



**Agreed Liaison Principles  
(Housing Benefit/Council Tax Benefit)**

Agreement between

..... Local Authority

and

The Pension Service HB/CTB Liaison Manager

2006-2008



## **Contents**

Contents	Page 2
Sign Up	Page 3
Introduction	Page 4
Principles	Page 5
Annex A	Page 6
Annex B	Page 7



**Sign-Up**

Agreement to attached Liaison Principles 2006-08.

Signed on behalf of

Local Authority

Signature.....

Date.....

## **Introduction**

Due to transformation of business within The Pension Service and the need to move Local Authority caseloads between Pension Centres in the period 2005-2008 (sometimes more than once) it has been agreed to suspend the formal SLA arrangements between Pension Centres and their corresponding Local Authorities until steady state is reached in 2008. Failure to take this decision would have meant some Local Authorities having to sign up to several SLAs in the one year with different Pension Centres.

Instead, Pension Centre Managers and Local Authority Managers are being asked to agree a set of Liaison Principles that will be adhered to by both parties with The Pension Service HB/CTB Liaison Manager.

From a Local Authority perspective signing up to these principles will allow the agreement to be transportable between Pension Centres and negate the need for re-signing on the movement of Local Authority caseloads. On movement between Pension Centres all that will be required is to amend Annex A (Schedule of meetings/ Details of Nominated Officer contact points).

These arrangements will allow the good practices that have been built in many parts of our business to continue and improve until more formal arrangements can be re-established in 2008.

# Principles

1. I will confirm that processes are in place for the Local Authority to process the 3-page HB/CTB Claim Form
2. I will confirm that Pension Centre procedure in relation to customers' identity and National Insurance Number comply with the standards (see Guidance and Good Practice Handbook)
3. I will confirm that Pension Centres comply with the guidance in relation to tracing of National Insurance Numbers.
4. I agree to review (6-monthly) how we interlink with our opposite numbers in terms of clearing enquiries, resolving difficulties and sharing good practice.
5. I agree to examine our end-to-end process with our opposite numbers from a Customer Experience perspective to identify areas/actions for improvement (minimum annually).
6. I agree to identify business trends and to make recommendations for actions/improvements.
7. I agree to keep liaison arrangements under review and to keep nominated contact officer details up to date (minimum review 6-monthly).
8. I agree to publish a schedule of face-to-face meetings at Annex A of this document (minimum requirement 6-monthly)
9. I agree to comply with the Procedural Requirements set out in Guidance and Good Practice Handbook.
10. I agree to review the impact of applying these principles with our opposite number in line with the draft "End of Year Certificate" at Annex B (March each year).
11. I agree to forward the completed End of Year Certificate to the appropriate Senior Manager.
12. I agree to abide by the Disagreements Procedures outlined in the Guidance and Good Practice Handbook.
13. I agree to keep my opposite number apprised of migration plans and any changes in relation to Post Code moves.

## **Annex A**

1. Identity details and telephone contact numbers/email addresses of Pension Service/LA Nominated Officers

2. Schedule of Meetings

## End of Year Certificate

Date of Annual Review .....

1. We confirm that processes are in place for the LA to process the 3-page HB/CTB Claim Forms  
Agree/Disagree\*
2. We confirm that the Pension Centre's procedures in relation to customer identity and NINo comply with the standards laid down in the Guidance and Good Practice Handbook.  
Agree/Disagree\*
3. We confirm that the Pension Centre complies with the guidance in relation to tracing of NINOs.  
Agree/Disagree\*
4. We confirm that we have reviewed our interlink arrangements and that any good practices have been identified.  
Agree/Disagree\*
5. We confirm that we have examined our end-to-end processes and have identified areas/actions for improvement (attach details of review plus agreed actions on a separate sheet)  
Agree/Disagree\*
6. We have reviewed our business trends and have identified any recommendations/actions (recommendations/actions to be recorded on separate sheet)  
Agree/Disagree\*
7. We have reviewed our liaison arrangements and confirm that our contact arrangements are being maintained and that our Nominated Officer details are up-to-date  
Agree/Disagree\*
8. We have complied with minimum requirements to meet face-to-face on a 6-monthly basis.  
Agree/Disagree\*
9. We have complied with the Procedural Requirements set out in the SLA.  
Agree/Disagree\*

Signed:.....Manager  
Pension Centre

Signed:..... Manager  
Local Authority

*(\* Delete as appropriate - if there is disagreement, please provide details and any remedial action proposed or taken to resolve)*

We have identified the following Good Practices that may assist other areas of the business: (please describe)