more particularly set out in Section 4 and in our Cybercrime and Fraud Prevention Policy as set out in our **Data Security & Information Governance Manual**.

We are fully committed to the highest possible standards of openness, honesty and accountability. With this in mind, the best defence against offences of tax evasion and facilitation of such offences remains the vigilance of all staff members. We therefore actively encourage all of our staff members, who have serious concerns to voice those concerns openly. In particular, staff members should report any breach, or suspected breach, of compliance by another staff member to our COLP in accordance with our Whistleblowing Policy who will treat all such disclosures in the strictest confidence and who will endeavour to provide advice and guidance on any action to be taken.

Should a staff member become aware of, or have reasonable grounds to suspect, that a person within the firm is a) a designated person or b) has committed an offence under sanctions regulations, they must report this in accordance with our Financial Sanctions Policy.

If it is our Anti-Bribery Officer/COLP who is suspected, staff members should report this to Mariyam Ferreira instead.

Training and compliance

To ensure that all members of staff understand their obligations, training is provided on induction and then updated from time to time. If a member of staff is unsure about any aspect of our anti-tax evasion obligations, they should speak to our COLP.

Failure to comply with this Policy by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Review

Our Anti Bribery Officer is in charge of this policy. They review the Policy at least annually to ensure that it remains effective.

2.22. Confidentiality Policy

All members of staff including support staff and consultants owe a duty of confidentiality to our clients. The duty to protect all information about a client's affairs starts the moment the client first approaches us (i.e. before we formally accept their instructions) and continues both during and after the end of a case and even after the death of the client.

We will keep clients' information confidential and will only use it for the purpose(s) for which it was provided or as is permitted in law (i.e. for dealing with complaints or regulatory investigations).

All services are provided in a confidential environment.

Matters relating to a client's case must not be discussed outside of the firm's offices unless the fee earner is at an appropriate venue. Even then care must be taken to ensure that we are not overheard by others who have no involvement in the case. Such venues include:

- Tribunals

- Courts
- Barristers Chambers
- Detention/Removal Centres
- Clients' homes (if appropriate).

For staff members working from their homes, the maintenance of confidentiality will be a factor which will be reviewed as part of our Home Working Arrangements Procedures.

It is the duty of all members of staff to avoid breaches of confidentiality. Examples of breaches that could occur include:

- Mixing up clients' records as a result of not filing information/documents properly
- Discussing cases outside of the office (e.g. on public transport)
- Sending details of the client's case to an incorrect address
- Leaving client A's file or papers open to view, e.g. on a desk or shelf, while meeting client B in the same room or
- Leaving files lying around at the end of the day instead of replacing them in their proper place, e.g. a locked filing cabinet.

We have systems and controls in place to mitigate risks to client confidentiality. These are more particularly set out in the policies and procedures in our **Data Security & Information Governance Manual**.

Disclosure

We have a duty to disclose to clients all information of which the individual fee earner advising them is personally aware that is material to their case.

In exceptional circumstances, it may be appropriate to consider breaching the client's confidentiality. Such circumstances may include:

- the client gives specific informed consent to non-disclosure or a different standard of disclosure arises

- there is evidence that serious physical or mental injury will be caused to a person(s) if the information is disclosed to the client

- where the client is a child and the child reveals information, which indicates continuing sexual or other physical abuse but refuses to allow disclosure of such information

- where an adult discloses abuse either by himself or herself or by another adult against a child but refuses to allow any disclosure

- legal restrictions effectively prohibit us from passing the information to the client for instance where we need to meet the reporting requirements in relation to money laundering set out in the Proceeds of Crime Act 2002, the terrorism legislation and the Money Laundering Regulations 2017

- it is obvious that privileged documents have been mistakenly disclosed to us

- where a court orders that material should be disclosed or a warrant permits a police officer or other authority to seize confidential material or

- we come into possession of information relating to state security or intelligence matters to which the Official Secrets Act 1989 applies.

We do not continue to act for a client to whom we cannot disclose material information unless one of the above exceptions applies.

If a fee earner considers that they should withhold material information from a client, they must discuss the case and obtain authority from the Directors before doing so.

Where our duty of confidentiality to one client comes into conflict with our duty of disclosure to another client, our duty of confidentiality takes precedence.

We do not act for client A in a case where client A has an interest adverse to client B and client B is a client for whom we hold confidential information which is material to client A except in the circumstances allowed by the SRA's Standards and Regulations and authorised by our COLP (please revert to our Conflicts of Interest Policy).

Consents

All information provided to us about a client and their case is treated by us as confidential. This means that we do not disclose information about the client's case unless required or permitted by law or if the client consents. However, we recognise that the Solicitors Regulation Authority, the Legal Aid Agency or a quality assurance auditor may need to see our casefiles for the purpose of audit.

Where we need to seek consent from a client (for instance to use their data for marketing purposes or to make it available to an external auditor, other than in legally aided cases where no consent is required) then we will seek (primarily when we send the client care letter) individual consent for each of the purposes for which we seek to process the data. We do not use deemed consent or opt out consent options. All consents sought will be clearly worded; individual and opt in. Details of any necessary consents will be recorded on the relevant client file and on a **Central Register of Consents**.

External Data Processors

We may have to share some or all of a client's information with other third parties. This may include barristers, experts and other third parties who we need to instruct to assist us with a matter.

An external supplier to whom we transfer client or personnel data to process or hold will likely be a Data Processor (as defined under the relevant data protection legislation). As such it is our policy that we only commission the services of external data processors where we are satisfied that they take all appropriate steps to ensure that our clients' confidential information will be protected and that they are compliant with the terms of the UK GDPR.

Wherever we use external Data Processors we will do so in accordance with our Outsourcing Policy and will ensure that they have appropriate data protection and security measures in place and that we have a clear written agreement with them.

Compliance

The induction process covers our confidentiality policy. Furthermore, all staff members are asked to sign a confidentiality agreement in order to confirm that they understand the importance of confidentiality. A copy of our confidentiality agreement can be found in **Appendix Seven**.

If an alleged breach of confidentiality occurs, Kuljit Lally investigates the incident and may either dismiss the allegation, take steps to avoid a reoccurrence of the breach, e.g. by arranging staff training, invoke our Disciplinary Procedure in the event of a serious breach or seek legal advice about the firm's position.

Kuljit Lally will decide at which stage to invoke our Disciplinary Procedure. This will reflect the seriousness of the offence.

Kuljit Lally is responsible for overseeing our Confidentiality Policy and associated procedures. They review the Policy at least annually to ensure that it remains effective.

2.23. Conflict of Interest Policy

We are committed to acting professionally and with integrity and that includes maintaining an effective and compliant approach to identifying and managing conflicts of interest.

Conflicts of interest can arise between the firm (including individuals working within the firm) and current clients ("own interest conflict") and two or more current clients ("client conflict"). There may also be situations where the interests of a current client may conflict or cause difficulties in relation to our duty of confidentiality to a former client.

Definition of a Conflict

There are two main categories of conflict of interest as set out in Rules 6.1 and 6.2 of the SRA Code of Conduct for Solicitors:

- own interest conflict – where there is a conflict between the personal or commercial interests of our firm or a member of staff and our duty to act in the best interests of our client in their matter or a related matter or significant risk that it may conflict

- client conflict – where we owe separate duties to act in the best interests of two or more current clients in relation to the same matter or particular aspect of it and those duties conflict, or there is a significant risk that those duties may conflict. There would need to some reasonable degree of relationship between two matters for them to be related. Generally, any matters which concern the same asset or liability will be related.

A client conflict of interest means a situation where our separate duties to act in the best interests of two or more clients in the same or a related matter conflict. This would apply if we were currently acting, or intending to act, for two or more clients (e.g. acting at the same time and not if one was a former client).

The position in relation to our acting for a client even if we previously acted against them or where a current client has an adverse interest to a former client is not covered by Rules 6.1 and 6.2 of the SRA Code of Conduct for Solicitors but there are confidentiality and disclosure considerations which apply as for client conflicts.

Other confidentiality issues

Our duties of confidentiality and disclosure in accordance with Rules 6.3 to 6.5 of the SRA Code of Conduct for Solicitors may create a conflict of interest.

In particular, we may encounter a situation in which we have information that is confidential to a current or former client but is material to the new client's matter. Our duty of confidentiality to one client will need to come before our duty of disclosure to the other client and we may not be able to act for both because we will not be able to comply with both duties simultaneously.

Therefore, we factor into our considerations whether we are in possession of information which is confidential to a current or former client but which may be material to a current client's matter.

Where we are acting for a client on a matter, we need to make the client aware of all information material to the matter of which we have knowledge, subject to some exceptions, including where the client is able to provide us with informed consent, given or evidenced in writing, to the information not being disclosed to them.

Where a client in a matter has an interest adverse to the interest of another current or former client, for whom we hold confidential information which is material to that matter, we will not act unless:

- effective measures have been taken which result in there being no real risk of disclosure of the confidential information, or
- the current or former client whose information we hold has given informed consent, given or evidenced in writing, to our acting, including to any measures taken to protect their information.

We are aware of the risks that this may be very difficult to achieve in practice and so will only act in circumstances:

- where we are confident that we can act in full compliance with rules 6.3 to 6.5 of the SRA Code of Conduct for Solicitors
- where we feel it is in the clients' best interests to do so, and
- the benefit for our firm acting for all of the clients outweighs the risks.

Procedures

The firm has procedures in place for the undertaking of checks for conflicts of interest and for assessing and managing the risk of conflicts.

In any cases where a member of staff considers that there may be an actual or significant risk of conflict of interest, they must notify their supervisor and report the matter to our COLP in accordance with our Assessing and Managing Conflicts of Interest Procedure documented in Section 8 of this manual. They cannot accept the instructions or continue to act unless this has been approved by our COLP and recorded in our **Central Register of Conflicts**.

Our COLP will advise as to whether the firm may continue to act and/or whether other steps must be followed and will oversee the recording of relevant details of the conflict in our **Central Register of Conflicts**.

Where it is determined that there isn't a conflict of interest and no suggestion that we hold material

confidential information about another client we may accept the instructions or continue to act. It is our policy that we will consider all aspects and endeavour to always be sure that it is in each client's best interests for us to act.

Acting where there is a Conflict or Significant Risk of Conflict

Own Interest Conflict

We can never act where there is an own interest conflict or a significant risk of an own interest conflict with a new or existing client.

However, whether there is an own interest conflict will depend on the circumstances. Unless the circumstances of the matter show otherwise, fee earners must assume that there is an own interest conflict wherever our firm is instructed to:

- act against an entity in which our firm or a member of staff has an interest (unless this is simply a minority shareholding in a publicly listed company)
- act against any key suppliers or funders
- act in a matter where our organisation, a member of staff or our management committee is the opposing party, whether contentious or non-contentious
- advise on a matter in which our firm or a solicitor is potentially negligent. For example, the wrong advice has been given to the client or the wrong action taken on their behalf
- act against a major client even if there is no direct client conflict.

It may also arise where a client instructs the firm to proceed on a matter based on facts we know to be untrue, in which case our own duty to the Court may conflict with our duty to that client.

When there is an own interest conflict or a significant risk of an own client conflict, we cannot act and there are no exceptions to this. It will therefore not be possible to act by obtaining our client's consent to act or advising the client to obtain independent advice as to whether to allow us to continue to act.

Client conflicts

We must not act for two or more clients in relation to the same matter (or a particular aspect of it) or a related matter (or a particular aspect of it) where the firm's separate duties to act in the best interests of each of those clients would conflict, or there is a significant risk that those duties may conflict.

If there is a conflict, or a significant risk of a conflict, between two or more current clients, our general position is that we cannot accept instructions or do not act for all or both of them, except as allowed for by the SRA’s Standards and Regulations in relation to conflicts of interest but also in relation to confidentiality and disclosure.

We do not act for clients whose interests are in direct conflict, for example a claimant and defendant in litigation.

Our general position is that we cannot act for two or more clients competing for a residential property. There will only be very limited circumstances where there isn’t a conflict and it is appropriate for us to act for both parties on a residential property matter.

Caution must be taken when the firm is considering acting for co-defendants in a criminal matter. Fee

earners must consider the appropriateness of acting for co-defendants on a case-by-case basis, with the possible defences presented by each to evaluated to identify any possible conflict.

The general position is that, where there is a conflict, we cannot accept instructions unless the affected clients fall into one of two exceptions namely where:

- there is a substantially common interest in relation to a matter or a particular aspect of it.

  In this case, there must be a:

  - clear common purpose between the clients in relation to any matter or a particular aspect of it
  - strong consensus between the clients on how that common purpose is to be achieved

- the clients are competing for the same objective

  This means any situation in which two or more clients are competing for an objective which, if attained by one client, will make that objective unattainable to the other client or clients.

  In this case, the objective must be:

  - an asset, contract or business opportunity
  - which two or more clients is seeking to acquire or recover through a liquidation (or some other form of insolvency process) or by means of an auction or tender process or a bid or offer, but not a public takeover.

The exception does not apply to a property purchase as although both clients may have a common interest in completing the sale, they also have different interests, since one is buying and one is selling.

Even if either of the above exceptions applies, the combined effect of the SRA's rules relating to conflict, confidentiality and disclosure is that, in the case of a client conflict, we can only act if:

- all the clients have given informed consent, given or evidenced in writing, to our acting which means that we have explained all the relevant issues and risks to the clients and have a reasonable belief that they fully understand those issues and risks
- where appropriate, we put in place effective safeguards to protect our clients' confidential information, and
- we are satisfied it is reasonable for us to act for all the clients including whether we feel it is in their best interests to do so and the benefit for our firm acting for all of them outweighs the risks.

We would not act for clients where they cannot be represented fairly and with balanced judgment or may be prejudiced by the lack of separate representation.

Other conflicts

We may be instructed to act for a client where we previously acted against them or we identify that a current client has an adverse interest to a former client.

A conflict of interest can also arise relating to a client if we are acting for another client on a related matter.

These are not technically 'client conflicts' but the same confidentiality and disclosure considerations apply. There will be considerations regarding our duties of confidentiality and disclosure in Rules 6.3 to 6.5 of the SRA Code of Conduct for Solicitors to take into account. In particular, there are safeguarding requirements that will need to be met to comply with the requirements in the SRA Code of Conduct.

In all cases, even if we can meet all relevant safeguarding confidentiality requirements, we will consider whether it would be appropriate and in the clients' best interests to act.

Responsibility

It is the responsibility of our COLP to consider all circumstances and decide if the instructions can be accepted and/or if further action is required.

Interests

All staff members are required to notify our COLP if they have any personal knowledge of or any close connection with a client or potential client or other parties involved in a matter that they are working on. They must also notify our COLP of any interest they have in third party organisations in order that they may be recorded in our **Central Register of Business Interests**.

Review

Our COLP is in charge of our Conflict of Interest Policy and procedures. They review the Policy at least annually to ensure that it remains effective.

2.24. Outsourcing Policy

This policy must be followed whenever any of our firm's functions or activities are outsourced to third party service providers.

The use of outsourcing arrangements will only be approved if a valid business case for its use is developed.

We maintain a **Register of Outsourcing & Contractors Activities**, which contains the names of the external service providers and the services they provide on behalf of our firm. The register is held by Kuljit Lally and is available to view upon request.

Data Security

Some third-party service providers (to whom we may wish to outsource our services) may be a Data Processor (as defined under the relevant data protection legislation). This will be the case where we transfer client or personnel data to them to process or hold. Anyone instructing a third-party service provider must ensure that they adhere to our Transfer of Data to Third Parties Policy (as set out in our **Data Security & Information Governance Manual**).

Regulatory guidance suggests that Counsel are not regarded as data processors and so these procedures do not need to be applied to transfers of data to Counsel. They may also be disregarded for transfers to registered medical practitioners who are also regulated by their relevant Regulatory

Authority.

Prior to the transfer of data to any Data Processors, a due diligence exercise must be carried out to determine that the Data Processor:

- is registered with the Information Commissioner's Office (ICO), and

- can provide assurances that they have adequate policies and systems in place to protect data and will keep our data confidential and secure.

We will verify that the Data Processor has committed to keeping our data secure and confidential and that data transferred to them will be stored and processed securely and in accordance with the requirements of the UK GDPR.

Entering into outsourcing arrangements

Prior to entering into any outsourcing arrangements, we will, as a minimum:

- evaluate their data security procedures (in accordance with our Transfer of Data to Third Parties Policy (as set out in our **Data Security & Information Governance Manual**)

- carry out background checks on the potential external service provider. As a minimum, this will include the carrying out of an assessment of their technical abilities and an assessment of the provider's own internal performance standards and monitoring procedures

- request a minimum of two professional references, and

- ensure that a detailed risk assessment is carried out and ensure that adequate protections or safeguards are put in place to minimise the identified risks.

We only outsource our services to external service providers where we are satisfied that they:

- have clear confidentiality and data security policies and procedures in place and are aware of our policies on confidentiality, data protection and publicity

- take all appropriate steps to ensure that our clients' confidential information will be protected

- undertake to comply with legal and professional obligations and in particular the SRA's Standards and Regulations, and

- take all appropriate steps to ensure that their actions do not cause our firm to be in breach of those obligations.

Wherever possible, for each outsourcing arrangement put in place, we will agree a written and legally binding contractual agreement with the service provider. However, we acknowledge that it will not always be possible to dictate terms or conditions to third parties.

Where we are able to dictate the terms of an agreement with the service provider, we will include terms which cover, as a minimum:

- a commencement and end date and allow for a periodic review of the arrangements

- a formal evaluation process including procedures to allow our firm to effectively monitor the performance of the service provider, and in particular the quality of the work

- our ability to comply with, or the SRA's ability to monitor our compliance with, obligations in the SRA's Standards and Regulations including those in relation to maintaining confidentiality and publicity (including enabling the *SRA* or its agents to obtain information from, inspect the records (including electronic records) of, or enter the premises of, the service provider, in relation to the outsourced activities or functions)

- a process for monitoring compliance with our own client care, confidentiality and publicity policies and procedures

- an ability by our firm to access and/or recall data and documentation from the service provider

- the requirement of the service provider to ensure the operational security of any data or information and that they comply fully with information security procedures including the maintenance of data confidentiality and data integrity. In particular, the service provider will be required to ensure compliance with our policies on data security and information risk management and that no breach of those policies results from their actions

- an agreement on the part of the service provider to hold all client information confidentially and will adhere to the requirements of the UK GDPR and, in particular, that they will:

    - ensure that the data transferred to them is kept confidential and is stored and processed securely and in any event in accordance with the requirements of the GDPR
    - use it for no purpose other than the purpose for which we have provided it to them
    - return the data to us (and delete copy data) at our request and, in any event, not keep the data for any longer than six years
    - indemnify us against any loss or damage caused by any breach by them of their obligations under the GDPR and this agreement in respect of their data security and data processing obligations.

- controls on any subcontracting or outsourcing by the service provider, and

- default and termination of the outsourcing arrangement and the extent of liability for each party.

Where the service provider will not accept a written agreement or provides services subject to a standard form of contract, this must be reviewed and agreed by our Directors. They must be confident and assured that the terms of the contract offer adequate protections or safeguards to minimise any identified risks.

Processing Data

Where the contractor will be holding or otherwise processing personal data on our behalf, any contract with them must also comply with our Transfer of Data to Third Parties Policy (as set out in our **Data Security & Information Governance Manual**). In particular, the contract must commit the service provider to keeping our data secure and confidential and that data transferred to them will be stored and processed securely and in accordance with the requirements of the GDPR.

Responsibility and Review

Kuljit Lally is responsible for the operation of our Outsourcing Policy within our firm. They will ensure that all outsourcing arrangements are kept under continual review and that a formal evaluation of each outsourcing arrangement, including in relation to compliance with the above controls (including the quality of work), is undertaken and recorded centrally at least annually.

They will review this Policy annually and will regularly review our **Register of Outsourcing & Contractors Activities** to verify that our policy and procedures are in effective operation across our firm.

2.25. Contractors Policy

This Policy must be followed whenever any member of our firm instructs third party contractors to conduct work for our firm. This includes but is not limited to contractors instructed to provide cleaning, catering and maintenance services. This is to be differentiated from client services work that we outsource to another third party. Where client work is to be conducted by a third party on behalf of our firm, this is dealt with under our Outsourcing Policy.

We maintain a **Register of Outsourcing & Contractors Activities**, which contains the names of the external service providers and the services they are provide to our firm. The register is held by Kuljit Lally and is available to view upon request.

We only instruct contractors where we are satisfied that we have:

- carried out a risk assessment to identify any risks (including data security risks) and ensure appropriate steps to mitigate any identified risks are put in place. Areas commonly considered will include confidentiality issues, the proximity of contractors to client files, risk of data breaches and any health & safety concerns, and

- taken all appropriate steps to ensure that their actions do not cause our firm to be in breach of any regulatory or statutory obligations.

Wherever possible, where the contractor may come into contact or may have sight of any client files, employee data or other confidential information then we will ensure that the contractor signs a confidentiality agreement. A copy of our Contractor Confidentiality Agreement is at **Appendix Seven.**

Kuljit Lally is responsible for the operation of our Contractors Policy within our firm. In order to verify that our policy and procedures are in effective operation across our firm, Kuljit Lally will regularly review our **Register of Outsourcing & Contractors Activities** as part of our compliance programme and will review this Policy as part of the annual review of this Quality Manual.

2.26. Environmental Policy

We are committed to behaving responsibly and to minimising our impact on the environment.

In considering the environment, we have resolved:

- to encourage environmental responsibility amongst our contractors, suppliers, and staff and include environmental considerations in our purchasing and procurement processes

- to minimise our consumption of natural resources and manage waste through responsible disposal and reuse and recycling, including of paper and ink cartridges

- where appropriate, staff are encouraged not to print documents or to print documents double sided

- to minimise our use of electricity by ensuring all electrical equipment is turned off when not in use.

We are committed to ensuring that our policy remains effective. Staff are encouraged to make further suggestions in relation to initiatives we could undertake. If a member of staff has a suggestion, they should contact Mariyam Ferreira who is responsible for this Policy. Mariyam Ferreira reviews this Policy as part of the annual review of this Quality Manual.

2.27. Safeguarding Policy

We are fully committed to safeguarding and promoting the welfare of children, young people and vulnerable adults who access our services or who we may otherwise come into contact with while providing our services.

We aim to ensure that our practices consider the risks associated with safeguarding the needs of any children, young people and vulnerable adults that may be impacted by our contact with them or to other related individuals. We acknowledge our responsibility to promote the welfare of children, young people and vulnerable adults, to keep them safe and to act in a way that protects them.

We take all reasonable steps to ensure that our policy and procedures have been drawn up on the basis of legislation and guidance which set out the framework for safeguarding children, young people and vulnerable adults, including:

- The Children Act 1989
- The Sexual Offences Act 2003
- The Children Act 2004
- The Children and Young Persons Act 2008
- The Care Act 2014
- The Children and Family Act 2014
- Serious Crime Act 2015
- Modern Slavery Act 2015
- The Data Protection Act 2018
- The UK GDPR
- Government guidance on safeguarding children
- Resolution Guidance on safeguarding children and young people
- Family Mediation Council's Code of Practice
- NSPCC guidance on safeguarding and child protection

  and any other relevant legislation in force from time to time or any new or updated guidance relating to the safeguarding of children, young people and vulnerable adults.

Child protection is a central part of but not separate to safeguarding. We recognise it is the process of protecting individual children identified as either suffering or at risk of significant harm as a result of abuse or programme of work. It also includes measures and structures designed to prevent and respond to abuse.

We recognise that safeguarding and promoting the welfare of children and young people specifically includes:

- protecting children and young people from maltreatment
- preventing impairment of children's and young people's health or development
- ensuring that children and young people grow up in circumstances consistent with the provision of safe and effective care, and
- taking action to enable all children and young people to have the best outcomes.

Risk Evaluation

As part of our approach to risk, we have identified the range of potential risks to children, young people and vulnerable adults from our firm's services especially in the areas of Family and Immigration and have conducted a focused evaluation process to mitigate those risks by taking all reasonable steps to promote safe practice and ensure the welfare and protection of children, young people and vulnerable adults from harm, abuse, neglect or exploitation.

The results of this risk evaluation process have led to the formation and development of this Safeguarding Policy and the implementation of the following procedures.

Implementation and Review

We have appointed Mariyam Ferreira to be our Named Person for Safeguarding and assume responsibility for dealing with any child protection and safeguarding concerns and for implementing and monitoring this Safeguarding Policy. In particular, they are responsible for:

- conducting necessary risk assessments to ensure that our Safeguarding Policy and our safeguarding procedures are sufficient

- promoting a culture of awareness and compliance by means of education and training and overseeing arrangements for the sharing of information on safeguarding and child protection. This may include, providing updates to staff members and informing staff members of any new guidance

- ensuring all staff members understand their responsibility to protect children, young people and vulnerable adults from harm, abuse, neglect or exploitation

- ensuring all staff members follow our safeguarding procedures

- ensuring all staff members report any concerns about a child, young person and vulnerable adult in accordance with this Policy

- ensuring that children, young people and vulnerable adults are enabled to express their concerns or views and are made aware of our Complaints Handling Procedure

- ensuring that any concerns, incidents or reports about a child, young person and vulnerable adult are dealt with appropriately. In particular, that concerns, incidents or reports are:
    - recorded
    - acted upon
    - referred on where necessary, and
    - followed up to ensure issues are addressed

- liaising and working with the Police and/or Local Authority Children's Services over suspected cases

- in accordance with our Compliance Policy, ensuring that appropriate action is taken in relation to any non-compliance identified under this Safeguarding Policy, and

- reviewing this Policy annually to verify it is in effective operation.

Safeguarding Procedures

All front line staff members will be required to:

- undertake an induction and, where relevant, advanced or refresher training to ensure they have an awareness of the signs and indicators of harm, abuse, neglect or exploitation

- place the safety and welfare of children, young people and vulnerable adults above all other considerations

- remain vigilant to incidents where:
    - a child, young person's or vulnerable adult's appearance or behaviour cause suspicion of harm, abuse, neglect or exploitation
    - a child, young person or vulnerable adult says that they do not feel safe
    - a child, young person or vulnerable adult alleges that harm, abuse, neglect or exploitation is taking place or has taken place in the past
    - a third party alleges that that there has been an incident of alleged harm, abuse, neglect or exploitation against a child, young person or vulnerable adult

- act calmly and professionally when responding to a child, young person, vulnerable client or third party when harm, abuse, neglect or exploitation is alleged or signs and indicators are seen or heard

- make an informed, professional judgment when taking action in cases of suspicions of harm, abuse, neglect or exploitation

- report any concerns they may have about the welfare of a child, young person or vulnerable person (see below).

Staff members are never to investigate or take sole responsibility for a situation where there is an allegation or suspicion of harm, abuse, neglect or exploitation against a child, young person or vulnerable adult. However, initially, staff members may need to talk to the person about what they have said or what they have observed.

It is important that staff members appreciate that they do not necessarily need to feel inhibited about asking for more information for fear of being intrusive. In particular, staff members are encouraged to:

- listen carefully to what is said
- reassure the person that they have done the right thing
- allow the person to talk at their own pace and without asking leading questions
- try to avoid compromising potential evidence
- as soon as possible afterwards, make a full and accurate written record of what was said, heard or witnessed
- respect confidentiality and keep written records secure.

Vulnerable Adults

In accordance with our Vulnerable Clients Policy, all staff members need to be alert to signs of vulnerability and that a vulnerable client may need us to provide additional support or to make reasonable adjustments.

Child Protection

In addition to the above, all staff members working directly with children or young people under the age of 18:

- will be required to maintain a valid Disclosure and Barring Service (DBS) certificate (enhanced where required)

- in a one-to-one situation with a child or young person, where privacy and confidentiality are important, endeavour to try to make sure that another adult knows the contact is taking place and the reasons why. If possible, to ensure another adult is in sight and that the child or young person knows another adult is around.

Training and enforcement

In accordance with our overall approach to Performance Management, Learning & Development (as more particularly set out in Section 5), all staff (including agents where relevant) are provided with training on this policy and safeguarding procedures.

In particular:

- training is provided to all staff members during their induction
- periodic or update training is provided for all relevant front line staff members within the firm.

All training is planned, evaluated and recorded in firm wide and/or individual training plans and records as appropriate in accordance with our training procedures in Section 5.

Failure to comply with this policy by any member of staff will invoke our Disciplinary Procedure and may result in disciplinary proceedings and/or and reporting to the police, relevant regulatory authority or other body, as applicable.

Raising Safeguarding Concerns

If any staff member is concerned about a child, young person and vulnerable adult, they must inform Mariyam Ferreira, our Named Person for Safeguarding.

Where a staff member believes that a child, young person and vulnerable adult is at immediate risk of harm, abuse, neglect or exploitation, they must take immediate steps to protect that person. This includes:

- notifying our Named Person for Safeguarding in accordance with this Policy immediately. If our Named Person for Safeguarding is not in the office or otherwise not contactable within two hours, then the staff member must refer the matter to the most senior manager or other member of staff in the office
- wherever possible, ensure that the child, young person or vulnerable adult is kept safe and away from the person against whom the allegation is made.

Upon receiving a report, our Named Person for Safeguarding will discuss further with the relevant staff member the concerns and conduct a risk assessment to determine if there are safeguarding concerns to action and/or whether measures should be taken to safeguard the needs of the child, young person and vulnerable adult.

Depending on the outcome of the risk evaluation and/or assessment of the safeguarding concerns, our Named Person for Child Protection may need to:

- seek advice and clarification about a situation from the NSPCC 24hour National Child Protection Helpline on 0808 800 5000
- make a telephone referral to the Police and/or the Local Authority Children's Services and follow this up, where required, with a written referral. The timing of such referrals must reflect the level of perceived harm but must not usually be longer than one working day after the identification of harm or risk of harm
- follow up with the Police or Local Authority Children's services to ensure issues are addressed
- where practicable, discuss concerns with the parent or carer and seek agreement for the referral to the Police or Local Authority. Where a decision is made not to seek permission before making the referral, the full reasons for this must be recorded.

In all cases, our Named Person for Safeguarding will make a detailed, written record of the risk evaluation and assessment process, decisions made and/or any action taken.

2.28. Modern Slavery Policy

Modern slavery is the severe exploitation of other people for personal or commercial gain and can take various forms including forced and compulsory labour and human trafficking. It is a crime and a violation of fundamental human rights.

Our firm has a zero-tolerance approach to modern slavery and we ensure we take steps to identify whether there is any action we need to take to comply with the Modern Slavery Act 2015 or other relevant legislation or guidance.

Risk Review

As part of our approach to risk management, in accordance with our Risk Management Policy, our Risk Manager evaluates the extent to which we are required to take any steps under modern slavery

legislation.

The results of this review are documented, at least annually, as part of our Risk Register and are used to evaluate the effectiveness of this Policy and whether changes are needed to any procedures in this Quality Manual.

Having regard to the size and nature of our practice, we have determined that we do not need to take any particular steps to ensure that slavery and human trafficking is not taking place in our own business or within our supply chain. We do not fall within the remit of Section 54 of the Modern Slavery Act 2015 which requires other larger commercial organisations that supply goods or services to prepare a Slavery and Human Trafficking Statement for each financial year.

In particular, we have reached this decision in light of the following:

- we do not have a total annual turnover equal to or exceeding the amount set by the secretary of state, currently £36 million
- the complexity of the firm and the types of supply chains in which we are involved do not raise particular levels of risk or exposure.

Commitments

We are, however, committed to:

- acting ethically and with integrity in all our business relationships and our internal procedures
- being alert to risks, however small
- promoting a culture of awareness and compliance by means of education and training and overseeing arrangements for the sharing of information on modern slavery. This may include, providing updates to staff members and informing staff members of relevant guidance
- ensuring all staff members understand their responsibility to be alert and to raise suspicions of incidents of harm, abuse, neglect or exploitation or any similar concerns.

In addition to the above, as part of our Use of External Suppliers procedure, we remain alert to any suspicions of incidents of harm, abuse, neglect or exploitation or any similar concerns about direct activities of any suppliers or contractors or other third parties within the extended supply chain. We may terminate a supply arrangement at any time should any instances of modern slavery come to light.

We are fully committed to the highest possible standards of openness, honesty and accountability and actively encourage all of our staff members who have any concerns related to our activities or our supply chains to report them in accordance with our Whistleblowing Policy. We will treat all such disclosures in the strictest confidence and will endeavour to provide advice and guidance on any action to be taken.

Review

Kuljit Lally reviews this Policy at least annually to verify it is in effective operation.

2.29. Stamp Duty Land Tax / Land Transaction Tax Policy

In accordance with our overall approach to risk management (as more particularly set out in our Risk

Management Policy), it is important to us that we maintain safeguards in relation to the calculation for assessment and ultimately the correct payment to HMRC of Stamp Duty Land Tax (SDLT) or, where applicable, for transactions in Wales, to the Welsh Revenue Authority of Land Transaction Tax (LTT), on behalf of our clients (references to SDLT in this policy may be taken to include or be substituted to LTT).

Client Information

Fee earners must provide clients with clear and timely advice and information on all relevant aspects of SDLT relevant to the transaction including:

- when SDLT is due to be paid to HMRC (or LTT to the Welsh Revenue)
- relevant timescales (such as that SDLT will be due within 14 days after the effective date of the transaction; LTT payable within 30 days after the effective date of the transaction)
- the meaning for SDLT purposes of any relevant terminology or definitions including 'first time buyer' and 'major interest in a dwelling'.

Client Checks and Approval

To ensure that we obtain clear written approval from the client, we follow the Law Society's Conveyancing Protocol in relation to each conveyancing transaction.

In particular, fee earners must:

- provide a clear written SDLT calculation to the client at the outset of the transaction
- obtain an appropriate written and signed declaration from the client that will enable the firm to accurately calculate the SDLT payable and enable the calculation to be checked later during the transaction
- remind the client to inform them of any change in circumstance which may affect that calculation
- prepare a draft online SDLT return prior to the exchange of contracts
- ensure the amount of SDLT is verified before the exchange of contracts in accordance with this Policy (see below)
- After exchange, the SDLT return must be sent to the client for them to check and, if satisfied, sign it and return to the firm. This paper trail is to be maintained regardless of whether the submission is ultimately made electronically.

Amount of Tax

- We use a software solution operated by Dye and Durham for handling our SDLT calculations and submissions and this incorporates a built in validation and error checking service.

We operate the following procedure in order to verify the amount of SDLT payable in any transaction:

- We use the online calculation tool on the HMRC website and **Dye and Durham** software and who is Kuljit Lally is responsible for undertaking the assessment and for checking and signing off the assessment**.**

Calculations of SDLT depends not only on the price, value or consideration for the land but also on which current tax rates apply, and the type of property. These considerations are recorded on a file note by the fee earner with conduct of the matter.

The fee earner (or supervisor/SRO) will use the following to conduct the assessment of SDLT:

- Longhand using rates tables
- Dye and Durham
- the online calculation tools on the HMRC website

Wherever possible, the assessment is verified by another experienced fee earner or supervisor. The verification is noted on the casefile.

If it is not possible for another member of staff to conduct the verification, the assessment will be verified by the same fee earner conducting a further check of the SDLT payment at a later date prior to submission.

The SRO may agree that the assessment does not need to be verified by another member of staff. If there is a valid reason why this verification process does not need to take place or cannot take place, this must be recorded on the casefile.

In complex or high risk transactions, the initial assessment may be conducted by a supervisor. Whether this is required will ordinarily have been determined during the opening risk assessment process (see Section 6). These assessments are independently verified by the SRO. Similarly, the verification is noted on the casefile.

The client is required to check the return and figures before they sign the SDLT form. Only when the signed form has been returned can the firm submit the SDLT form to HMRC.

Checks on Ledger

In accordance with our procedure for conducting Financial Checks on Closure of Files, we incorporate checks to ensure that the considerations as stated in the sale contract and transfer deed and SDLT return correspond with the payments on our client account ledger for that transaction.

Within 7 days of the transaction being completed/As soon as practically possible after the transaction has completed, the fee earner with conduct of the matter ensures the file is passed to our Accounts Manager to reconcile the accounts in accordance with our file closing procedures, and they are responsible for verifying that the consideration for a property sale as set out in the sales contract and transfer deed (and SDLT return) correspond with the payments on the client account ledger.

The amount of SDLT should be documented in a cash statement and supported by evidence of payments into and out of the client account. This statement must be made available to the SRO or other supervisor for verification purposes.

Payment of SDLT

Included in our completion checklists are checks to ensure that SDLT payments are made to HMRC within 14 days from the effective date of the transaction. This date is also treated as a Key Date and recorded in accordance with our Key Dates Procedure.

Amendment of SDLT Form

If a fee earner becomes aware of a factual inaccuracy in a SDLT return (such as it being incorrect, incomplete or that tax has been overpaid or underpaid), they must alert our SRO or COLP immediately.

They will consider the inaccuracy and determine the steps that need to be made.

Audit trail of the SDLT calculation and advice

We recognise the need to keep an audit trail of key information for many reasons, not least because:

- we have a duty to keep and preserve records to enable a complete and correct land transaction return or claim to be made and delivered
- HMRC may check the accuracy and truth of calculations after they have been submitted. They may commence this check up to nine months after the submission date
- we must ensure that we correctly calculate stamp duty fees and limit the chance of a requisitions being received
- we are not unwittingly involved in financial fraud or tax avoidance
- to allow our Head of Department/SRO to track and oversee all of our SDLT and AP1 submissions.

It is therefore vitally important for us to ensure that information is easily accessible and maintained.

The following documents should be retained in a separate section of the casefile:

- All materials relating to valuation and/or purchase price
- All documents relating to apportionment for chattels
- Accounts records for funds received and disbursed
- Documents demonstrating allowable costs
- Calculations for assessment of SDLT.

In addition, a file note must be maintained in the SDLT section of the casefile to keep a detailed audit log of the SDLT assessment and submission process, including:

- the SDLT information given by the client
- the calculation of the SDLT due
- advice provided by the firm to the client on SDLT
- confirmation of the payment of SDLT to HMRC (including dates and amounts)

In accordance with our **Archiving, Retention & Destruction Procedure** (as set out in our **Data Security & Information Governance Manual**), all records are maintained in each individual casefile by in order that we have an audit trail of our decision-making process and can justify actions taken.

Review

Mariyam Ferreira reviews this Policy at least annually to verify it is in effective operation.

2.30. Purchase of a Leasehold Property Policy

In accordance with our Commitment to Quality and Client Care Policy, whenever we act for a client in a transaction that involves the purchase of a leasehold title, it is our firm's policy that our client is provided with all relevant information concerning the risks and costs associated with that purchase in a timely manner to enable them to make an informed decision about proceeding with the purchase. Our aim must be to ensure that clients are fully informed about any risks or limitations, all current and

future liabilities and, where applicable, to ensure they are able to comply with the lender's requirements.

Where the firm is also acting for a lender in a leasehold transaction, in the most part (and subject of course to the nature of the transaction) we recognise that they are an equal client and the duties which our firm owes to the lender are no less important than they are for the client. All communications with the lender must be made in accordance with the UK Finance Mortgage Lenders' Handbook.

The sale or purchase of a leasehold property usually involves considerably more work than with a freehold property and there are likely to be additional charges to be paid to third parties, including managing agents and freeholders.

Information Gathering – Sale

At the outset of the conveyance, the fee earner must make suitable enquiries from clients, the other side's advisor and relevant third parties such as the management company, managing agents and freeholders, including, as applicable, to:

- the costs of the provisions of the Leasehold Information Pack and any supporting documentation
- any other requirements which the managing agents or freeholders may have.

Client Advisory Procedure – Sale

Upon receipt of the Leasehold Information Pack, the fee earner must ensure that full, clear and accessible written advice is provided to the client on the lease and supporting documentation, and on the practical and financial implications for the client. In particular, the fee earner must undertake the following:

- provide a copy of the Leasehold Information Pack to the client for review
- send the Leasehold Information Pack to the purchaser's advisor
- where relevant, forward any enquiries received from the purchaser's advisor to the managing agents or freeholders, sending replies to the purchaser's advisor when received
- ensure the client is made aware of whether a retention needs to be agreed with the purchaser and a special condition agreed in the contract to cover any future or pending charges such as when completion may take place during a financial year that has not yet completed and charges for that year are not known
- prior to completion, obtain up to date ground rent and service charges to be able to calculate apportionments and any retention and prepare the completion statement
- following completion, where a retention has been agreed, obtaining service charge accounts for the financial year and agree the apportionment of payments and agree amounts for the release of the retention.

Client Advisory Procedure – Purchase

Upon receipt from the seller's advisor of the Leasehold Information Pack and other relevant replies to the buyer's enquiries from the landlord, the fee earner must ensure that full, clear and accessible written advice is provided to the client on the lease and supporting documentation, and on the practical and financial implications for the client. In particular, the fee earner must undertake the following:

- review all information provided by the Seller to determine if additional enquiries must be made

- where applicable, check Part 2 of the UK Finance Mortgage Lenders' Handbook to determine the Lender's particular requirements regarding the leasehold conveyance, in particular with regard to:

    - length of the term of the lease
    - leasehold title to be conveyed
    - occupation and sub-letting
    - covenants including the mutual enforceability of covenants
    - insurance
    - receipts for rent and service charge provisions
    - reviews provisions
    - rights and interest in relation to any management company
    - restrictions and enforcement

- send a copy of the Leasehold Information Pack to the client and confirm the procedures, timescales and all charges and fees including those to the be charged by the managing agent or freeholder for them to provide a certificate of compliance to HM Land Registry to enable to the title register to be updated

- send detailed written advice to the client including, detailed advice on their rights and liabilities (including, where applicable, the requirements of their lender). This advice must be provided to the client as early as possible in the transaction so that the risk of the client overlooking the information is minimised. The written advice should be sent in a manner and with the tone and content appropriate to the particular client. The advice must include:

    - an explanation of the difference between freehold and leasehold property and any other relevant information in order that they can understand the practical implications and significance of being a leaseholder as opposed to owning the property outright
    - the length of term remaining on the current lease and whether this may need to be extended
    - the amount of ground rent payable and over what period
    - the amount of service charge payable and over what period including whether any sinking or reserve fund is expected within the next three years
    - contributions towards building insurance
    - the rent review provisions in the lease and method of calculation
    - the client's responsibilities under the lease
    - the landlord's responsibilities under the lease
    - rights included and excluded
    - restrictions
    - covenants
    - the role and involvement of the management company
    - any other key information which may be appropriate to the particular matter including any key terms that may affect the value of the property such as any arrangements for transfer of ownership
    - any other matters which are specified in the current lender requirements regarding leasehold transactions

- where the length of the unexpired term may be significant, fee earners should, where appropriate, provide advice about the right to enfranchise, the marriage value and the costs associated with the procedure. If relevant, advice may be provided to explain the right to acquire the freehold and the right to manage

- should any provision be onerous, discuss with the client in detail and, where relevant, report any onerous provisions to the lender, asking them to refer the matter to their surveyor and seeking their consent to enable the purchase to proceed

- where the client has intention to carry out works or sublet the property, to ask the seller's advisor for conformation of the procedure to enable the client to seek the appropriate consent from the landlord or managing agents

- ensure the client is made aware of whether a retention needs to be agreed with the seller and a special condition agreed in the contract to cover any future or pending charges such as when completion may take place during a financial year that has not yet completed and charges for that year are not known

- prior to completion, upon receipt of the completion statement from the seller, send a copy to the client and, where appropriate, report to the client on any apportionment and retention

- on completion, where necessary, ensure that the client has complied with all of the landlord's and managing agent's requirements in relation to the signing of any deed of covenant or other documentation and sending the notice of assignment, all supporting documentation and the appropriate fee to the managing agents or freeholders

- upon confirmation that HM Land Registry has completed the registration, send copies of the title information documents to the client

- following completion, ensure that the client has received invoices for ground rent and/or service charge correctly addressed to the client

- following completion, where a retention has been agreed, seek a copy of the service charge accounts for the financial year in which completion took place and liaise with the seller's advisor to finalise the apportionment of any payments due and release the retention.

Review

We encourage all staff members to discuss any issues or raise any concerns with Mariyam Ferreira.

Our COLP reviews our policy as part of our overall approach to client care at least annually to ensure that we are delivering an optimum service to our clients and to verify that our policy and procedures are in effective operation.

2.31. Acting for Lenders Policy

Where the firm is also acting for a lender in a transaction, in the most part (and subject of course to the nature of the transaction) we recognise that they are an equal client and the duties which our firm owes to the lender are no less important than they are for the client.

We recognise that we have a duty to report to the lender all relevant facts about the purchase and the mortgage.

In accordance with our Conflict of Interest Policy, fee earners must be mindful of the need to keep under consideration the risk of a conflict of interest arising between our duties to the lender and those to our client. Further considerations are set out at in our Conveyancing Risk and Conflict Guidance document at **Appendix Eight**.

Lay Client

As part of our approach to client care and, in particular information provided to clients at the outset of the matter (see Section 5), the fee earner must ensure that our (lay) client is also made aware of the implications to them of also acting for the lender and, in particular, that our firm will need to:

- notify the lender of information which may affect their decision to lend
- seek the client's consent to do so and, where the consent is not given, the lender client will need to be advised that a conflict of interest has arisen which prevents our firm from acting for them.

Lender's Requirements

At the outset of each transaction, a fee earner must:

- note on the casefile and strictly observe the precise instructions of the lender
- advise the lender client of the implications associated with acting for them as well as the lay client
- immediately clarify with the lender any queries which arise in relation to their instructions, at the outset or during the course of the transaction, as applicable
- check Part 2 of the UK Finance Mortgage Lenders' Handbook to ascertain:
    - the lender's standard requirements
    - the lender's particular requirements specific to the transaction including buildings insurance details or identification documents
- ensure all communications with the lender are made in accordance with the UK Finance Mortgage Lenders' Handbook
- identify whether the lender requires reports to be submitted by a specified reporting form or which is otherwise recommended in the UK Finance Mortgage Lenders' Handbook
- verify that all the lender's requirements have been satisfied, prior to exchange and record on the file that this verification check has been completed.

Reporting Matters to Lenders Procedure

To avoid a delay in completion, fee earners must immediately clarify with the lender any queries they may raise during the course of the transaction and not defer them until a later stage.

Whenever a fee earner must make a report to or otherwise notify the lender of a matter during the course of the transaction, the fee earner must:

- where available, use the specified reporting form provided by the lender or otherwise specified in in the UK Finance Mortgage Lenders' Handbook
- clearly identify the nature and potential implications of the matter being reported

- state whether the matter needs to be referred for valuation. Where the matter may affect the value of the property or its physical condition, the report should ensure that it is clear that the matter needs to be referred to the lender's valuer or surveyor
- provide detailed and appropriate written legal advice
- indicate what action can be taken to minimise or eliminate any risk and within what timescale and at what cost.

When the fee earner has conducted the investigation of title and is ready to make a report/certificate on title to the lender certifying the investigation in accordance with the lender's instructions, the fee earner must:

- where available, use the specified reporting form and/or certificate of title provided by the lender or otherwise specified in in the UK Finance Mortgage Lenders' Handbook

- ensure that, when the report is submitted:

    - there are no remaining queries on title
    - wherever possible, all searches have been conducted and the results obtained
    - all plans have been carefully checked
    - all necessary consents have been confirmed
    - all information about the property from all relevant sources, including from the landowner, managing agents, solicitors and planning, development or tax advisers has been assembled
    - any questions necessary for the confirmations in the report/certificate have been raised with the client
    - the title to the property has been reviewed and any material issues noted

- when preparing the report

    - identify the nature of any material issues or matters being reported
    - include all information so as to meet any lender specific requirements such as buildings insurance details or identification documents
    - confirm if the report is qualified in any way such as being subject to the results of a survey
    - provide appropriate legal advice and indicate what action can be taken to minimise or eliminate any risk
    - if there is any matter which may affect the value of the property or its physical condition, the report should include advice as to whether a further inspection of the property is required and make it clear that the matter needs to be referred to the lender's valuer or surveyor
    - ensure that the certificate is signed by a solicitor/a supervisor/our SRO

Review

Our SRO reviews this Policy (and associated reporting procedure) as part of our overall approach to client care at least annually to ensure that we are delivering an optimum service to our clients and to verify that our policy and procedures are in effective operation.

2.32. HM Land Registry Policy

In accordance with our Commitment to Quality and Client Care Policy, it is our firm's policy that we deliver a high level of service and provide services to clients in a manner that protects their interests.

As part of that, we seek to ensure that we engage with the HM Land Registry (HMLR) in a professional and constructive manner to ensure that there are no unavailable issues, delays or errors and that our clients' interests are fully protected and in a timely manner.

In accordance with our Cybercrime and Fraud Prevention Policy in our **Data Security & Information Governance Manual** and our Property and Mortgage Fraud Policy, we are also aware of the role that the HMLR have in the protection against property and mortgage fraud. We endeavour to maintain and develop established systems and controls to prevent the firm and our clients from being a victim of fraud or cybercrime and this includes providing clients with all relevant information concerning the risks associated with that purchase in a timely manner.

We therefore operate the following procedures to help us meet these objectives.

HMLR Requisitions Procedure

It is the nature of property law that some unavoidable requisitions may be raised by HMLR for instance, delays in removing an existing charge or where consent is required by a third party. However, we are aware that many requisitions issued by HMLR are rejections due to errors on the grounds that the application is defective and could have been avoided.

Many of these errors can be remedied, but there are cost implications for the firm and/or client in respect of the additional time to correct the issues as well as additional HMLR charges.

However, some errors could suggest there is an underlying risk that they could point to a more serious issue, such as:

- identity fraud by the purported seller
- monies owing to a third-party
- where the land described is part of another title, or
- a prior contract for sale.

In these situations, registration may not be achieved and this raises potential financial losses for the purchaser or lender.

To avoid the risk of receiving avoidable requisitions from HMLR, fee earners must follow the following procedure:

- in more straight forward applications, checking the completed draft application for simple errors or omissions, wherever possible, cross-checking the application against the HMLR available checklists (available from https://www.gov.uk/guidance/hm-land-registry-requisitions)
- in particular, checking:
    - spelling and drafting errors in the documentation
    - ensuring names on the register match the names on the transfer of land
    - ensuring the transfer deed or lease has been properly signed or executed
    - there isn't a restriction on title that has not been complied with (for example, a prior charge, overage payment or obligation to enter into a deed of covenant).

In complex or high risk matters and/or where the application is not straightforward, the fee earner should alert their supervisor and/or our SRO who will be responsible for reviewing the application, providing additional guidance and support.

In some cases, the supervisor or SRO may determine they need to independently verify the application. This verification should be noted on the casefile.

Whether a matter is complex or high risk will ordinarily have been determined during the opening risk assessment process (see Section 6).

HMLR Registration Procedure

Unfortunately, there remains an ongoing threat of property and other fraud associated with land transactions and we are mindful of the need for us to ensure we have adequate measures in place to reduce the risk of property fraud. As part of that approach, it is our aim to keep our clients informed of any steps that they may take to protect themselves and their property.

As part of client care documentation sent to the client at the outset of the matter and also, where necessary, in correspondence sent at the conclusion of the transaction (such as in the letter enclosing the Title Information Document (TID) or matter closing letter), fee earners must:

- advise clients acquiring an interest in a property that our firm is able to register up to three addresses (including email addresses and an address abroad, if required) for them with HMLR when registering their ownership in the property. This is particularly important for those clients acquiring an interest in a property in which they will not live. Clients must be advised that HMLR may need to write to them when it receives an application regarding the property and if they do not have an up-to-date contact address, they may not receive this important information and may miss a vital notification
- advise those clients of the advantage of having more than one address registered so that notifications are not missed
- advise the clients to provide contact address(es) that conform with official sources such as Royal Mail. This is to ensure swift and correct delivery of correspondence
- advise the clients to keep us updated of any change in their contact details
- draw clients' attention to HMLR Property Alert Service which can be accessed at https://propertyalert.landregistry.gov.uk/. This is a free property monitoring service operated by the Government, whereby a registered user will receive email alerts when certain activity occurs on their monitored properties, such as warning them if someone attempts to alter key details of their property online and allowing them to take action if necessary, and
- advise clients that they may access resources and other information from HMLR directly. For instance, HMLR routinely publish fraud guidance and has accessible information which is relevant to property owners https://www.gov.uk/government/organisations/land-registry.

Review

Our SRO reviews this Policy (and associated requisition and registration procedures) as part of our overall approach to client care and risk management at least annually to ensure that we are delivering an optimum service to our clients and to verify that our policies and procedures in relation fraud prevention are in effective operation.

SECTION 3. OUR FACILITIES

3.1. Health & Safety

We aim to ensure the health and safety of all our staff on our premises as well as clients, suppliers and other visitors. The principles of health and safety are linked with our Health & Safety Policy (See Section 2).

The key personnel involved in developing and executing our health & safety procedures are as follows:

Name	Role
Kuljit Lally	Director/COLP/COFA
Mariyam Ferreira	Director
Genevieve White	Solicitor

Other key roles include:

Name	Role
Genevieve White	Appointed First Aider
Genevieve White	Fire Safety Representative

Health and Safety Risk Assessments

Annual health and safety risk assessments are carried out at least annually by the Key Personnel listed above.

This risk assessment will look to assess both mental and physical health and safety with a view to:

- identifying and evaluating the health and safety risks in our workplace and in other locations where our staff members may operate from or visit in the cause of the business
- consider risks to our staff members, clients and other visitors or third parties that visit our premises
- analysing what it is already doing to control those risks, and
- considering other possible measures to reduce, avoid or transfer the risks.

As part of the assessment, we will:

- engage in consultations and discussions with staff members about health and safety risks, including both mental and physical health, stress and workload and other issues that may concern them
- consider the manner in which we serve our clients and other visitors or third parties we engage with, to identify and consider contingency plans for any potential diversity and accessibility issues which could lead to health and safety concerns
- develop processes and procedures to ensure the health, welfare and safety of our staff members and other visitors to our premises or other locations where our staff members may operate from or visit in the cause of the business.

As part of this process, we engage in discussions with staff members about health and safety risks and measures in our workplace and other issues that may concern them. As part of this assessment

process, we also develop processes and procedures to ensure the health, welfare and safety of our staff members and other visitors to our premises.

Home Working

In accordance with our Home Working Policy, where any staff member is permitted to work from their home on a permanent basis, our Home Working Arrangements Procedure will be followed.

In particular, a home working risk assessment will be conducted routinely to ensure that health and safety risks, in addition to other risks including but not limited to confidentiality and data security, are mitigated to an acceptable level and that the home working arrangements can be sustained on a longer-term basis.

Fire Safety

In addition, a fire safety inspection is carried out annually by our Fire Safety Representative.

Staff members' duties

All members of staff in the firm have a role to play in complying with health & safety principles and to:

- co-operate with the Managers on health and safety matters
- not interfere with anything provided to safeguard their health and safety
- take reasonable care of their own health and safety, and
- report all health and safety concerns to Genevieve White.

In this respect, staff members are encouraged to identify hazards and reduce the risk which may exist during work activities and to report any condition which may appear dangerous or unsatisfactory to Genevieve White. We will always listen to any concerns that employees may have. If staff members believe that their work is putting their health or wellbeing at risk, we encourage them to raise these concerns at the earliest opportunity.

Staff members should also observe health and safety notices displayed in the buildings.

Health and Safety Processes and Procedures

The actual processes and procedures which we have developed and put in place to meet these overriding goals are contained in the following documents which will be continually adapted and improved over time to ensure that they achieve the results which are required and in order that they continue to meet our overriding goals:

Document Name	Document Role	Location
Health & Safety Risk Assessment	A document whereby we set out the arrangements to ensure the health and safety of our stakeholders; we establish any health and safety risks; and the measures taken to mitigate, transfer, avoid or reduce the risks	COLP's Office
Accident Book	A book in which we record any accidents which occur at work	COLP's Office

Ensuring Safety Guidance	Our procedure for ensuring the safety of our staff members, clients and third parties that visit our premises	**Appendix Nine**

3.2. Client Enquiries

We may receive enquiries from potential clients either by telephone, e-mail, letter or in person.

If an enquiry is received via the telephone, the receptionist determines if a fee earner is available to take the call. If not, a message is taken and the fee earner or their secretary contacts the client within two hours in all conveyancing matters or as soon as is practicable after that.

If someone arrives at our offices without an appointment, the receptionist may signpost them in accordance with our Signposting and Referral Procedure or check to see if there is a fee earner available to see them, as appropriate. Where all fee earners are busy and the person has been identified as needing our assistance, the receptionist makes an appointment for them to return at a later date.

All enquiries received in writing are considered by a Director when opening the post or email communication. The letter is then passed on to the relevant department and a supervisor allocates it to a fee earner in accordance with our File Allocation Procedure. Letters in our conveyancing department are responded to on the date of receipt.

All enquiries received by e-mail into our office e-mail account are reviewed by a Director. The e-mail is then forwarded to the correct department or supervisor in accordance our File Allocation Procedure. E-mails in our conveyancing department are responded to within two hours of receipt.

Where clients attend our offices, they are asked to remain in the reception area until a member of staff collects them for their appointment.

Client meetings take place in a location where confidential information can be discussed in private.

Where necessary we arrange for interpreters to be available at client meetings.

Where a client cannot attend our offices for a meeting (due to incapacity) we may be able to arrange for the fee earner to visit them at home (with the consent of their supervisor).

3.3. Office Equipment

All office equipment purchased or leased is procured on the basis of value for money.

Where available, and in all appropriate circumstances, all staff must use the duplex facility when using printers and photocopiers. Occasions when it is not appropriate to use this facility include the preparation of court bundles and correspondence with clients and third parties.

As part of the induction process, all staff members are trained in the operation and basic maintenance of office equipment.

If there is a fault with any of the machinery in the office, staff should inform Genevieve White who is

responsible for calling out an engineer. Staff should not try and fix machinery themselves.

3.4. IT Resources

Our IT resources and details on the application of all IT facilities within our firm including the role of IT in facilitating services for clients are identified and assessed as part of our approach to strategic planning/IT Plan.

Mariyam Ferreira is in charge of our IT resources. They review our resources at least annually to ensure that they remain in effective operation across the firm.

3.5. Post

The post is sorted by a Director each day. In their absence, this task is delegated to the most senior member of staff in the building.

Any cheques received in the post are recorded in our accounts ledger.

3.6. Legal Aid Agency Monitoring

All negative correspondence from the Legal Aid Agency is photocopied and filed in a central file held by the COLP.

This central file is monitored by supervisors at least weekly in order to help resolve problem areas. Each letter is followed up by the relevant supervisor to ascertain the reason for the rejection. If we have made a mistake, then the supervisor will decide what follow up training or action is required. If an error has not been made, feedback will be given to the Quality Representative who will decide whether to lodge an appeal (if appropriate), or to forward this feedback onto the relevant Legal Aid Agency Contract Manager.

All Key Performance Indicator (KPI) spreadsheets are filed.

The KPI reports provide information showing whether the firm's contract performance is within acceptable parameters.

3.7. Diary

A central (or backup) diary is maintained electronically, within Outlook, under the control of the Directors. The firm uses this diary to record all appointments and key dates.

Information regarding the recording and management of key dates is set out in Section 8.5.

3.8. Library

A library is maintained by Mariyam Ferreira who is responsible for ensuring the contents are kept up to date. This library contains all books and periodicals authorised by the Directors. Additionally, all fee

earners have access to on-line resource facilities.

We currently maintain the following subscriptions:

- Lexis-Nexis
- Practical Law
- West Law

Logins and passwords for on-line subscriptions are held by Mariyam Ferreira.

SECTION 4. FINANCIAL MANAGEMENT

4.1. Financial Management

Our COFA, Kuljit Lally, has overall responsibility for financial management. They are responsible for conducting out an annual review of the following financial policies and procedures to ensure that they remain effective.

As part of their overall compliance regime, they ensure that our compliance reviews are conducted regularly and to an adequate standard. They assess the results or outcomes of all reviews in order to identify any recurring or emerging trends and to identify if any improvements need to be made to our financial procedures.

The firm's Business Plan will provide the basis of any financial planning requirements. Once our plan has been created it is subsequently controlled through the implementation of a budget. We recognise the need for sound financial management in order for the firm to remain a "going concern".

4.2. Financial Compliance

The accounts team receive regular SRA Accounts Rules training to ensure they are up to date with the current risks, as identified with the SRA's Risk Outlook. The accounts team are specifically aware of their responsibilities to be vigilant over the use of a client account for banking facilities and the current threat's that exist around Cybercrime.

The accounts team are aware of the need to be cautious wherever the firm receives a large sum of client money on account of costs into the client account which is subsequently to be returned following an unexplained change of circumstances. In accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy, if the sums to be reimbursed exceed £2,000 the approval of the MLRO is required before the funds will be released.

In addition to the policies and procedures in this Manual, there are additional policies in our **Data Security & Information Governance Manual**, not least our **Cybercrime and Fraud Prevention Policy**, which support our overall awareness programme.

4.3. Accounting

The firm maintains the following:

- annual budget covering income and expenditure including any proposed capital expenditure
- annual income and expenditure accounts
- annual balance sheet
- annual income and expenditure forecast to be reviewed quarterly
- cash-flow forecast and statement.

Variance Analysis

A variance analysis of budgeted income and expenditure against actual income and expenditure is conducted and maintained by our COFA. This variance analysis is carried out on at least a quarterly basis.

A variance analysis of our cash-flow and cash-flow forecast is conducted and maintained by Kuljit Lally. This variance analysis is carried out on at least a quarterly basis.

Monitoring

Our Directors are both equally responsible for overseeing our financial data and for monitoring our financial performance and stability.

The financial performance of our firm is monitored in order that measures can be taken in the event of adverse developments to cash flow.

The COFA ensures that external accountants are instructed to prepare annual financial accounts following each financial year end.

4.4. Business Account

This firm operates a bank account which contains monies which the organisation is able to utilise / is money that is not client money.

Only authorised signatories may make payments from the business account on behalf of the firm (see below).

Reconciliations of the business account are carried out each month.

4.5. Client Assets

A client asset register is maintained to record assets such as Premium Bonds that the firm holds on behalf of a client.

4.6. Client Money

This firm operates a client account which holds client money (as defined in rule 2.1 of the SRA Accounts Rules).

4.6.1. Client Withdrawals and Transfers

Internal Withdrawals

Internal payment vouchers are to be submitted electronically to our Accounts Manager. All withdrawals will be authorised by an authorised signatory in accordance with the controls set out in our **Data Security & Information Governance Manual**. All withdrawals will be accompanied by the voucher or other supporting evidence to support the authorisation, the reason for the payment and the date of the payment.

External Withdrawals

Blank cheque books are stored in the safe. Cheques can only be signed by an authorised signatory for

that account in accordance with the bank mandate (see below). Cancelled cheques are stapled to the counterfoil of the cheque book and retained for 2 years.

Access controls to our electronic banking software are assigned in accordance with our Cybercrime and Fraud Prevention Policy and Credit Card Policy (in our **Data Security & Information Governance Manual**).

Our COFA oversees the safeguards and controls we have in place to ensure that all electronic withdrawals are properly authorised. In particular, we have strict controls in relation to verifying bank details for electronic payments (see our banking procedures set out in our Cybercrime and Fraud Prevention Policy (in our **Data Security & Information Governance Manual**).

Client to Business Transfers

Where we accept advance payments on account from our clients for our fees and/or to enable us to pay disbursements on their behalf as and when they become due, this will be treated as client money and paid into our client account.

We will confirm in writing to the client whenever we need to make a transfer of all or some of those sums to our business account to cover our fees for work that we have undertaken.

Where we need to draw upon sums held for a client in the client account to reimburse us for payments we have made on their behalf, we may not issue a bill each and every time that we make a transfer but we ensure that the client is otherwise provided with information as and when appropriate (not least a final bill at the end of the matter) to ensure that they can reconcile the payments.

All transfers will be done in accordance with our regulatory obligations (including those set out in Rule 5 of the SRA Accounts Rules).

In the event of any transfers being required between clients of our firm, the written authority of each client will be obtained. Where these transfers arise as a result of loans between clients, the written authority of both the lender and the borrower will be obtained.

4.6.2. Client Reconciliation

The firm prepares a reconciliation of the client account(s) held or operated by the firm every five weeks. This is a three-way reconciliation that includes:

- production of a full list of client balances (A), unpresented cheques and outstanding lodgements. If we have received any cash which has yet to be banked, then this is also included in our reconciliation figures
- a comparison of the balance of the client account(s) with the balances shown on the bank statements (B) and all liabilities to clients (allowing for un-presented items)
- a cashbook print out (C) for the respective period
- a summary sheet comparing A, B and C with any differences being detailed and/or investigated.

The client account reconciliation is reviewed by the COFA or a manager of the firm who is responsible for overseeing the investigation into any identified issues and for ensuring that they are promptly rectified.

Payments from our client account(s) may only be authorised by the COFA or an authorised signatory for that account (see below). Passwords and other banking controls are held securely by the COFA and changed regularly to maintain security.

All payments (including any electronic withdrawals) from the client account must be accompanied by a suitable voucher, receipt or other supporting evidence to support the authorisation, the reason for the payment and the date of the payment. In order to protect client money against misappropriation, the name and number of the account is always recorded for any cheques made payable to banks, building societies or other large institutions.

4.6.3. Unpresented Cheques

Any cheques still showing as being unpresented after six months are cancelled to ensure that the client balance can be dealt with. The COFA will give instructions to the relevant fee earner to contact the client to determine why they have yet to receive this money.

4.6.4. Client Interest

Where we hold money on a client's behalf, in accordance with the SRA Accounts Rules, it is our policy that we will pay the client a sum of money in lieu of interest on a fair and reasonable basis. The terms of our policy are set out below and are made available to our clients as part of our Standing Terms of Business at the outset of the retainer.

A sum in lieu of interest will be payable on amounts held in our general client account on the following basis:

- the period for which interest will be paid normally runs from the date the funds are received by us cleared in our account until, where paid electronically, the date when the funds are sent or, where paid by cheque, the date(s) on the cheque(s) issued to the client
- the rate of interest paid to clients will be in line with our bank's published interest rates on Client Deposit Accounts over the period when interest is due
- all sums that are paid to the client will be paid as a gross amount
- we will not account to the client for any sums in lieu of interest in the following situations:
    - on money held for the payment of a professional disbursement if the person to whom the money is owed has requested a delay in settlement
    - on money held for the Legal Aid Agency
    - on money on an advance to us to fund a payment on the client's behalf in excess of funds already held for the client
    - where the total amount of interest calculated over the course of the matter is £20 or less
    - otherwise, where there is an agreement to contract out of the provisions of our client interest policy.

If it is apparent that money held on the client's behalf will need to be retained for some time then such money may need to be placed in a designated deposit account in which case all of the interest

accruing while the funds are so invested will be paid to the client when the account is closed or on intermittent basis as agreed with the client.

4.6.5. Residual Client Funds

Residual client balances are returned to the client wherever possible.

In order to return the sums, the following procedure is invoked after the matter is concluded:

- our COFA will make all reasonable attempts to establish the identity of the owner of the money
- if the owner has been established, they will make adequate attempts to ascertain the proper destination of the money and to return the money to the owner. If the cost of doing so is excessive in relation to the amount of money held then they may decide that it is not reasonable to return the money
- if the owner cannot be located or it would be unreasonable to be expected to return it, then the matter will be passed to our COFA to oversee the payment of the sums to the firm's chosen charity at the relevant time
- if the sums are less than £500, they can be paid to the charity providing that these procedures have been correctly followed
- if the sums exceed £500 then our COFA will consider whether an application needs to be made to the SRA for the withdrawal
- in all cases, our COFA will record the steps taken, the destination of the money and other relevant information, including copies of any related documentation (including receipts from the charity), in our **Central Register of Charity Payments**.

4.7. Receipt of Payments

Monies received (in accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy) are assessed on the day of receipt (or the next working day) and banked according to the composition of the payment and in accordance with the procedures below.

Business/office money

If the payment comprises of money that is not defined as client money, it is placed in our business account.

Client money

If the payment comprises entirely client money, it is placed into our client account.

Mixed payments

If the payment includes both business money and client money, it is a 'mixed payment'. It is initially banked into the firm's client account and either

a) a client to office transfer will be undertaken promptly within 14 days to move the non-client money out from client account

b) the non-client money is paid out directly from client account, where appropriate.

Unknown receipts

Unknown receipts are placed on the firm's suspense ledger which is reviewed weekly. Any funds that cannot be traced after five working days will be returned to the sender.

Cheques

It is the responsibility of fee earners to ensure that any cheques requested from clients or lenders are provided in time for us to be sure that they have cleared the banking system. In most cases, clients are requested to provide our firm with payment at least six working days prior to the date when the funds are required. This period may be shorter where the clearance house are taking advantage of the new image-based cheque clearing system.

Cash

In accordance with our Anti-Money Laundering and Countering Terrorist Financing Policy, we maintain a cash handling limit. In the absence of any complicating factors, we accept cash receipts from clients of up to £500 in cash. Cash receipts in excess of this amount or from third parties will only be accepted in extreme circumstances and with the permission of our MLRO.

Credit/Debit Cards

The firm accepts payments by credit or debit card in accordance with its Credit Card Policy (in our **Data Security & Information Governance Manual**).

The firm does not charge clients for making payments via debit or credit card.

The receipt is posted on the day that the card payment is taken and a period of two days is provided to allow for these funds to be shown on the firm's bank account.

Legal Aid Agency

Receipts from the Legal Aid Agency are paid into the firm's business account in accordance with Rule 2.3 (b) of the SRA Accounts Rules.

4.8. Authorised Persons

The administration of payments received, actioning withdrawals, transfers or internal payment vouchers and/or the issuing of receipts may only be undertaken by authorised signatories as sanctioned by our COFA. No other staff members are permitted to authorise or sign any payments or transfers.

In addition, our COFA controls access to our computerised bank accounts by determining which staff members may have access and at which level. Access controls are assigned in accordance with our Cybercrime and Fraud Prevention Policy and Credit Card Policy (in our **Data Security & Information Governance Manual**).

Passwords are held confidentially by our COFA (and any relevant staff members given designated

rights by our COFA) in accordance with the procedures in our **Data Security & Information Governance Manual**).

Details of the authorised signatories (including those with access controls to accounts) are maintained by our COFA.

All authorised signatories signing cheques or authorising payments will ensure that there is a suitable voucher, indent or other supporting evidence to support the payment.

Our COFA has overall responsibility for overseeing the operation of financial transactions. They will undertake an annual review of our financial procedures to ensure they are in effective operation.

4.9. Financial Checks on Closure of Files

It is the responsibility of each fee earner to ensure that files are closed in accordance with our file closing procedures (see Section 7). In particular, at the end of the matter (or the substantial conclusion of the matter), the fee earner must:

- ensure the firm has accounted to the client for any outstanding money. If applicable, a final invoice will also be sent to the client for any outstanding money
- in the case of conveyancing matters, verify that the consideration for a property sale as set out in the sales contract and transfer deed (and SDLT return) correspond with the payments on the client account ledger
- ensure the prompt accounting of any surplus client funds.

The file must be passed to our Accounts Manager to reconcile the accounts, to include:

- reviewing the ledger for unpresented cheques
- ensuring the client is informed when funds are retained for a specified reason and agreeing how and when updates regarding that money are to be provided including as to the accumulation of client interest in accordance with our client interest policy.

4.10. Time Recording

To enable fee earners to accurately record the time spent on a client's matter, the firm operates an electronic time recording system.

Where time is a factor for billing purposes, we must ensure that time is accurately recorded, on such matters.

Time is recorded by inputting the information onto our time recording system against the client's matter.

4.11. Billing

Private clients

Private clients will be billed at regular intervals or at the end of the matter as appropriate. It is the responsibility of each fee earner to ensure that bills are sent out promptly at the relevant time.

Credit limits are set for all clients (new or existing) by our Directors. These may differ matter by matter and may reflect the amount to be billed, the client's circumstances, previous credit history with our firm and any other factors according to the circumstances of the matter. These limits will be periodically reviewed by our COFA.

Debt Recovery

Clients are allowed a term of 30 days within which to pay a bill.

If a bill remains unsettled within the agreed payment term, then the client will be contacted by letter or email to remind them that payment is due. This correspondence will be sent by the fee earner with conduct of the case or an administrator.

If a bill has not been settled within a further 14 days, the client will be contacted again by letter or email to remind them that payment is overdue and to request immediate payment. At this stage, the fee earner with conduct of the matter will notify the COFA.

If a bill remains unsettled after a further 14 days, the client will be sent a final demand letter (sent by post or by email) to notify them that the payment is overdue and provide them with a final opportunity to settle the account. The client would be advised that unless immediate payment is made or the client immediately contacts us to discuss any problems with payment then the debt will be passed to debt recovery agents.

Where the client exceeds this final payment limit, then our COFA will determine whether we instruct debt recovery agents to pursue the debt. They may determine, for instance, that a further attempt to recover the debt is attempted before external agents are instructed.

Where a client raises a concern with regard to the settlement of the bill this will be overseen by our COFA. If the client makes a request for further time in which to settle the account or any other amendment to the payment terms then this will be reviewed by our COFA and they will be responsible for discussing the payment terms and for approving any such request. Any amendments to payment terms will be confirmed to the client in writing. If the client does not meet the amended terms then our COFA is responsible for instructing debt recovery agents to pursue the debt.

Work in progress

Our work in progress is monitored at least monthly by Kuljit Lally. Where any risks or potential problems are identified they will ensure that appropriate steps are taken to mitigate the risk or problem and any associated impact. They will also determine whether any changes need to be made to our billing and debt recovery procedures.

Kuljit Lally has overall responsibility for the billing and the management of debts. They will undertake an annual review of our billing procedures to ensure they are in effective operation.

Public Funding

It is the responsibility of each fee earner to ensure that the file is passed to our legal cashier/our Accounts Manager for costing as soon as the matter has finished or a claim has otherwise to be made to the Legal Aid Agency for payment (such as where a full civil legal aid certificate has been granted following Controlled Work and all remaining work would be covered under that certificate or for a payment on account after the civil legal aid certificate has been in force for 3 months).

All invoices from agents, counsel and third parties in relation to publicly funded matters must be settled within 30 days of receipt of a valid invoice. It is the responsibility of each fee earner to ensure that any invoices received into the firm are passed to our legal cashier/our Accounts Manager immediately upon receipt in order that they can be processed and settled in good time.

Our COFA has overall responsibility for our legal aid billing and will undertake an annual review of our procedures to ensure they are in effective operation.

4.12. Financial Records

Our COFA/Our Accounts Manager maintains our central accounting registers and records in accordance with the SRA Accounts Rules.

The retention and destruction of accounting records is in line with our Archiving, Retention & Destruction Procedures in our **Data Security & Information Governance Manual**.

SECTION 5. PEOPLE MANAGEMENT

5.1. Recruitment & Selection

The principles of recruitment and selection of new staff are linked with the firm's Equality and Diversity Policy. Applications for jobs are considered in line with our Equality and Diversity policy; in other words, the firm should not discriminate against any one either directly (by saying it will not employ a certain category of people) or indirectly (by imposing selection criteria that only certain sections of the community can comply with).

Vacancies within the firm are identified in line with the firm's recruitment objectives considered in line with our Business Plan. These are reviewed at least every six months to ensure they are in effective operation.

When members of staff leave, the vacant position is reviewed in light of the firm's current aims and objectives for the service and, if necessary, a suitable vacancy is identified.

Before any post is advertised, an accurate job description and person specification is drawn up. These are essential to:

- identify the agreed purpose and role of a post to ensure they reflect the firm's organisational aims
- identify the responsibilities, skills and task involved and
- be able to accurately compare candidates, and their relative suitability for the post.

Job skills, qualifications and experience are defined for each post to guard against wasting time in interviewing unsuitable applicants. This applies equally to new and existing posts within the firm.

By providing defined criteria, against which applicants can be objectively assessed, the firm is working in accordance with its Equality and Diversity Policy.

In order to draft the job description as accurately as possible, all aspects of the work to be carried out by the post holder, managerial lines of responsibility, and details of to whom the post holder is accountable are considered and included.

The person specification is then based on the job description, listing all the attributes required to do the job effectively. It is helpful to divide these into essential and desirable criteria. The main points of the specification are used to draw up a "score sheet". This is used to decide which candidate is most suitable for the post.

Word of mouth is often used for recruitment of personnel. Where a suitable candidate is identified, that person is invited to the firm for an informal discussion about the role. If both parties wish to take the matter further, a second more formal meeting will be arranged.

When advertising, any of the following may be used:

- Law Society Gazette
- other websites as appropriate
- national or local press as appropriate
- advertisement at the local Job Centre

- a reputable employment agency.

Factors we consider in deciding advertisement placement include copy deadlines, cost, targeting people with specific knowledge or experience, targeting people who are underrepresented at the firm, such as people from ethnic minorities, people with disabilities, people without formal qualifications or non-lawyers, where appropriate. We invite candidates who have a disability or impairment and who would like to discuss any particular needs to contact a named individual at the firm in order to ensure that appropriate arrangements can be made (e.g. to provide test questions on tape).

5.2. Queries from Applicants

Candidates who ring in to the firm with queries are passed to Mariyam Ferreira. Candidates may ask for clarification of elements of the person specification and/or the application process and may discuss any particular issues that might impact on how they would be able to undertake the work, but the firm will not normally discuss issues that may give any candidate information that would give them an advantage in their application.

5.3. Assessment of Candidates and Interviewing

Assessment methods include the application form and oral interview questions. Factors to consider include which methods will best ensure that candidates can demonstrate that they meet the criterion, and which methods will allow us to judge a range of criteria which could include practical skills and abilities.

The questions that each candidate will be asked shall be worked out in advance. The same questions are asked of each candidate although supplementary questions can be asked to clarify the candidates' answers. The aim is to help candidates prove they match the criteria, not to set barriers which they have to scale in order to do so.

The questions are spread across the panel so that each member takes part in the process, and so that the candidate does not focus all their attention on one member of the panel. Each candidate is scored according to the sheet developed from the job specification.

All candidates are required to provide photographic ID and proof of address (such as a utilities bill). Short listed candidates must bring original proof of entitlement to work in the UK according to Home Office guidelines to their interview. We do not confirm appointments until proof has been received.

5.4. Records and Post Interview Feedback

All assessment records are kept with Mariyam Ferreira for a period of twelve months in order to provide feedback to candidates if requested. These records will be securely destroyed in accordance with our Archiving, Retention & Destruction Procedures in our **Data Security & Information Governance Manual**.

All short-listed candidates can obtain feedback from the interview assessment if they request it. All such requests will be dealt with by Mariyam Ferreira.

5.5. References

Confirmation of appointments is not made until written references have been received. One reference is obtained from the previous employer and a further personal reference is obtained.

We also seek proof of any relevant qualifications in the form of original documents or verification with the awarding body. We do not confirm appointments until proof has been received.

Where a new fee earner is employed, checks on the individual's disciplinary record are made with the Solicitor's Regulation Authority or, where possible, an equivalent regulatory body. In addition, the fee earner will be asked to sign a declaration stating that there have been no disciplinary actions taken against them. Our employment declaration form can be found in **Appendix Ten**.

5.6. Induction

All new staff and those transferring roles are provided with a proper induction so that they may easily settle into their new job. The induction will help them to learn about the job and different aspects of the organisation they have joined.

The induction material, including lists of contacts, information about the organisation they have not already received and any other necessary information, should be prepared in advance before the new member of staff starts his/her new job.

A brief induction is conducted on the first day of the staff member joining the firm or starting their new position. Time should be spent helping the new member of staff settle in, answering any questions they may have and introducing them to as many people as possible. This is recorded on our induction checklist.

A more detailed induction will be conducted within two months of the new employee joining the firm or after an existing employee has changed their role (unless there are justifiable reasons for the delay which should be recorded on the induction records). This is recorded on our induction checklist which is completed by both the employee and the supervisor to ensure that all key points are covered. A copy of this checklist can be found in **Appendix Eleven**.

The induction covers, as a minimum:

- the firm's aims
- the management structure and how the individual's role fits into it
- their role and responsibilities and the work of their team/department
- terms and conditions of employment
- health and safety matters
- immediate training requirements, including, for all solicitors, an assessment of their competency and immediate training and development needs in light of the SRA's Competence Statement
- the key policies of the firm including non-discrimination, safeguarding, our Anti-Bribery Policy and procedures, quality, client care and complaints
- the firm's Quality Manual and **Data Security & Information Governance Manual** and work instructions/processes relevant to their post.

5.7. Contracts and Probation

A new worker shall be provided with at least a written principal statement of particulars, prepared before they start work, on the first day of their employment. As appropriate, this may be followed up with a more detailed wider written contract within two months of the start date.

Where there are any subsequent changes to the written statement, these will be conveyed within one month of making the change.

The first six/three months of an employee's employment are a probationary period - which should include regular supervision and support for the new member of staff. This probationary period provides an opportunity for both parties to change their minds. This, however, does not mean that the normal procedures including our Disciplinary and Grievance procedures should not be followed where appropriate.

5.8. Job Descriptions & Person Specifications

All staff members are issued with a job description and person specification, which includes sufficient information regarding key objectives, duties, responsibilities and lines of accountability to enable staff to be clear about what is expected of them.

The job descriptions and person specifications are reviewed annually as part of the performance appraisal procedure.

5.9. Performance Management & Appraisals Procedure

Ongoing Monitoring of Performance

The performance of all staff is monitored through the on-going supervision arrangements. Where any performance issues are identified, supervisors will give consideration to the appropriate performance management tools to utilise. This could include, but is not limited to:

- formal training
- informal training
- shadowing and
- mentoring.

Further performance management review meetings will then be scheduled at appropriate intervals to ensure that issues identified are being addressed.

A record of any performance management review meetings will be held on the individual's personnel file.

Appraisals

The training needs of all staff are assessed during their annual performance appraisal. This assessment covers their organisational, managerial and/or legal or financial competence as necessary and in particular, each staff member will be appraised against the following areas as appropriate:

- job description & person specification
- client satisfaction questionnaires
- file reviews
- time recording & billing
- justified complaints, compliments received
- compliance with the SRA's Standards and Regulations (where appropriate), the LAA Standard Contract, Specialist Quality Mark
- if they are involved with conveyancing work, compliance with the Conveyancing Quality Scheme and National Conveyancing Protocol
- if they are a solicitor, meeting the SRA's Competence Statement.

A copy of our template performance appraisal forms are at **Appendix Twelve**.

Appraisals are carried out by the Directors. The appraisal is recorded in writing and is agreed with the appraisee. It is filed in the confidential central personnel records folder.

If problems have been identified with the appraisee's performance, the firm shall work with the individual concerned to improve performance. However, in the unlikely event that performance does not improve, the firm will ensure that its Disciplinary Procedure will be followed.

Management Appraisals and/or Self-Review

Directors will be subject to a performance appraisal conducted, where possible, by another Director (where possible, a more senior person). This appraisal may also review feedback from other staff.

Where it is impractical for any of our Directors to engage in our standard appraisal process such as where there isn't any one of sufficient seniority or experience to review their performance, then an alternative form of review will be undertaken which will involve an element of self-appraisal as well as drawing on data and resources from within the firm.

The self-review will encompass one or more of the following:

- insight and comments from other managers
- staff feedback
- data from client feedback
- self-reflection upon their contribution and role in achieving the firm's business objectives and any problems encountered.

The review will consider, as a minimum:

- whether the Manager has taken on any new personal tasks or responsibilities in the relevant year
- their contribution towards achieving strategic objectives of the firm as set out in the business plan (or not achieving them)
- proposed role or contribution towards future objectives / targets (including priorities)
- evaluation of training undertaken
- training required to improve management skills, performance or to meet any objectives.

The review will be documented in our Annual Self-Appraisal and Personal Development Record.

5.10. Staff Learning & Development

Individual training needs are normally identified as an outcome of the performance appraisals and aligned with the firm's Business Plan. Individual training needs and any relevant courses/study modes are agreed with the staff member and recorded by our Directors in conjunction with the individual in their training plan.

Additional learning and development needs may be identified at any point during the year. These may arise, for example, from:

- a newly identified business opportunity
- promotion or a change in role or job description
- changes in legislation or government policy
- a problem identified by a client's complaint
- supervision/file reviews or
- service reviews.

We will ensure that we react speedily and effectively to all changes that affect the areas in which we provide advice and services.

We also consider requests from staff members for time off to attend training as part of our Flexible Working Policy. Time for training requests should be made and will be considered in accordance with our Flexible Working and Workplace Adjustments Procedures.

Supervisors/Managers

All supervisors/managers are required to attend specific training which will enable them to develop the necessary skills to supervise/manage others. These skills will be evaluated during the annual appraisal and if necessary a relevant course will be booked.

Solicitors

All solicitors in our firm are required to ensure that they continue to meet the SRA's Competence Statement. In particular, their training needs will be assessed from a firm-wide perspective to enable the firm to ensure that it maintains sufficient legal competencies across the firm's practice areas and also so that, as an individual solicitor, they develop in a way in which they can meet the competency standard required of them personally.

Legal Aid

We will ensure that all caseworkers and supervisors who work on publicly funded matters conduct a minimum of six hours' of training in each 12 month period specific to the relevant categories of law in which they work. This will meet the general requirements for continuing professional development (CPD) and be CPD accredited or equivalent externally provided training unless an alternative form of training is deemed more suitable.

Conveyancing Quality Scheme

All relevant members of staff involved in Conveyancing work are required to be aware of and follow the Core Practice Management Standards of the Law Society's Conveyancing Quality Scheme and the manner in which our firm complies.

CQS focused training needs will be assessed annually as part of our overall approach to learning and development. This will enable the firm to ensure that relevant members of staff understand and follow the CQS and National Conveyancing Protocol. Furthermore, this ensures our firm complies and stays up to date in the area of residential conveyancing including the core client care and risk management areas associated with that practice.

The firm ensures relevant staff members receive specific or update training where it is necessary or recommended. The training needs of all relevant staff members are reviewed annually as part of the appraisal process to ensure that they are adequately trained for their role. Training needs will cover the following areas as a minimum:

- residential conveyancing
- client care
- fraud prevention, and
- risk management.

Some relevant members of staff will be required to attend mandatory CQS training as part of the Law Society's assessment process. These training needs will be incorporated into the firm-wide Learning & Development Plan and as part of individual staff members' training plans as appropriate (see below).

In addition, as part of an ongoing awareness programme in order to ensure that compliance and property law knowledge is updated regularly, our SRO:

- reviews our learning and development objectives, and evaluates progress
- reviews the results of any training course evaluation
- oversees arrangements for the sharing of information amongst all staff members working in this area of law. This may include:
    - ensuring staff members who attend external courses, or other relevant training, cascade important information and updates to colleagues
    - providing updates to staff through the means of bulletins or emails informing staff of any new updates
    - circulating bulletins or articles published by regulators, external advisors and/or in the legal press
    - having updates and news as part of the agenda for department meetings.

Courses

It is the responsibility of Mariyam Ferreira to book individuals onto courses.

Once an individual has attended a course, a process of evaluation is carried out to help understand if the course was appropriate and has met any relevant identified training need.

The individual will conduct this evaluation process (with assistance from their supervisor, if appropriate) and will document the conclusions in their Training Record.

At their next appraisal, the appraiser will evaluate whether the training has met the individual's training needs.

5.11. Training Plans

The principles of training of staff are linked with the Performance Management, Learning & Development Policy.

Firm-wide Learning & Development Plan

The firm considers learning & development as part of its business & strategic planning following the annual appraisal program.

The firm has devised a firm-wide Learning and Development Plan as part of its Strategic Plan. This includes training in relation to:

- Anti-Money Laundering and Terrorist Financing
- Equality and Diversity
- Conflicts of Interest
- Data Security
- Cybercrime and fraud
- CQS including mandatory training requirements.

The Learning & Development Plan is evaluated and changes documented as part of the review of our strategic objectives (see Section 1.7).

Individual training plans and records

The firm also devises individual training plans for all staff in relation to their learning & development.

The Individual training plans are designed so as to:

- include all staff
- ensure that all training needs agreed are addressed effectively and appropriately
- assist the firm in achieving the objectives stated in the Business Plan
- ensure that all fee earners receive the appropriate level of training per year
- in the case of solicitors, that both the firm and the individual solicitor meet the SRA's Competence Statement, and
- in the case of members of staff involved in conveyancing work, that they understand and follow the CQS and National Conveyancing Protocol.

Training records are also kept for every staff member. These records cover internal and external training provided and record, at least, the following details:

- the date of any training
- method of training/learning
- the course/training title (if applicable)
- the names of the training providers or references and
- length of training including number of CPD/Training hours (where applicable).

Solicitors in our firm are required to complete detailed training plans and records as a means to evidence that they continue to meet the SRA's Competence Statement.

Fee earning and support members of staff involved in conveyancing work must also ensure that their

training plans and records CQS focused address training needs.

Current Training records can be found in the central training records folder.

An individual's training plan and record will be reviewed as part of the appraisal and the appraiser will evaluate whether the objectives in the training plan have been met. Any changes to objectives will be documented in the plan for the next training year.

5.12. Supervision of Staff

An organisation chart can be found at **Appendix One**. It details the named category supervisors for each department. Where more than one supervisor works in a category of law, the organisation chart will show which individuals each supervises and outlines any specific responsibilities.

The firm operates an active supervision policy, although our supervisors can be approached for supervision at any time. Our supervisors are accessible each day the office is open to the public, for the supervision of all staff. If they are not available in person, they can be contacted by telephone.

There are certain tools which our supervisors use to ensure that supervision is effective which include:

- review of incoming correspondence
- review of outgoing correspondence
- day to day monitoring of casework
- reviews of matter details to ensure good financial controls
- team meetings
- independent file reviews
- regular performance reviews
- weekly/monthly departmental meetings, during which technical issues are discussed
- spot checks on incoming post by a Director
- all contract reports prepared by inexperienced fee earners being check by a Director
- certificates of Title to lenders being signed by a solicitor/a supervisor/our SRO/Kuljit Lally

The above tools will help our supervisors to check:

- new matters taken on, strategy and plans for dealing with the matter
- workload (numbers and different types of matters being handled)
- delegated functions
- whether the matter is within the competence of the fee earner. If not, whether there is anyone else in the firm who could handle the matter or if the client needs to be referred elsewhere.

Supervisory meetings and one to one feedback

Active supervision particularly takes place during weekly 1-2-1 meetings, monthly team meetings and whilst carrying out file reviews.

Discussion points during any supervision meetings may include but is not limited to:

- Importance of client care and our obligations in the SRA's Standards and Regulations
- Importance of recording key dates in accordance with our procedures
- General training issues

- Specific training issues as identified in individual training plans and records including but not limited to: meeting the SRA's Competence Statement, CQS and National Conveyancing Protocol, Legal Aid Standard Contract, category-based training available, AML Training, management training, supervision training etc.

Following on from the above, where required, all managers/supervisors will ensure that training records are updated, preferably directly after discussions have concluded in the same meeting room or as soon as possible thereafter.

Home Working & Remote Supervision

Where any supervisor or supervisee works from home on a regular basis then there may need to be additional steps put in place to ensure that supervision remains appropriate, adequate and effective and is sustainable longer term. Where a supervisor is not based in the same location as those they supervise, arrangements will be put in place to ensure they are accessible during working hours and are able to conduct their role effectively.

Remote supervision may be carried out by our supervisors using a number of combined methods including:

- email
- phone calls
- video conferencing
- other methods as applicable.

As a minimum, each supervisor conducting remote supervision will be responsible for:

- designating sufficient time to conduct supervision of each individual they supervise
- ensuring that the level of supervision provided reflects the skills, knowledge and experience of the individual(s) supervised
- designating time for face-to-face supervision with each party being in the same location as and when appropriate
- when supervising junior staff members in particular, considering methods to replicate the benefits of working in close proximity such as being able to learn through observation and ask frequent questions
- for supervisors who supervise trainee solicitors, ensuring that arrangements meet the SRA's requirements for appropriate supervision and which enables the trainee to obtain and evidence the necessary period of recognised training or qualifying work experience, as applicable to their route to qualification
- communicating regularly in person with those they supervise whenever possible, whichever methods are used for remote supervision
- maintaining channels for feedback, supervisory meetings and regular catch ups.

Each legal aid supervisor must conduct face-to-face supervision at least once per calendar month with each caseworker or designated fee earner supervised. This will require the supervisor designating at least one day per calendar month to be in attendance at each office and which they supervise staff and which must coincide with attendance by the person(s) supervised.

These arrangements will be considered as part of our Home Working Arrangements Procedure.

Supervisors' training

Our supervisors keep their legal knowledge up to date through reading relevant texts, attending seminars & training courses and/or preparing & delivering training. Details of these can be found in their training records. They are also responsible for keeping up to date with any relevant changes in the law and procedure.

Legal Aid

Whenever a supervisor leaves or is changed, we will send details to the LAA in writing and within 28 calendar days of the name and date the outgoing supervisor left, the name of the new supervisor, their date of appointment and how they qualify as a supervisor. If no replacement is available within this time frame then we will instead outline our recruitment plan and what steps we have taken to control the quality of our work in the interim.

No full time equivalent supervisor will supervise more than a maximum of four full time equivalent caseworkers.

We will ensure that all supervisors have a professional legal qualification or conduct a minimum of 12 hours' casework per week.

5.13. Sharing of Information

All staff members have access to a library of relevant books and materials (see Section 3) and may attend external training courses (see Staff Learning and Development).

Our supervisors are responsible for informing other staff of any relevant changes in law and procedure and the implications for the delivery of the service.

Where appropriate, relevant legal and professional information will be shared during team/firm wide meetings or by means of cascade training or a documented update. Where possible, any materials provided by any external course providers will be shared with other staff members by making a copy available in our library.

5.14. Staff Availability

We are committed to maintaining our service levels at all times and our COLP keeps all planned and unplanned absences under review as part of our ongoing assessment of risk.

All staff members are required to book any holiday or other leave with their supervisor giving as much notice as possible. Any planned holidays or other leave of more than 10 working days will require the prior consent of our COLP. Decisions will be made on requests for extended absence at the discretion of the COLP. They will take into account any upcoming key dates, the availability of other staff members during the period of leave and any difficulties in arranging cover so as to ensure the smooth running of the firm.

Staff members are required to inform their supervisor (and/or our COLP) as soon as possible in the event of any unplanned absence such as sick leave or compassionate leave.

5.15. Flexible Working & Workplace Adjustments

In the event that any workplace adjustments are required by a member of staff then we encourage the staff member to tell us about their requirements so that we can support them as appropriate.

Similarly, if staff members would like us to consider a new or flexible working arrangement or time off for training then they are encouraged to put in a request.

We consider requests from staff members for reasonable adjustments, flexible working arrangements and time off to attend training as part of our Flexible Working Policy.

We will consult with the relevant staff member and, if relevant, their medical adviser(s) about possible workplace adjustments. We will consider the matter carefully and if we are unable to accommodate the requests and/or it is considered that a particular adjustment would not be reasonable, we will explain our reasons and, wherever possible, try to find an alternative solution.

Where requests are made for new home working arrangements, whether part time or full time, they will be considered and additional risk management steps will need to be taken in accordance with our Home Working Policy and Home Working Arrangements Procedure.

Requests for flexible working (including requests for workplace adjustments) and time for training should be made and will be considered in accordance with our flexible working and time for training request procedures set out in **Appendix Thirteen**.

5.16. Home Working Arrangements

In the event that any workplace adjustments or requests for a new working arrangement involve a staff member conducting work from their home, the staff member will be required to assist the firm's management team with the carrying out of Home Working Risk Assessment.

In accordance with our Home Working Policy, the aim of this procedure is to ensure that occupational and compliance risks including but not limited to confidentiality, data security and health and safety, are mitigated to an acceptable level and that the home working arrangements can be sustained on a longer term basis.

The Home Working Risk Assessment procedure comprises the following steps:

- **Home Working Risk Checklist**
  Each staff member working from home must self-complete the firm's Home Working Risk Checklist (at **Appendix Fourteen**) as soon as possible and be prepared to discuss the contents with relevant members of the firm's management team. These may include the firm's COLP and/or other Key Personnel involved in health and safety and client care as applicable.

- **Risk Evaluation**
  The management team will conduct a process of evaluation of any risks identified as a result of the contents of the checklist and determine if further checks and assessments are required such as a home visit and/or additional discussions with the staff member.

- **Implementation of control measures**
  Depending on the risks, the firm's management team will consider with the staff member

whether they need to implement any measures to mitigate against any identified risks. Each staff member will need to cooperate with the firm's management team in order for any protective or preventative measure to be implemented.

- **Ongoing monitoring**
  The firm's management team will regularly monitor and review a staff member's home working arrangements in order to ensure their continued effectiveness. In particular, staff members may be required to complete additional self-assessment Home Working Risk Checklists at a later time or routinely on a periodic basis. All staff members must be prepared to discuss ongoing risks and mitigating measures to ensure that the home working arrangements can be sustained on a longer term basis if required.

Where any supervisor or supervisee works from home then there may need to be additional steps put in place to ensure that supervision remains appropriate, adequate and effective (see Supervision of Staff).

5.17. Grievance Procedure

Our Grievance Procedure enables us to ensure that any problems, complaints or concerns raised by staff members are dealt with in a fair, timely and consistent manner.

The firm's Grievance Procedure can be found at **Appendix Fifteen**

5.18. Disciplinary Procedure

Our Disciplinary Procedure enables us to ensure that any problems or issues with regard to a staff member's conduct are dealt with in a fair, timely and consistent manner.

The firm's Disciplinary Procedure can be found at **Appendix Sixteen**

5.19. Independent File Reviews

A sample of all fee earners' files is independently reviewed to cover both legal advice and procedural compliance.

We feel confident that we can justify the number and frequency of our file review programme to the Solicitors Regulation Authority, the Legal Aid Agency and The Law Society.

The following matrix documents our file review programme, taking into account the experience, expertise and the type of work undertaken by each fee earner:

Category	Reviewer	Reviewee	Files per Quarter
	Kuljit Lally	Mariyam Ferreira	2-4
	Mariyam Ferreira	Kuljit Lally	2-3
	Mariyam Ferreira/Kuljit Lally	Patrick Smith	3
	Mariyam	Ian Barton	2

Category	Reviewer	Reviewee	Files per Quarter
	Ferreira/Kuljit Lally		

The following matrix documents our file review programme for our publicly funded matters, taking into account the experience, expertise and the type of work undertaken by each fee earner:

Category	Reviewer	Reviewee	Files per Month
Family	Kuljit Lally	Kuljit Lally	1

Our file review programme for our Conveyancing practice is maintained by our SRO.

The following matrix documents our file review programme for our conveyancing matters, taking into account the experience, expertise and the type of work undertaken by each fee earner:

Reviewer	Reviewee	Files per Month/Quarter

Selection

Files are predominantly selected on a random basis to ensure that all case types and case stages are fairly represented in the sample reviewed. However, where the fee earner has a file which falls under the following categories, it will be chosen for review:

- a high-risk matter
- a file where little or no time has been recorded on it in the last month
- where the matter has not been invoiced for over a period of 3 months (private work) or
- where a complaint has been recorded.

It will be the responsibility of the supervisor to determine which files are reviewed for each fee earner. They will consider if any files fall into the above categories before choosing a random selection for review.

The type of files reviewed will be representative of the firm's overall caseload at any one time.

If a fee earner does not have their own files, we will review a sample of their work.

Financial Compliance

Whilst undertaking independent reviews of our fee earner's casefiles, a selection of those files are also reviewed for compliance with our accounting procedures and the SRA Accounts Rules.

In particular, files will be reviewed to check compliance with the following:

- our client interest policy has been confirmed to client at the outset of the matter
- the correct treatment of client monies
- the correct treatment of client to business account transfers
- time recording and billing procedures correctly followed
- all professional disbursements properly paid
- invoices have been drawn up correctly and consistent with the services described
- surplus client funds paid promptly in accordance with the above procedure and
- client interest has been correctly applied.

Our COFA formally reviews the financial reviews in our file review records annually in order to identify any recurring or emerging trends and to identify if any improvements need to be made to our procedures. This information is considered when amending training plans and updating the annual review of risk.

File Review pro-forma

All file reviews findings are recorded on our File Review pro-forma, a copy of which can be seen at **Appendix Seventeen**.

In all cases, reviews will check compliance with the SRA's Standards and Regulations. In publicly funded matters, they will be reviewed against the Specialist Quality Mark. In conveyancing matters, they will be reviewed against the CQS Core Practice Standards and the Conveyancing Protocol.

A copy of the review record is filed in a central register with the original being attached to the relevant case file. The review is recorded even where no corrective action is deemed necessary.

Once a file has been reviewed, the fee earner will be notified by the reviewer by the emailing of the file review form to the fee earner. In particular, any corrective actions will be highlighted to the fee earner and, as outlined further below, a timescale will be set for the completion of such corrective actions.

Where corrective action is required, the review record will include details of the action to be taken and the timescale within which it must be completed. The corrective action must be completed within 28 days. The reviewer will subsequently follow this up and confirm completion on the form.

Each supervisor reviews and monitors the data generated from the file reviews for their supervisees, at least quarterly. Where any trends are noticed, consideration is given to any training needs and/or the need for additional supervision in line with our Performance Management Policy and Procedures.

Conveyancing

Our SRO oversees all reviews conducted on conveyancing matters. A copy of all reviews must be sent to our SRO within a week of the file review being carried out.

A central record of our conveyancing file reviews is kept independently by our SRO who feeds this information into our firm's central register – see below.

The SRO will arrange for file reviews to be carried out on at least a quarterly basis.

The selection of files will be generated from a list of matters for each conveyancer. A different focus of review may be adopted from time to time but it is important that at least one file is of a recently

archived matter to ensure that all aspects of the conveyancing procedures have been carried out in accordance with the procedures in our manual and the requirements of the CQS.

When corrective action is required, it is the responsibility of the conveyancer to undertake the corrective action specified within the time period specified, and in no case will this be longer than 28 days. The reviewer must then verify to his or her reasonable satisfaction that the corrective action has been performed and sign and date the review form to show that the corrective action has been taken within 28 days.

As a minimum, three files per quarter should be reviewed for all fee-earners. Two files should be for purchase matters and one for a sale matter. Where the practice undertakes remortgage work, an additional file should be reviewed for a remortgage transaction each quarter.

Review

The **Central Register of File Reviews** maintains records of all file reviews conducted for at least six years.

Our COLP formally reviews the file review records annually in order to identify any recurring or emerging trends and to identify if any improvements need to be made to our procedures. This information is considered when amending training plans and updating the annual review of risk.

5.20. End of Employment

We recognise the contribution and commitment of our staff. We are fully committed to the provision of a good working environment for all of our employees. However, it is acknowledged that for a variety of reasons, people will leave, some after a relatively short time and others after many years of employment.

When a member of staff ceases to be an employee of the firm, a number of steps are followed to ensure the exit is as smooth as possible. These are set out in our End of Employment Procedures in our **Data Security & Information Governance Manual**.

SECTION 6. RISK MANAGEMENT

6.1. Risk Management Roles and Responsibilities

Our Risk Management procedures are linked with our Risk Management Policy.

Our COLP is our Risk Manager and is responsible for overseeing risk management within the firm. In particular, our Risk Manager is responsible for:

- maintaining our Risk Register
- reporting to staff members on risk management. This is achieved by having risk management as an agenda item in all management meetings
- promoting a culture of risk awareness and compliance by means of:
    - ensuring that risk management is a primary focus in our Compliance Plan
    - devising a suitable training programme to include training as part of our induction programme and annual update training
    - overseeing arrangements for the sharing of risk management information which includes informing staff of any new updates on risk management such as bulletins or articles published by regulators and/or in the legal press and
    - overseeing our risk management procedures.

Individual staff members may be assigned specific roles in the management of risk within our practice. These roles and responsibilities are recorded in our Risk Register.

Conveyancing Matters

We have designated Mariyam Ferreira as the person who assumes responsibility for day-to-day risk management of our conveyancing department and they report to and work alongside our Risk Manager to ensure ensuring the firm identifies and deals with all issues which may arise.

To ensure that conveyancing risk specific issues are appreciated and addressed, Mariyam Ferreira is responsible for:

- working with our Risk Manager to ensure that we have appropriate reporting arrangements to ensure conveyancing specific risks are appreciated and addressed
- overseeing the day-to-day management of risks associated with our conveyancing practice
- maintaining our lists of different conveyancing types of work that our firm will and will not undertake including any steps to be taken when work is declined on grounds that it falls outside acceptable risk levels (and which is more particularly detailed in our Conveyancing Risk and Conflicts Guidance as set out in **Appendix Eight**). This information is communicated to all relevant staff and updated when changes occur
- maintaining details of the generic risks and causes of claims associated with conveyancing as set out in summary form below (and which is more particularly detailed in our Conveyancing Risk and Conflicts Guidance as set out in **Appendix Eight**)
- in accordance with our File Management Procedures, overseeing file management in our conveyancing department to ensure that we continue to put effective controls in place as regards instructions which may be undertaken even though they have a higher risk profile, including unusual supervisory and reporting requirements or contingency planning.

As part of our aims to promote a culture of awareness and compliance, Mariyam Ferreira ensures that members of staff involved with conveyancing work are kept up to date with the latest guidance, articles and case law relating to residential conveyancing.

Risk Updates

Where any member of staff considers or suspects that a new risk has been identified or the rating of an existing risk has changed, they should discuss this with our Risk Manager in accordance with our Compliance Policy.

6.2. Risk Register

Our Risk Manager maintains a Risk Register which records all of the risks that are identified within our firm and outlines what we do to avoid, transfer or mitigate those risks.

Our Risk Register incorporates:

- a record of any risks which have been identified and categorised according to their risk profile
- a process of evaluation of the identified risks
- the assignment of a risk rating for each risk
- a review of our resources and necessary provisions required in order to properly manage the risks
- a process whereby we may monitor, evaluate and review the arrangements put in place to manage the risks and
- the allocation of specific risk management roles and responsibilities to individual staff members as appropriate.

The Risk Register is kept under constant review by our Risk Manager and from time to time, they may update the plan to ensure that improvements are made where necessary and that it remains effective.

The Risk Register is reviewed in detail by our Risk Manager at least annually.

6.3. Compliance Plan

We maintain a Compliance Plan which provides a summary of our arrangements for compliance with statutory and regulatory requirements. The Plan documents our procedures for reviewing our policies and procedures and for the handling and maintenance of any compliance breaches.

The Compliance Plan is kept under constant review by our Risk Manager and from time to time, they may update the plan to ensure that improvements are made where necessary and that it remains effective. All Key Personnel are responsible for ensuring that our Compliance Plan is put into effect.

The Compliance Plan is reviewed in detail by our COLP at least annually.

All staff members are notified of any changes to the Compliance Plan or to any of our policies and procedures and are responsible for ensuring that they fully understand their obligations.

6.4. Compliance and Regulatory Risks

Our compliance and regulatory risks are set out in more detail in our Risk Register.

We ensure that all fee earners have received training on:

- the SRA's Standards and Regulations
- the SQM
- the CQS

and consider compliance with these areas as an integral part of the supervision process.

Particular compliance Areas

Compliance with Money Laundering regulations and our AML training is covered in our Anti-Money Laundering and Countering Terrorist Financing Policy.

Compliance with the Anti-Bribery Act is covered in our Anti-Bribery Policy.

Compliance with the Criminal Finances Act 2017 is covered in our Anti-Tax Evasion Policy.

Compliance with Health and Safety legislation and regulations is covered in our Health and Safety Policy.

Compliance with the Sanctions and Anti-Money Laundering Act 2018 and other legislation relating to financial sanctions is covered in our Financial Sanctions Policy.

Compliance with Data Protection legislation, Information Security requirements and guidance is covered in our **Data Security & Information Governance**.

Compliance with the PCI DSS is covered in our Credit Card Policy as set out in our **Data Security & Information Governance**.

Compliance with Anti-discrimination and Equality legislation is covered in our Equality and Diversity Policy.

6.5. Governance and Strategic Risks

In addition to being covered in our Risk Register, governance and strategic risks are more particularly identified and assessed as part of our Business Plan.

6.6. Operational Risks

6.6.1. Practice Risks

Risks to the continual operation of our practice are identified and assessed as part of our Business Continuity Plan.

Business continuity risks include:

- the loss of key personnel and ensuring service levels during unplanned absences
- the occurrence of a catastrophic event such as to cause physical damage to our office and to client papers.

Mariyam Ferreira is in charge of our Business Continuity Plan. They review and test the Plan at least annually to verify that it would be effective in the event of any business interruption.

6.6.2. Matter Risks

All fee earners are aware of the need to consider the risk element of matters before, during and after the life of the matter. This consideration is evidenced on the file opening form within the casefile.

Instructions from new clients or new instructions from existing clients are accepted in line with the procedures set out in our Accepting Instructions Procedure. Fee earners assess the risk when accepting all new instructions and notify the Risk Manager of any unusual circumstances or potentially high-risk matters in order that appropriate action can be taken.

Assessing risk levels

The following table is designed to provide a level of guidance as to which clients and/or matters would be classified as high or medium risk.

Risk Level	Factors to consider
High Risk	Where it is known that the client is very likely to be dangerous and/or unpredictable such that it poses a real threat to the personal harm to any staff member, client or third party
	If the matter relates to an area which is on the boundary of our expertise and/or has especially high levels of complexity
	There is a novel or unusual aspect of the law involved
	A foreign jurisdiction may be involved
	Where the client has transferred from another firm due to being unhappy with the advice or service provided
	Any matter where the potential claim exceeds the maximum sum payable under the firm's PII
	Any matter where it has been identified that there is a significant risk of fraud

Risk Level	Factors to consider
Medium Risk	Where we suspect or there is the potential for that client to be dangerous and/or unpredictable such that there is a potential risk of personal harm to any staff member, client or third party
	If the matter has the potential to involve an area which is on the boundary of our expertise and/or could have very high levels of complexity
	If the matter involves an area which has a particular identified area of complexity which would require specific attention outside of our normal processes (such as the need for additional supervision)

Any other clients/matters which do not immediately raise any of the above concerns or where there is no identified potential for the above concerns to be raised would ordinarily be classified as 'low risk'.

Where a matter is considered 'medium risk' then any specific concerns or areas to keep under review should be reported to the supervisors in order that they can ensure that, where required, any additional supervisory requirements are put into effect.

High Risk Matters

If the fee earner considers a matter may fall within the 'high risk' category, they should complete our Matter Risk Notification Form. A copy of our Matter Risk Notification Form is available at **Appendix Eighteen**.

The Risk Manager then decides whether the instructions should be accepted and provides a summary on our **Central Register of Matter Risks**. If they are not, the fee earner uses the Signposting Procedure as detailed below.

If instructions are accepted, the Risk Manager manages the matter in a manner deemed appropriate. This may include, for example, increased or unusual supervisory arrangements. A note of the risk and agreed action is recorded and kept on file.

Continual review

During the course of the matter, it will be continually assessed for risk by the fee earner, both from the client's point of view and that of the firm. Should there be any change to the risk profile during the matter, the fee earner must:

- consider any change from the client's point of view
- discuss the circumstances and implications of this change with their supervisor
- advise the client in writing of such circumstances without delay. In particular, the fee earner must inform the client immediately if an adverse costs order is made against the firm
- inform the Risk Manager immediately if any high-risk issue arises or if this is appropriate.

Closing risk assessment

At the end of a matter, the fee earner conducts a concluding risk assessment by considering:

- whether the risk profile changed
- whether the client's objectives have been achieved
- whether there is any reason to believe that the client could fairly raise a complaint or make a claim for damages in relation to the services provided.

The fee earner will notify our Risk Manager immediately of any identified risk.

This closing risk assessment is recorded on the file closing checklist. In particularly high risk matters or those that have required enhanced supervision or monitoring by the Risk Manager, the closing risk assessment will be signed off by the Supervisor and/or Risk Manager.

6.6.3. Work Type Risks

Set out in Section 1 is a list of work by category type that this firm will undertake. This detail together with information of generic risks and specific risks relating to our work (as summarised below) are communicated to all staff as part of the induction process. Where the work type areas undertaken by the firm change, the manual is updated and all staff informed.

If someone approaches us to carry out work that we do not undertake, we signpost them to another firm using our Signposting Procedure.

We have assessed our general risk of becoming involved in money laundering and/or terrorist financing – as referred to in our Anti-Money Laundering and Countering Terrorist Financing Policy. Identified risk factors are set out in our Money Laundering and Countering Terrorist Financing Risk Assessment.

Fee earners must be aware of generic risks that could affect any case. These include failure to:

- disclose suspicions of money laundering
- disclose suspicions of fraud
- conduct a conflict of interest check
- advise and confirm in writing to the client, their instructions, the advice provided and the action to be taken in the matter
- note and inform the client of key dates
- advise and confirm to the client the name and status of the fee earner responsible for case conduct and supervision of the case
- inform the client of the firm's complaints procedure and confirm this in writing to the client and
- advise and confirm in writing to private clients the best information possible about the total likely cost of the matter (including VAT and disbursements), or the best estimate available at the time (where appropriate).

In addition, fee earners must also be aware of specific risks relating to the area of work they undertake.

The following table outlines some of the risks relating to our work areas:

Work Area	Risks
Civil & Commercial Litigation	• Missing Court Hearing or direction dates
Commercial Leases	• Failure to check leases for any • Ensuring that content of leases includes up to date legislation
Commercial Property & Residential Conveyancing (Further and more detailed information on Conveyancing Specific Risks and Causes of Claims are set out in **Appendix Eight**)	• Failure to carry out identification checks • Failure to satisfy undertakings • Failure to carry out the usual searches particularly official Land Registry search and bankruptcy search and failure to be aware of fraudulent transactions • Purchase – failure to submit an SDLT return within 14 days of completion • Purchase – failure to complete before expiration of mortgage offer • Sale – failure to notice and pay off a second or subsequent mortgage • Sale – failure to account to the correct client • Involvement on mortgage fraud
Family	• Failing to file documents on time • Failing to comply with the Practice Direction on filing trial bundles and Practice Direction documents: chronology, position statements, summary of background and essential reading list • Clients who have mental health issues, assessing do they have the capacity to give instructions • Clients whose English language skills are limited, do they require an interpreter • Not obtaining prior authority of the court or LAA to incur disbursements • Passing LAA audits
Immigration & Asylum	• If JR proceedings were initiated, there is a risk that the High Court could order costs against us if we are making applications without merit. This would also apply to certain COA cases where risk rates apply • Maintaining accreditation • Missing key dates
Landlord & Tenant – Residential	• Missing Court deadline • Securing client's deposit • Proper service of notice
Personal Injury	• No Win, No Fee work
Wills & Probate	• Failure to notify and take into consideration the beneficiaries' entitlements and being kept up to date with information
All areas	• Passing SRA Audits • Conflicts of interest

6.7. Inactivity Checks

Fee Earner Monthly Inactivity Checks

All fee earners carry out monthly inactivity checks of all of their matter files. This is done by checking each casefile or by checking each matter against their billing print out.

Quarterly Centralised Inactivity Checks

The Directors will conduct a quarterly review of our records of all open matters to identify any matter which has been inactive for three months or more. If any inactive matters are identified, the fee earner will be required to provide further information to determine if the matter is justifiably dormant or if action is required. If a matter has concluded, the Directors will oversee that it is closed in accordance with our End of the Matter Procedures.

6.8. Annual Review of Risk

Our Risk Manager conducts an annual review of all risk assessment data generated within our firm including:

- trends identified from the annual analysis of complaints received
- trends identified from the annual analysis of file reviews
- details of any professional indemnity insurance claims made
- any matters notified to our MLRO, COLP and/or COFA
- any situations where a conflict of interest arose
- any facts or matters or breaches reported by the firm including records of all serious compliance breaches notified to the SRA
- any other facts, matters or breaches reported by the firm including to the ICO
- our Business Plan
- our Business Continuity Plan
- risk of non-compliance with our Data Protection Policy (in our **Data Security & Information Governance Manual**) in relation to the management of personal data.

Our COFA will also undertake an annual review of financial aspects of our file reviews.

Identification of remedial action

These reviews will be used primarily to identify any trends and any necessary remedial action. The data will also form the basis of our annual review of our Risk Register and Compliance Plan.

SECTION 7. OUR CLIENTS

7.1. SRA Standards and Regulations

All fee earners should be aware of their obligations in relation to client care, costs and accounting as governed by the SRA's Standards and Regulations. Failure to comply with the SRA's Standards and Regulations could lead to disciplinary action for the individual and firm by the Solicitors Regulation Authority. In such cases, we will follow our Disciplinary Procedure.

We will monitor compliance with the SRA's Standards and Regulations primarily through:

- ongoing reviews of our Compliance Plan and Risk Register
- our annual review of risk assessment data
- conducting independent file reviews
- on-going performance management
- strategic planning and
- the annual review of this manual.

7.2. Client Care at the Start of the Matter

The advice and services we provide are independent of any funding body or other external organisation.

We are under a duty to the Legal Aid Agency to assess a potential client's eligibility for public funding and to confirm whether we are able to take on their matter.

Mental capacity, disability and vulnerability

In accordance with our Vulnerable Clients Policy, when taking instructions and during the course of the retainer, we shall have proper regard to our client's mental capacity or other vulnerability, such as incapacity or duress. We shall also consider whether we need to make provision of any reasonable adjustments or positive action for clients with a disability or particular need.

SRA Price Transparency Rules

We are obliged to ensure that we provide certain information in accordance with the SRA's Price Transparency Rules. This includes displaying on our website:

- a digital badge
- our complaints handling procedure
- in our Conveyancing, Probate and Immigration work, the provision of detailed and transparent service and costs information.

In accordance with our Commitment to Quality and Client Care Policy, we ensure compliance with the Rules by undertaking regular compliance reviews and having an active approach to maintaining high levels of client care.

Updates to our website are handled in accordance with our Website Management Policy.

Reviews and updates to our publicity materials are handled in accordance with our Publicity Policy.

Client Care Information

At the outset of the case, unless it is not applicable to the client or the matter in question, the following information is recorded in the case file and is confirmed in writing to the client:

- the client's detailed instructions and objectives together with the advice provided including the issues involved, the options available, the strengths and weaknesses of the case and the fee earner's judgment of the prospects of success in the case
- the service to be provided
- consideration as to the proposed action is merited on a costs benefit analysis
- the approximate length of the case and any other relevant timescales and any factors that may affect that timescale
- the fee earner's responses to specific queries raised by the client
- the action to be taken in the case by both the firm and the client, as discussed and agreed with the client, and the division of responsibilities
- any limits on the firm's ability to act
- any risks of implications on the firm acting
- the name and status of the fee earner responsible for conduct of the case
- the name and status of the person with overall supervision of the matter
- that the client is entitled to complain, including confirmation of the name of the person with whom the client should raise any problem concerning the service provided. The client should be made aware of the manner in which the firm handles complaints (including how the client may obtain a copy of our complaints procedure) and this should include details about the fact that complaints can be made directly to the Legal Ombudsman, the timescales and contact details for the Ombudsman and also that concerns about behaviour or ethics can be reported by the client to the SRA
- that the client is entitled to challenge or complain about our bill using our complaints handling procedure and the circumstances under which they may be liable to pay interest on an unpaid bill
- how our services are regulated and how this affects the protections available to the client
- any known key dates.

Occasionally, exceptional circumstances may arise when it is appropriate for a fee earner not to confirm some or all of the above information to the client in writing. Such circumstances include situations where it is not in their interests (e.g. there is evidence that it would be prejudicial to the client's case or would endanger their well-being). All exceptions are considered on a case-by-case basis

and we record the reason for considering that exceptional circumstances apply on the file. In these cases, we still record the required information even though it is not confirmed in writing to the client.

Unbundled Work

Occasionally, we may accept instructions from clients for provision of unbundled services which may be a more affordable alternative for clients to our traditional retainer. Unbundled services which we may choose to provide include providing advice and assistance on a particular matter during a single visit by the client to our offices, assisting with the completion of a form or application or representing a client at a particular Court hearing. In all such cases, we would be accepting the work on a stand-alone basis and will not go on the record as a representative of the client. This means that the client will remain responsible for dealing with all correspondence, negotiations and procedural issues between themselves and the court, their opponent, and any witnesses including expert witnesses.

We will only accept instructions for unbundled work where we consider it to be suitable for the client's needs and take account of the client's best interests. In accordance with our File Allocation Procedures, our Directors will consider whether our firm may accept the instructions and, in accordance with our Risk Management Procedures, whether there are any particular risks identified with the work which need to be assessed and/or managed.

Conveyancing

For conveyancing matters, there is additional guidance on CQS client care and risk assessment requirements in **Appendix Eight**. In particular, in line with the requirements of CQS and the Law Society's Conveyancing Protocol, there may be additional client care, costs and risk information which will need to be communicated to clients.

7.3. Costs Advice

We only enter into fee agreements with our clients that are legal, and which we consider to be suitable for our client's needs and take account of the client's best interests.

At the outset of the case, unless it is not applicable to the client or the matter in question, the following costs information should be confirmed to the client in writing and recorded in the case file:

- whether the client may be eligible for legal aid (other than non-contributory legal aid with no potential liability)
- whether the client's liability for their own costs may be covered by insurance
- whether the client's liability for another party's costs may be covered by pre-purchased insurance and, if not, whether it would be advisable for those costs to be covered by after-the-event insurance
- whether the client's liability for costs (including the costs of another party) may be paid by someone else (e.g. an employer or trade union)
- where applicable, the effects of discharge or revocation of LAA funding

- where applicable, the effect of the Statutory Charge, why it might apply and the amount applicable

- where applicable, the effects of orders for costs which may be made against the client

- where applicable, the client's potential obligation to pay monies towards the funding of their case and the consequences of any failure to do so

- where applicable, the fact that, even if the client wins, the opponent may not be ordered to pay or be capable of paying the full amount of the client's costs

- where applicable, giving the client all relevant information relating to a fee arrangement i.e. a fee arrangement governed by statute, such as a conditional fee agreement

- information about any fee sharing or other financial benefit that the firm will receive as a benefit of accepting their instructions. Where we receive a financial benefit as a result of acting for a client, we will either:

    (a) pay it to the client
    (b) offset it against our fees or
    (c) keep it but only where we can justify keeping it, if we have told the client the amount of the benefit and the client has agreed that we can keep it

- if charging rates are likely to increase

- billing arrangements including frequency of bills, any requirement to make payment on account of costs and, where applicable, the circumstances where the firm is entitled to exercise a lien for unpaid costs and

- where applicable, the fact that the client is entitled to complain about their bills; that they may also have a right to object to the bill by making a complaint to the Legal Ombudsman and/or by applying to the court for an assessment of the bill under Part III of the Solicitors' Act 1974; and, if all or part of the bill remains unpaid, that the firm may be entitled to charge interest.

Where appropriate, the client is advised at the outset of the case on the best information possible about the total likely cost of the matter (including VAT and disbursements), or, if it is not possible to provide an accurate assessment, the client will be provided with the best estimate available at the time; this may be costs to be incurred up to a particular stage in the process, a maximum cost limit or within a range of costs. In addition, where appropriate, the likely costs for the different options are provided in writing to enable the client to make an informed choice. This information will be provided as near to the beginning of the case as practical and where possible in the initial client care letter. The client will be advised if the charging rates are to be increased.

These estimates are refined as the case progresses and the client is advised of the best way forward.

There are cases where these requirements need not be applied where there is no possible costs liability such as non-family civil controlled work, non-contributory criminal cases and non-means non-merits childcare cases.

If, on an individual case, the fee earner decides not to provide costs information until later in the case or not at all, for example as a result of an instance where the client may be particularly confused,

distressed or unable to understand fully, the fee earner must justify this decision in writing on the file.

Fee earners must inform the client without delay if an adverse costs order is made against the firm in the course of the client's case.

7.4. Strategies and Case/Project Plans

In complex cases as defined below, a case plan/project plan is prepared and agreed with the client. The plan will either be discussed with the client at the initial interview and then recorded in an attendance note or minutes, or agreed with the client later after consideration of the initial interview and, in some cases, further interviews.

The plan is kept in a prominent place in the file for easy access. It is reviewed periodically, updated as necessary and the client informed about any changes (including costs) in their case.

The definition of a complex case which we use is a case that is defined as one:

- which meets the Legal Aid Agency's definition of a multi-party action or
- which relates to an appeal or proposed appeal to the Supreme Court or
- where the firm's total costs, including disbursements and VAT are likely to exceed £25,000.00 or
- where it is likely to be submitted to the LAA's Exceptional and Complex Cases Unit or Criminal Cases Unit or
- where if a case proceeds to trial, that trial would last for 41 days or longer.

7.5. Progress of the Matter

Where a costs estimate has been given, updated costs information will be confirmed in writing to the client as soon as it becomes clear that the previous estimate is no longer valid but not less than every six months. This information will include the total amount of costs spent to date including VAT and disbursements, a revised estimate of the total likely cost of the case (including likely disbursements), and a reminder of how the statutory charge operates (if applicable).

Clients are updated about how their case is progressing generally, reasons for any lack of progress as well as any changes in the proposed action in writing at appropriate levels, but not less than every six months.

There are key stages when the client should be updated on progress including:

- upon receipt of counsel's or an expert's opinion
- following a conference with counsel
- upon receipt of offers from opponents
- upon reaching a landmark in a pre-action protocol
- before and after court hearings
- upon confirmation of a hearing / conference date and the time
- in respect of Legal Aid decisions/funding
- when a previously agreed timescale needs to change (owing to unforeseen delay) and
- when a court order is issued.

Where applicable and appropriate, we inform the client in writing if the person with conduct of their case changes or there is a change in their status. We also advise clients if the person they should contact in the event of problems with our service changes. In both instances, unless it is deemed inappropriate by our COLP to do so, a reason for the change will be provided to the client.

7.6. End of the Matter

On conclusion of a matter, the fee earner conducts a closing risk assessment in accordance with our Risk Management Procedures.

The fee earner also ensures that the file is passed to our COFA to reconcile the accounts (see Section 4).

Files are reviewed by the fee earner on completion and prior to preparing the closing letter in accordance with the following file closing procedure which includes conducting a review of following areas:

- what information needs to be reported to the client at the outcome of their case and what, if any, further action the client is required to take or the firm will do
- whether the fee earner should conduct a review of the matter in the future and if so, when and why. Any such files requiring review are kept open until the review date, which is diarised as a key date in the Central Diary
- whether the firm is required to report to the client on any outstanding costs which need now to be settled or sums to be paid to the client (in accordance with our Financial File Closing Procedures)
- whether the firm needs to advise the client about our storage and retrieval facilities which are available to clients who wish to store documents and/or property in a secure and safe environment. Where the details of which have already been confirmed to the client at the outset of their matter in our terms and conditions then the fee earner may need only to remind the client of the details and where they can be found
- whether there have been any instructions in relation to the storage arrangements for the client's particular file and whether the firm is required to convey to the client details about how long their file can be stored (which may depend on the legislation that applies to the particular area of work. Guidance can be sought from the firm's supervisors
- whether there will be any costs involved in retrieving the papers and what steps the firm would need to take to do this at any point
- which of the client's documents or property are being returned
- which of the client's documents or property are being stored by the firm.

The fee earner sends to the client a file closing letter which includes, where applicable, information on all of the above matters in addition to:

- a report on the outcome of their case and details of any necessary further action or review

- where applicable, information about the firm's storage and retrieval facilities or a reminder about information previously supplied
- a list of documents which are being returned
- a list of those documents, if any, which are being stored, the manner in which they are to be stored, the storage period and any storage costs
- details of any costs involved in retrieving the papers and what steps the firm would need to take to do this at any point
- details of when the file or papers will be destroyed and
- a report on any outstanding costs which need now to be settled or sums to be paid to the client
- where applicable, drawing the client's attention to HMLR Property Alert Service and other fraud guidance published by HMLR.

Original documents will be sent with the closing letter together with a Client Satisfaction Questionnaire by normal post or recorded delivery, depending on the value and/or confidential nature of the enclosures. If documents are collected in person, the client is asked to show proof of identity and to sign an attendance note to document the receipt by them of the documents. This is then kept on their case file.

We archive and destroy files in accordance with our Archiving, Retention & Destruction Procedures in our **Data Security & Information Governance Manual** taking into account the likelihood of any further or immediate action to be taken.

7.7. Communication with the Client

In line with our Commitment to Quality and Client Care Policy, it is our aim to deliver the highest level of service to clients.

Fee earners should make every effort to communicate with the client regularly.

When responding to client enquiries, all telephone calls from clients should be returned on the same day. Where this is not possible, for instance, a fee earner is out of the office, the person taking the call should give an indication when the fee earner will respond.

All correspondence should be answered within 5 working days.

7.8. Standing Terms of Business

A central record of Standing Terms of Business is maintained for our regular clients. These terms cover the requirements of the SRA's Standards and Regulations as well as other regulatory and statutory requirements and are updated from time to time. These records are reviewed at least annually by the Directors to ensure they are in plain English and are up to date.

When writing to a regular client at the outset of a matter, reference is made to the relevant Terms of Business.

7.9. Consumer Protection - Cancellation of Retainer Contracts

If we have entered into any distance selling arrangements or otherwise agreed the terms of any retainer or entered into contracts with clients, including conditional fee agreements or client care agreements, away from our offices (such as at the client's home), or following discussions that take place away from our offices, we will consider whether Consumer Contracts (Information, Cancellation and Additional Charges) Regulations 2013 apply. These regulations provide for a 14-day period during which the client can cancel their instructions without cost.

If we consider that they do apply, we will provide the client with an appropriate cancellation notice explaining how they may exercise their cancellation rights and include a cancellation form as a detachable slip. This notice will be set out in our client care letter or terms and conditions provided to the client or otherwise confirmed in writing.

We will not undertake any work under these retainers during the 14-day cooling-off period unless the client has expressly requested us to do so in writing.

7.10. Insurance Distribution

We are included on the Professional Firms Register maintained by the Financial Conduct Authority so that we can carry on insurance distribution activity. For our firm, this activity is limited to the advising on or administration of insurance contracts such as those that are required in relation to our conveyancing and litigation practices.

This is purely an ancillary part of our business and is designed to support our clients' needs. For instance, in conveyancing work, clients may encounter a problem that can be overcome by the taking out of a suitable insurance policy such as to protect against a defect in the title to a property. Similarly, in litigation, 'after the event' insurance may be required by a client to protect against the costs the client may incur when making a claim. Should we identify a problem that cannot readily be overcome without taking out such a policy, we will inform clients at the appropriate time and may assist them by referring them to a broker, liaise with a broker or insurer and/or advising them in relation to their obtaining a suitable policy.

If we are requested to recommend an insurer, we advise the client about the range of legal indemnity insurers we have checked before recommending a particular policy and, if it is not on a fair market analysis, we explain the basis upon which the recommendation has been made and will check the suitability of any such policy. If we are requested to assist in the arranging of any insurance on behalf of a client, we will inform the client of all necessary information by means of a written 'demands and needs statement'.

Where we have given a personal recommendation to the client (e.g. advised the client that it is a suitable product), we will, in addition to the statement of the demands and needs, provide a personalised explanation of why a particular contract of insurance would best meet the client's demands and needs.

We also offer advice to our client on the contents of any Insurance Product Information Document (IPID) provided by the insurer.

We have appointed Kuljit Lally, who is our COLP/our Practice Manager/our Principal/a Partner/a Director, to undertake the role of Insurance Distribution Officer (IDO).

They have a key role in our firm for being the point of contact with the SRA and for overseeing our insurance distribution activities.

7.11. Commissioning the Services of Others

We only commission the services of experts, third party suppliers and other contractors where we are satisfied that they take all appropriate steps to ensure that our clients' confidential information will be protected and that they are compliant with the terms of the UK GDPR. We also ensure that where appropriate, we have written agreements in place with them.

Our Outsourcing Policy must be followed whenever any of the firm's functions or activities are outsourced to third party service providers.

Our Contractors Policy must be followed whenever the firm instructs external contractors to undertake works.

We only use experts, counsel or other third-party suppliers when we are confident of their service. All third-party suppliers are evaluated in accordance with our Use of External Suppliers Procedures.

7.12. Releasing Files to a Third Party

Where we are asked to release a casefile to another firm (for instance on transfer of a matter), the fee earner with conduct of the matter will notify our COLP of all requests for the release of a file.

The client will be asked to confirm their approval to the request.

The fee earner will check the suitability of the file for release and ensure that the file is released promptly.

Further information regarding the procedure for processing Subject Access Requests is available in our **Data Security & Information Governance Manual**.

7.13. Complaints Handling

We aim to deal with any complaints promptly, fairly, openly and effectively.

It is the policy of the firm that:

- every complaint made by a client is reported and recorded centrally
- every complaint received is responded to appropriately
- the cause of the problem is identified
- appropriate redress is offered, and

- unsatisfactory procedures are corrected.

Definition of complaint

Our definition of a complaint is:

> "any written or verbal expression of dissatisfaction referred to any person in our organisation by a client".

A complaint can be identified through a letter, telephone call, e-mail, and fax or in the course of a face to face conversation.

A complaint may involve:

- dissatisfaction with the handling of a case
- disappointment with an alleged lack of communication
- frustration with an alleged lack of case progress
- an allegation of discrimination, or
- dissatisfaction with the outcome of the case.

However, issues of a very minor nature, for example, not returning a non-urgent telephone call until the following day will not necessarily need to be recorded as a complaint.

Complaints may be received from other parties who are not our clients. Although we are not obliged to handle these complaints in the same way, we would ordinarily look to respond to them and investigate the complaint in a similar manner and in similar timescales. We will however make the complainant aware that some elements and timings in our complaints handling procedure are aimed at our clients and may not be appropriate and will be adapted accordingly. Depending on who it is who has complained and the nature of the complaint, the complainant will be made aware that they may not have the same recourse to raise issues with the Legal Ombudsman.

Complaints handling information

We inform clients in writing on our website and at the outset of their matter of:

- their right to complain and that the complaint will be dealt with promptly, fairly and free of charge
- how complaints can be made and to whom
- how the complaint will be handled
- in what timescale they will be given an initial and/or substantive response
- their right to complain to the Legal Ombudsman, the time frame for doing so and full details of how to contact the Legal Ombudsman
- the role of the Solicitors Regulation Authority (SRA) and how they may raise concerns about behaviour or ethics to the SRA, the time frame for doing so and full details of how to contact the SRA.

Where the complaint relates to the processing or handling of personal data, there may be additional steps to follow or additional information to disclose. There may also be a need to escalate our standard timescales. In these circumstances, the Complaints Handling Representative must also be mindful of our obligations as a data controller and ensure they follow our Personal Data Complaints Procedure as set out in our **Data Security and Information Governance Manual**.

Complaints Handling Representative

We have appointed Kuljit Lally, who is our COLP, as our Complaints Handling Representative. In her absence or to assist as a deputy, complaints will be handled by Mariyam Ferreira.

They are responsible for:

- recording centrally all complaints received from clients
- identifying the cause of any problem of which the client has complained
- overseeing our investigation and response to any complaint
- offering appropriate redress, where appropriate
- reviewing our complaints and ensuring any unsatisfactory procedures are identified and notified in accordance with our Compliance Policy, and
- ensuring compliance with the requirements of 8.4 and 8.5 of the SRA Code of Conduct for Solicitors.

Handling a complaint

When a client makes a complaint, it is handled in accordance with our complaints handling procedure. This sets out the key stages of the process and all relevant timescales.

Where appropriate, we shall ensure that our procedure is tailored in response to the needs of our individual clients, especially those who are vulnerable.

We report and record every complaint made centrally. All complaints are referred to our Complaints Handling Representative in the first instance, who:

- on receipt of a complaint, within 5 working days of the receipt of complaint in all conveyancing matters, sends the client our standard letter which sets out our complaints handling procedure, outlining the relevant stages and timescales. A copy of this letter is at **Appendix Nineteen**
- reviews the matter with any staff member involved
- identifies the cause of any problems of which the client has complained
- determines what degree of validity the complaint has, and
- decides how the complaint should be resolved.

Any complaints made where our Complaints Handling Representative had conduct of the matter are referred to Mariyam Ferreira.

We are permitted a maximum of eight weeks to investigate, consider and respond fully to the complaint. If for any reason we are unable to resolve the problem within that timeframe or the complaints procedure has otherwise been exhausted and the complaint has not been settled or dealt with to a client's satisfaction, we advise the client in writing of:

- our final position on their complaint
- their right to pass the complaint to the Legal Ombudsman, the time frame for doing so and full details of how to contact the Legal Ombudsman
- the name and website address of an alternative dispute resolution (ADR) approved body which would be competent to deal with the complaint but that we are not compelled and do not agree to use the scheme operated by that body.

If we are able to resolve the complaint, our Complaints Handling Representative will ensure that any redress or compensation offered to the client is provided within the agreed timescale. They will send a final letter outlining the resolution but also making clear that the client may still have the ability to raise the matter with the Legal Ombudsman and reference the time frame for doing so and full details of how to contact the Legal Ombudsman.

Our Complaints Handling Representative will:

- offer the client appropriate redress, and
- recommend amendments to unsatisfactory procedures to our COLP, where appropriate in accordance with our Compliance Policy.

Legal Ombudsman and SRA

Where we are notified that a complaint is made to the Legal Ombudsman or that a report has been made by a client to the SRA, our Complaints Handling Representative will review the matter and oversee our response(s).

Negligence

During a matter, should a fee earner identify any act or omission which could give rise to a claim by them against us, they must refer any such cases to their supervisor for initial advice. If the supervisor agrees that the circumstances of the case could give rise to a claim then the case must be referred immediately to our Complaints Handling Representative who will:

- decide, in conjunction with our insurers, what information should be provided to the client
- determine and oversee any other action as is required.

If during the investigation of a complaint, the Complaints Handling Representative identifies a matter which could give rise to a potential negligence claim or where a client claims financial loss, compensation or threatens legal action, she will decide, in conjunction with our insurers, whether we should continue with this complaints procedure or adopt some other course of action.

Record and Review

Our Complaints Handling Representative has overall responsibility for handling complaints and keeps details of all complaints received in a central record. Copies of any documents/correspondence showing how each complaint is resolved are also retained on the central record.

If, whilst reviewing any particular complaint, our Complaints Handling Representative highlights that there are aspects of our practice that need to be corrected or there are any unsatisfactory procedures requiring amendment, she will in her capacity as our COLP, oversee any unsatisfactory procedures are corrected.

Our Complaints Handling Representative carries out an analysis of the **Central Register of Complaints** annually. Following this review they decide whether any action can be taken to improve our services or if any action is required to ensure ongoing compliance with the requirements of 8.4 and 8.5 of the SRA Code of Conduct for Solicitors. The results of the review (i.e. any trends identified and action proposed) are documented and provided to Key Personnel and will be reviewed by as part of our Annual Review of Risk.

Our Complaints Handling Representative maintains overall responsibility for the operation of this procedure. She will review it annually to verify that it is in effective operation.

7.14. Client Satisfaction

We are keen to get feedback from our clients on the services they receive from our staff. We do this by using a client satisfaction questionnaire that covers whether:

- we are friendly and approachable
- we kept the client informed
- we managed the case in a competent and timely manner
- information and advice were explained satisfactorily to the client.

A copy of the questionnaire used is attached in the **Appendix Twenty**.

A questionnaire is given to every client at the conclusion of their case.

Feedback received via these questionnaires is reviewed as it is received.

As an alternative means to obtaining feedback, we also make use of Google Reviews and ask clients to leave reviews online.

Any feedback that should be handled as a complaint is treated in accordance with our Complaints Procedure above.

Client feedback will also be reviewed annually by our COLP who will record the findings and outcome of the review.

The findings of the questionnaires and online reviews are considered annually by our COLP as part of the business planning process and their annual risk review.

SECTION 8. FILE MANAGEMENT

8.1. Accepting & Declining Instructions

Instructions from new clients or new instructions from existing clients are only accepted where the work falls within one of the areas of work we undertake, and where we have sufficient resources, expertise and capacity to undertake the case and it is in the best interests of the client to do so.

Ultimately, our Directors make the decision over whether we may accept instructions.

A fee earner may be asked to conduct initial enquiries and help assess the risk profile of new instructions.

In particular, the fee earner may conduct enquiries to determine whether:

- there are any particular matter risks of the new potential instruction
- there are any AML or financial sanctions risks
- there is any conflict of interest or concern with regard to confidentiality or disclosure in accordance with our Identification and Management of Conflicts of Interest Procedure
- the client has mental capacity to provide instructions in line with our Vulnerable Clients Policy
- the client's appearance or behaviour cause suspicion of harm, abuse, neglect or exploitation which would require notification in accordance with our Safeguarding Policy
- if the work falls into the areas of work in which our firm offers advice and services and is within our areas of expertise and competence
- there are any reasons why we may not be able to accept instructions to act for a client.

The results of these enquiries will be fed back to those who will make the decision over whether this is an instruction we are able to accept taking into account our current capacity and whether it will be in the client's best interests for us to undertake the work.

Where there are any unusual or high-risk considerations these will be reported to the Risk Manager so that appropriate action may be taken to manage these cases more closely. In these circumstances, our Risk Management Procedures will be followed.

In accordance with our Signposting and Referrals Procedures, where we do not have the capacity to take on the case for a potential client or there is any other reason why we cannot act and a need for a referral has not arisen, they will be signposted to other organisations. Where we are unable to offer assistance to an existing client either on an existing case or on a new case where we hold case information and/or documents that need to be passed on to the new provider, this will trigger a need for a referral.

Declining to act

We will not accept instructions to act for a client and will consider declining existing instructions where:

- the work to be undertaken falls outside of acceptable risk levels in accordance with our Risk Management Policy

- there are reasonable grounds for believing that the instructions are affected by duress or undue influence without satisfying ourselves that they represent the client's wishes

- it is considered that we may not be able to act in the client's best interest

- the client proposes to make a gift of significant value to a member of the firm or their family, unless the client takes independent legal advice

- to act would be a breach of the law or would involve a breach of the SRA's Standards and Regulations

- we, as a firm, lack the expertise to carry out the client's instructions

- as a firm, we do not have the time to devote to the client's instructions

- one of our solicitors or managers or a close relative holds some office or appointment which might lead the client or the general public to infer that they have had some influence over the outcome of the matter, and

- another solicitor has already been instructed in the matter and that other solicitor's retainer has not been terminated.

In our conveyancing department, a list of instructions which we will and will not accept are listed at **Appendix Eight**.

We are likely to have to decline instructions or cease acting for a client where a conflict of interest exists or is likely to exist. This will be considered in accordance with our Identification and Management of Conflict of Interests procedure.

In all cases, if it becomes apparent that a client's case is based on false information and/or they know that what the client is telling them is false, the firm will refuse to act for the client, or, if already acting, decline to act further.

We do not act for a client in circumstances where instructions are given by someone else (except in circumstances where the potential client's friend or relative is able to produce a properly executed Lasting or Enduring Power of Attorney) or by only one client when we are acting jointly for others unless we are satisfied that the person providing the instructions has the authority to do so on behalf of all the clients.

Ceasing to act

During our monitoring of existing matters, it may become apparent that there are good reasons why we may not be able to continue acting on that matter or a new matter. For instance, where:

- we are unable to provide any further help on a current matter
- there has been a breakdown in our professional relationship with the client
- we are unable to assist on an additional legal problem that is outside our area of expertise
- the client or associated individual become a designated person under the UK sanctions legislation or there is an increased sanctions risk that cannot be managed to an acceptable level
- a conflict of interest has arisen, and/or
- there has been another reason why we cannot continue to act for that client such as a breach of our terms and conditions.

We will not cease to act for a client without good reason and without providing reasonable notice.

If we have to cease acting for a client, we explain to them their possible options for pursuing their case.

Decision making

Where a fee earner considers there may be circumstances where the firm should decline/cease to act for a client, they should speak to their supervisor, who will decide the appropriate action to take. When deciding whether to act, or terminate instructions, we will ensure that we comply with the law and the SRA's Standards and Regulations.

Where a need for a referral arises, this will be undertaken in accordance with our Referrals Procedure.

Review

Mariyam Ferreira is in charge of our accepting & declining instructions procedures. They review the procedures at least annually to ensure that they remain effective.

8.2. File Allocation

Our Directors are responsible for allocating casework to individual fee earners.

Mariyam Ferreira is responsible for the allocation of the new conveyancing instructions to conveyancers.

Where any fee earner receive a direct referral, or are instructed directly by a client, they must assess the risk of the transaction both in terms of their own competency and also from an anti-money laundering and fraud prevention viewpoint.

Fee earners will be allocated new instructions and/or, where necessary, the reallocation of existing instructions taking into account:

- the role and function specified by the fee earner's Job Description and Person Specification
- the fee earner's individual aptitude, skills, experience and competence
- the risk profile of the client and/or matter, and
- the fee earner's available time and current caseload.

The general rule is that the first fee earner dealing with the matter carries out day to day work on the file and is the main point of contact for the client. Where different, the allocated Supervisor retains overall responsibility for quality control and case progression.

8.3. Identification and Management of Conflict of Interests

In all circumstances, our Conflict of Interest Policy must be adhered to in all cases.

Initial checks

When a case is opened, our firm's systematic procedure for undertaking conflicts of interest checks includes:

- undertaking a conflict of interest check on all relevant names including names of other parties in a case or transaction. This is done primarily by cross-checking our client database for names that match the description of the party or parties with whom there may a conflict of interest. Where the search is undertaken by support staff, it is each fee earner's responsibility for listing the names to be searched and for ensuring that the checks are conducted thoroughly, and

- undertaking a conflict of check against the firm's **Register of Other Business Interests**.

The date the checks are carried out and the results of the search are then recorded in the relevant section of our file opening checklist. Any positive results or issues identified are reported to our COLP who will decide if the instructions can be accepted and/or if further action is required.

Checks throughout a matter

Throughout the progress of a case, fee earners must remain alert to the possibility that a conflict of interest may subsequently arise even where one was not evident at the outset. Fee earners are responsible for conducting additional conflict checks during the course of dealing on a matter where any new parties become involved in a matter, case or transaction and recording the results of those checks in accordance with this procedure.

Assessing potential conflict

We train all staff to identify and assess potential conflicts of interest. We also provide training on commonly occurring conflicts of interest together with guidance on how to manage these situations during their induction. This will be reviewed by the firm in light of any new external guidance or rules, such as within the SRA's Standards and Regulations. Where appropriate, further refresher training will be provided.

The following are examples when conflicts can occur:

Subject category	Type of conflict that may arise	How this is managed
Civil & Commercial Litigation	You represent the wife in a matter involving her husband and the husband approaches you to act on his behalf on a different matter related to his business.	Any such scenario must be referred to our COLP to consider the potential conflict.
Commercial Property & Conveyancing (residential) (Further advice on identifying conveyancing conflicts are set out in our Conveyancing	Where we are acting for both a buyer and a lender and we have information about the mortgage application that is relevant to the lender but the buyer does not want us to tell the lender.	We have an obligation to disclose relevant information to the lender but this will generally be overridden by our duty of confidentiality to the buyer and we should inform the lender that we are unable to continue to act for them due to a conflict of interest. Our duty of confidentiality to the buyer will generally take priority unless we are satisfied

Subject category	Type of conflict that may arise	How this is managed
Risk and Conflicts Guidance as set out in **Appendix Eight**)		that there is good reason for us to believe that they are using us to further a fraud or other criminal purpose, e.g. purporting to commit mortgage fraud by deliberately making misrepresentations on their mortgage application. For further guidance on how decisions are made where a conflict arises see our Conveyancing Risk and Conflicts Guidance in **Appendix Eight**.
Family	You act for the wife in a matter related to their divorce and the husband approaches you to act on his behalf on a matter related to his business.	The fee earner refers the matter to their supervisor who decides whether the firm is able to continue acting for one party, and if so, which party that should be. The other party is referred to another supplier. Alternatively, the supervisor may decide that we have to cease acting for both parties.
Immigration	Where different members of the same family are presenting inconsistent facts in support of an application for leave to remain or for asylum.	The fee earner refers the matter to their supervisor who decides whether the firm is able to continue acting for one party, and if so which party that should be. The other party is referred to another supplier. Alternatively, the supervisor may decide that we have to cease acting for both parties.
Landlord & Tenant – Residential	Where there are proceedings against joint tenants for rent arrears; one party has left and wants to give up the tenancy and the other wants to keep it.	The fee earner refers the matter to their supervisor who decides whether the firm is able to continue acting for one party, and if so which party that should be. The other party is referred to another supplier. Alternatively, the supervisor may decide that we have to cease acting for both parties.
Personal Injury	We may have acted for the other party or a witness involved in the case.	A conflict check will be carried out at the time that we are instructed by the client, before any further work is carried out. Any potential conflict scenario must be referred to our COLP to consider.
Wills & Probate	Where two lay executors have conflicting views and provide conflicting instructions.	The fee earner refers the matter to their supervisor who decides whether the firm is able to continue acting for one party, and if so which party that should be. Each are also advised to seek independent legal advice.

Managing a potential or actual Conflict

In any cases where a member of staff considers that there may be an actual or significant risk of conflict of interest, they must notify their supervisor and report the matter to our COLP. They cannot accept the instructions or continue to act unless this has been approved by our COLP and recorded in our **Central Register of Conflicts**.

It is the responsibility of our COLP to consider all circumstances and decide if there is a conflict and/or the instructions can be accepted and if further action is required. They will advise as to whether the firm may continue to act and/or whether other steps must be followed and will oversee the recording of relevant details of the conflict in our **Central Register of Conflicts**.

In all cases, they will assess whether:

- there is a conflict of interest or significant risk of conflict
- there are any issues regarding our duties of confidentiality and disclosure, and/or
- our ability to act in the best interests of the client(s), is impaired by:
  - any financial interest
  - a personal relationship
  - the appointment of a member of staff or their family to public office
  - commercial relationships
  - our employment of any staff member, or
  - where the client notifies us of their intention to make a claim or if we discover an act or omission which might give rise to a claim.

Whenever a potential conflict of interest arises and/or any issues regarding our duties of confidentiality and disclosure, they will assess all the relevant circumstances, including:

- if there is a conflict or any issues with regard to confidentiality or disclosure, whether:
  - we are prohibited from acting
  - we able to act in accordance with the SRA Code of Conduct for Solicitors in terms, for instance, whether an exception applies
  - what procedural, safeguarding or risk management steps may be needed to ensure compliance with the SRA Code of Conduct for Solicitors
- there are any other relevant circumstances, including whether:
  - the clients' interests are different
  - our ability to give independent advice to the clients may be fettered
  - there is a need to negotiate between the clients
  - there is an imbalance in bargaining power between the clients, and/or
  - any client is vulnerable.

Where they decide that a conflict of interest does exist or there is a significant risk of a conflict existing or there is any other confidentiality or disclosure issue relating to our ability to act for them or continue to act for them, our COLP will:

- report this immediately to all clients affected by the conflict
- advise fee earners on whether the firm may act and/or continue to act
- advise fee earners on whether other steps must be followed
- recording of relevant details of the conflict in our **Central Register of Conflicts**.

Conveyancing

For Conveyancing work, we also provide additional guidance on the assessment of and management of conflicts in our Conveyancing Risk and Conflicts Guidance as set out in **Appendix Eight**.

Review

Our COLP will review this **Central Register of Conflicts** at least annually as part of our Annual Review of Risk.

8.4. File Management

Opening Matters

Where it has been agreed that the firm will accept the instruction, the allocated fee earner will:

- ensure the matter has been allocated a Matter Number
- ensure the matter is recorded as a linked file, where applicable
- ensure the matter is added to our case management system as an open case
- record file opening information.

The Matter Number together with the fee earner reference will be quoted on all correspondence and other documentation created by the firm in relation to the case. Relevant correspondence will be kept on the file correspondence clip.

If more than a single file is created or if the file is linked to another file(s), all the files are marked clearly with the file name and Matter Number and there must be a sequential numbering system to show the number of related files for any matter.

Conveyancing

For conveyancing matters, we follow a specific file management process in accordance with the CQS. The details are set out in **Appendix Eight**.

Lists of Open and closed Matters

A list of open and closed matters is maintained within our case management system.

The case management system allows for reports to be printed which list open and closed matters, identifies all matters for a single client and linked files where relevant and all files relating to a particular funding stream.

Identifying and tracing documents

All papers, documents and items in relation to client work must be traceable within the office by being stored on the casefile at all times or stored alongside.

All exhibits, x-rays or other bulky documents or materials (including files, deeds, wills or other items related to a matter) that will not fit into the casefile are clearly marked with the Matter Number and

stored in a designated cabinet or storage area for each fee earner.

For electronic paperless matters, all electronic documents should be saved to the relevant matter on the CMS with the date of the document and an individual description to ensure that the content may be easily identifiable from the file list and without having to open the file to determine the nature of its contents.

The location of all items and papers which for any reason are not kept in the file are clearly recorded on that file, e.g. papers sent to Counsel, to a court or the Legal Aid Agency.

All advice given to a client is recorded in the casefile.

All incoming or outgoing emails that relate to a client's case should be saved onto the relevant case file in accordance with our Email Policy in our **Data Security & Information Governance Manual**. Staff members should always ensure that a copy is printed and placed on the casefile (either in paper form or attached and referenced to the relevant casefile in the case management system where electronic).

Status and Key information

For effective supervision or to ensure another fee earner can easily determine the status of the matter and any action to be taken in the fee earner's absence, all matter files must be capable of being 'picked-up' by a supervisor or colleague. Similarly, there may be occasions when those that are external to the firm, such as locums, insurers, auditors or our regulators may need to review a file and understand the strategy of the matter and what has taken place and may not have the benefit of being able to seek further information from the firm.

On any matter, the supervisor or another fee earner should be able to pick up the casefile and understand, within a couple of minutes:

- the objective
- strategy for achieving that objective
- the current position
- what level of progress has been made to date, and
- what remains to be done.

To ensure this is possible, as a minimum, all electronic or paper files must:

- be maintained in a neat and tidy manner
- reference all relevant papers, documents and materials, and
- have a record of all relevant information and summary of progress.

In particular, files are ordered as follows:

- a summary sheet/file opening sheet is attached to the file cover and kept up to date with key information including key dates, contact details and important information about the matter
- correspondence is filed in reverse chronological order (with the latest correspondence showing first)
- other documents such as exhibits, papers sent to counsel etc. are identified by clear marking with the Matter Number and kept as a separate bundle within the file (or if maintained elsewhere, the location of those documents is recorded on the file – see above)

- in the case of files with a large number of documents (such as those with trial bundles), a listing of the documentation is recommended.

The fee earner should also ensure that the casefile and/or the case management system records a summary of the steps taken, dates tasks completed and tasks remaining before the matter concludes. This may be by means, as appropriate to the matter, of:

- a progress chart
- a log of action, and/or
- checklist.

Safeguarding the confidentiality of matter files

We have systems and controls in place to safeguard the confidentiality of matter files and mitigate risks to client's Personal Data and other client information. These include policies and procedures designed to ensure that client data is secure and kept confidential. These are more particularly set out in our **Data Security & Information Governance Manual**.

Files are kept in storage for a minimum period of six years in accordance with our Archiving, Retention & Destruction Procedures as set out in our **Data Security & Information Governance Manual**.

8.5. Key Dates

It is the responsibility of the fee earner to ensure that all key dates relating to the case are entered into the firm's central diary as soon as those dates become known to the fee earner. In addition, the fee earner must record any key dates on the case file and any subsequent key dates during the progress of the case.

A key date is defined as a 'date which if missed, could result in an allegation of negligence made against us.' Examples of key dates include:

- court attendance or tribunal hearing dates
- deadlines to lodge appeals and
- legal limitation dates.

In addition, the following table highlights some of the key dates for each department:

Department	Key dates
Civil & Commercial Litigation	• Court Directions • Court Hearings
Conveyancing & Commercial Property	• Exchange of Contracts • Completion Dates • Payment of SDLT within 14 days of the effective transaction date • Registration at the Land Registry within the priority period of an OS1 and OS2 search
Family	• Court dates when need to file evidence or applications
Immigration	• Hearing Dates at the Tribunals • Deadlines to Lodge Appeal Documents with the Home Office and/or Tribunals

Department	Key dates
Landlord & Tenant – Residential	• Date for serving Notices • Court dates
Personal Injury	• Limitation Dates • Court Directions • Court Hearings
Wills & Probate	• Court attendance or tribunal hearing dates • Deadlines to lodge appeals • Legal limitation dates

Our supervisors are responsible for monitoring the recording of key dates. This is done as part of the independent file review process by checking a sample of key dates contained in the casefiles against the central diary.

Key dates will be monitored centrally in our central diary. Details of the manner in which our central diary is maintained is set out at Section 3.7.

8.6. Undertakings

An undertaking is a commitment by a solicitor to do something and, as such, it can be enforced against the solicitor by the courts. Failure to comply with an undertaking can also be professional misconduct leading to disciplinary action by the SRA or Solicitors Disciplinary Tribunal.

Therefore, the giving of an undertaking is carefully controlled within the firm.

Distinguishing undertakings from non-enforceable promises

An undertaking is defined as:

- a statement, given orally or in writing (whether or not it includes the word 'undertake' or 'undertaking')
- to someone who reasonably places reliance on it, and
- that the solicitor, our firm or a third party will do something or cause something to be done, or refrain from doing something.

Not every statement of intent or promise made by a solicitor will be an undertaking. For instance, a promise to return a telephone call would unlikely be regarded as an enforceable undertaking.

In the vast majority of cases, it will be obvious whether an undertaking has been given but in some cases it may be difficult to differentiate between an enforceable undertaking and a simple statement of intent or promise. If a staff member is unsure as to whether a statement could give rise to an enforceable undertaking, they must seek instruction from our COLP.

Who may give undertakings?

Our general policy is that enforceable undertakings may only be given in exceptional circumstances, where absolutely required and only by a Director. All such undertakings must be recorded centrally in accordance with the procedure below.

In our conveyancing practice, which involves numerous implied undertakings, it would be impractical for every implied undertaking to have to be approved and centrally recorded in this manner. Therefore, fee earners may give undertakings implied by the adoption of the Law Society's formulae for exchange of contracts and the Law Society's code for completion by post. Other non-implied undertakings as well as those routinely given to discharge mortgages by use of the completion Information and Undertakings Form (TA13) should be signed by a Director or the Senior Conveyancing Solicitor conducting the matter.

Where a routine undertaking is to be given, there must be a clear record on a prominent place in the casefile of:

- the nature of the undertaking
- the date given
- who gave the undertaking
- the date the undertaking was discharged.

Other financial and non-standard/routine undertakings must always be approved and recorded centrally in in accordance with the procedure below.

Compliance with this will be monitored as part of the closing file risk assessment. The giving and discharging of routine undertakings in such matters will be monitored routinely by our SRO.

Each staff member is responsible for managing his or her own compliance and for ensuring that no breaches of compliance result from their actions. Failure to comply with our Compliance Plan or any of our policies or procedures by any member of staff may invoke our Disciplinary Procedure and may result in disciplinary proceedings.

Recording enforceable undertakings

Where another solicitor from outside our firm has provided a financial undertaking to us, this must be reported to our COFA to monitor and ensure it is later discharged.

Where it becomes necessary for one of our solicitors to give an enforceable and non-routine undertaking in any matter, it should be noted that, in light of the risks to our practice and the individual solicitors:

- any undertaking must be drafted and given in accordance with the current Law Society's Practice Guidance on Professional Undertakings: https://www.lawsociety.org.uk/topics/regulation/professional-undertakings

- the undertaking must be recorded on a prominent place in the casefile:

    - the nature of the undertaking given on a case
    - the date the undertaking was given
    - who gave the undertaking
    - the date the undertaking is to be reviewed and/or discharged, if known
    - confirmation, in due course, that the undertaking has been discharged

- a copy of the undertaking given must also be entered into the firm's **Central Register of Undertakings**

- details of all undertakings are recorded on our case management system (which will automatically prompt the firm for an update as part of its monitoring system).

Compliance with this procedure will be monitored as part of the closing file risk assessment. Each staff member is responsible for managing his or her own compliance and for ensuring that no breaches of compliance result from their actions. In accordance with our Compliance Policy, failure to comply with this Procedure by any member of staff may invoke our Disciplinary Procedure and may result in disciplinary proceedings.

The discharge of the undertaking will be monitored by our COLP (and, in relation to any financial undertaking also by our COFA) and recorded in the firm's **Central Register of Undertakings**. Any financial undertakings relevant to our conveyancing practice will also be monitored by our SRO.

Our COLP reviews the Undertakings Register each month to ensure that undertakings are discharged promptly.

8.7. Use of External Suppliers

It is the responsibility of all fee earners to ensure that counsel, expert witnesses and other external advisers who are involved in the delivery of legal services are instructed properly and in accordance with the procedures set out below and in accordance with our Equality & Diversity Policy.

We maintain **Central Registers of Approved Experts and Counsel**, which contain the names of those who have been assessed by the firm as being capable of meeting both our and our clients' requirements.

Data Security

External suppliers to whom we transfer client or personnel data, including expert witnesses and other external advisers to whom client or personnel data is transferred, will likely be a Data Processor (as defined under the relevant data protection legislation).

Regulatory guidance suggests that Counsel are not regarded as data processors and so these procedures do not need to be applied to transfers of data to Counsel. They may also be disregarded for transfers to registered medical practitioners who are also regulated by their relevant Regulatory Authority.

Prior to the transfer of data to any Data Processors (other than in the case of transfers of data to counsel and registered medical practitioners), a due diligence exercise must be carried out in accordance with our Transfer of Data to Third Parties Policy as set out in our **Data Security & Information Governance Manual**.

Choosing External Suppliers

Unless there are exceptional circumstances, external suppliers are selected on the basis of objective assessment.

Suppliers are chosen to be included on the firm's approved lists because they satisfy the following selection criteria:

- quality of service
- cost or value for money
- speed of response
- expertise
- the fact that they too hold a relevant quality standard, if applicable (such as Lexcel or the Specialist Quality Mark).

When considering the use of suppliers, reasonable steps must be taken to ensure the supplier complies with the Equality Act 2010. The holding of a relevant quality standard by a supplier may indicate their maintenance of appropriate equality and diversity policies of equivalent standard to our own. However, where a supplier does not maintain a relevant quality standard, or where we identify concerns that the supplier does not maintain appropriate equality and diversity policies, further enquiries must be made to provide reassurance that their activities are in compliance with the Equality Act 2010. Further enquiries may include:

- receipt and evaluation of the supplier's equality and diversity policies
- receipt of written confirmation from the supplier that appropriate equality and diversity policies are in place and adhered to.

Our COLP may exercise their discretion to waive the above further enquiries where this is considered appropriate and justified on an individual basis. Written confirmation of the reason for this exception should be recorded within our **Central Registers of Approved Experts and Counsel**.

We may pause the allocation of any new instructions to any supplier until we are satisfied that appropriate equality and diversity policies are in place and adhered to by the supplier. Where any concerns remain, the supplier will be removed from the firm's approved lists.

As part of the selection process, we also consider:

- data security arrangements (see above)
- whether they have been recommended by another organisation, but only where we are assured that this organisation has already applied objective selection criteria.

Only those suppliers included on the lists may be instructed by fee earners, except in exceptional circumstances, such as where:

- a new supplier is required on a one-off occasion (e.g. due to the nature of the type of report needed), or
- the brief is passed on to a new barrister within chambers (e.g. for urgency).

Where this happens, a note of the circumstances must be recorded in the file.

Consultation with client

The fee earner with conduct of a matter will consult with the client about the use and, where appropriate, the selection of the expert and record this on the case file.

The client is made aware, in advance of their instruction, of:

- the name and status of the person being instructed,

- why they are being instructed,
- how long they may take to respond, and
- any fees that the expert will charge the client as a result of being instructed.

Briefs and instructions

Any instructions given to counsel, expert or other supplier must clearly describe what is required of them, including, as appropriate:

- an outline and history of the case
- the points on which advice or a report is required or details of the service to be provided
- the documents to be drafted
- details relating to the payment of fees
- the timeframe within which a response is required
- any limitations on the use of the data being provided to them (if relevant).

Evaluation of performances/opinion or reports

When an opinion or report of the expert or Counsel has been received or any performance of the expert or Counsel is observed (e.g. in conference or court), an evaluation is undertaken to ensure that:

- the quality was expected
- there was value for money
- they adequately provided the information sought,
- met expected service levels and/or,
- where relevant, comply with the rules of court and any court orders.

Fee earners are recommended to use our third-party evaluation checklist (at **Appendix Twenty One**) or, alternatively, include a file note on the casefile to document their findings.

In accordance with our Modern Slavery Policy, all staff members should remain alert to any suspicions of incidents of harm, abuse, neglect or exploitation or any similar concerns about direct activities of any suppliers or contractors or other third parties within the extended supply chain. We may terminate a supply arrangement at any time should any instances of modern slavery come to light.

Findings and updates to approved lists

Any adverse findings are detailed in the firm's **Central Registers of Approved Experts and Counsel**.

Adverse findings for barristers who hold a Quality Mark will also be sent to the individual barrister concerned.

Where we have relied on a recommendation by another organisation, we will provide them with an evaluation of the service received in every instance (whether this is positive or shows adverse findings).

If Counsel, expert or other supplier has not been used and approved before, then their performance will be monitored by the fee earner and, if shown to be satisfactory, a note recording this will be filed into the **Central Registers of Approved Experts and Counsel** and the supplier being added to the approved list. Similarly, if they are not approved or there were adverse findings then this will also be documented in the **Central Registers of Approved Experts and Counsel** so that comments may be considered by fee earners who may consider selecting them in the future.

Interpreters/Translators

Unless there are exceptional circumstances, we may only instruct an individual to provide interpretation services in connection with publicly funded work where such individual holds at least one of the relevant qualifications as approved by the Legal Aid Agency.

Where a fee earner determines that there are exceptional circumstances to justify the selection of a non-qualified interpreter, they produce a file note to document the suitability of the interpreter's level of experience and expertise as an interpreter of the language required and set out the exceptional circumstances which exist and a clear explanation as to why it was necessary and appropriate in the circumstances for an alternative non-qualified interpreter to be selected.

Whilst not essential, fee earners may wish to make use of the firm's template Interpreter/Translator File Note to document their qualification and, if non-qualified, the interpreter/translator's experience and any exceptional circumstances.

Fees

Payment of fees to the expert should be made within 30 days of receipt of a correct and valid invoice.

SECTION 9. THIRD PARTIES & REFERRALS

9.1. Third Party Arrangements

We do have fee sharing or other commercial arrangements with third parties. Details of which are maintained by our COLP.

9.2. Signposting

Staff members and in particular those working on reception signpost anyone whom the firm cannot assist to another provider. This may, for example, be because:

- the person's problem is outside the firm's areas of expertise
- the firm has insufficient capacity to deal with the problem
- it may be more suitable, in view of the needs of the person, for them to get assistance from another organisation.

Information

Members of the public who visit, phone or email the firm with cases that the firm cannot take on are provided with:

- the helpline number for Civil Legal Advice: 0345 345 4 345 (where public funded civil services are required)
- details about how to access the Find a Legal Advisor directory online at https://find-legal-advice.justice.gov.uk and/or
- a list of local solicitors and advice agencies offering services in the relevant area of law as appropriate to their enquiry.

Where necessary, staff members provide direct assistance to members of the public and particularly when, for example, the person is very distressed, has specific needs (such as learning or physical disabilities) or where there are any other issues that make it difficult for the client to make contact with the next organisation.

9.3. Referrals

The need for referral arises when we are unable to offer assistance to an existing client and we hold case information and/or documents that need to be passed on to the new provider. Circumstances where this could apply include where we are unable to:

- provide any further help on a current matter
- assist on an additional legal problem that is outside our area of expertise or
- where a conflict of interest has arisen.

This procedure does not cover internal referral which happens as and when necessary to ensure clients are advised by the most suitable member of staff, given the nature of their problem.

Referrals by the firm are made in the best interest of the client without compromising our independence.

Fee earners explain to the client:

- their role in recommending suitable alternative providers
- what service the client can expect from the new service provider
- any cost implications, i.e. the type of costs the client might incur e.g. a one-off court fee; fees charged at an hourly rate, an indemnity premium, or legal aid contribution where eligible (this information is noted on the client's file) and
- any financial or other interest we have in referring the client to another person/business.

When determining which service provider to refer the client on to, factors which we need to consider include:

- the category of law or nature of query
- funding or cost implications and/or
- access issues and language requirements.

We use the Find a Legal Advisor directory online at to assist the client in selecting an appropriate organisation: https://find-legal-advice.justice.gov.uk.

Consideration is primarily given to suppliers who maintain a Quality Mark. When it is necessary to refer to suppliers without a Quality Mark, the fee earner will discuss the justification for making the decision to refer with the client and record the relevant details on the casefile/our Referral Form (a copy of which is at **Appendix Twenty Two**).

The fee earner records the client's consent to authorise the transfer of information regarding their case on the Referral Form. The fee earner will then forward the client's details to the new service provider together with information about the advice or assistance already given (including details of any limitation dates, deadlines or where action is needed quickly) and any relevant documents.

A record of the referral is kept in the client's casefile and a copy held in our central referral folder.

Fee earners also record those instances when no suitable alternative provider can be found, the subject matter and what (if anything) is done to progress the client's case further.

The referral record is kept as confidentially as all other case details in accordance with our Confidentiality Policy.

9.4. Recording Client Feedback

We record any feedback given by the client about the service provided by the new service provider on the referral record.

9.5. Annual Review of Referral Records

Our COLP carries out an annual review of referral records (including records of instances where no suitable service provider could be found) and considers whether there are any implications for the firm's Business Plan e.g. as regards to services that we offer now or would like to offer in the future. The results are fed back to our COLP and reviewed by them as part of their annual risk review.