



# Ongoing Competence Code – CLC Practices

## Frequently Asked Questions:

Last updated: March 2025 – still in draft as under consultation.

**These FAQs are based on our proposed Code, and are subject to change after the public consultation closes.**

### General questions

**1. Why change from 'Continuing Professional Development' (CPD) to Ongoing Competence?**

We have renamed our 'Continuing Professional Development' regime to 'Ongoing Competence' to align with terminology now used by the sector, including the Legal Services Board.

**2. What are the key differences between the CPD Code and Framework and the Ongoing Competence Code and Toolkit?**

We have:

- replaced the hourly-based requirement with an activity-based requirement (which is now standardised for all CLC Lawyers), of which a set number must be assessed.
- implemented mandatory 'Core Topics' and non-mandatory 'Suggested Topics' for CLC Lawyers; and now require both CLC Lawyers and Practices to categorise all recorded activity into those Topics, as well as assign a standardised 'Impact statement' (based on LSB Ongoing Competence Outcomes) to link the activity to the outcome (i.e. how the activity has helped your practice).
- introduced a standardised annual reporting requirement for CLC Lawyers and Practices (who must report on the ongoing competence activity of their Key Compliance Personnel – CLC Registered Managers, Head of Legal Practice (HoLP), Head of Finance and Administration (HoFA), and Money Laundering Reporting Officer (MLRO). Reporting in a standardised way will help the CLC to be a data-driven, risk- and evidence-based regulator, which is able to share helpful insight and

learning with the sector.

**3. Who do the requirements in this Code apply to?**

Both CLC lawyers and Practices must comply with this code. There are separate specific requirements for CLC lawyers and CLC Practices, and the proposed Ongoing Competence Toolkit will provide more detail about certain elements of the regime.

**4. Why is the Ongoing Competence's cycle the same as the licensing year?**

Feedback gathered by consultation and engagement work when developing the Code strongly supported using existing cycles for simplicity.

**5. In summary, as a Practice, what do we need to do?**

You will need to:

- nominate a reporting officer.
- plan and undertake appropriate educational, training and/or learning activities to maintain the professional and occupational knowledge, skills and behaviour of your Key Compliance Personnel in keeping with the practice's professional responsibilities (including breadth of legal advice, supervisory responsibilities and risk mitigations).
  - To do this, you should consider the risks and issues facing the practice and determine the ongoing competence activities your key compliance personnel should undertake to mitigate those risks/issues.
- annually report to the CLC about their activity in a format which the CLC sets (called the ROCR).

**6. Who are the 'Key Compliance Personnel'?**

CLC Registered Managers, Head of Legal Practice (HoLP), Head of Finance and Administration (HoFA), and Money Laundering Reporting Officer (MLRO).

**7. Will the CLC provide a ROCR template in advance?**

Yes, whilst we envisage that you will be able to submit your information through an online facility, we will also provide a copy of the ROCR template in advance so that you are aware of the information you must report on.

You should continue to save or record any evidence digitally, so it can be easily uploaded to the online platform.

**8. What type of information will be requested as part of the ROCR?**

- As we already know that many practices undertake risk assessments to inform their learning and development plans, the template is envisaged to request information on the **risks and issues** identified by the practice related to the Key Compliance Personnel which the ongoing competence activity addresses.
- We are planning on asking practices to select an **impact statement** for each activity. These have been introduced to ensure that our Regulated

Community understands and reflects on the reason behind (and benefits to) completing specific ongoing competence activities. They were created to broadly align with the themes from the LSB's '[Ongoing Competence: call for evidence themes and summary of evidence](#)' published February 2021. Should the activity cover more than one impact, you will be asked to select the statement that is most applicable.

- We are also planning to ask Practices to consider the **effectiveness of the training**, in case they decide that further activity is required to manage the risk/issues that were identified. We are not expecting all training to resolve risks and issues, but it is a useful indicator of a practice's approach to risk management and may help mitigate risk.

**9. I've heard the first year is intended to be a pilot? What does that mean?**

In order to support Practices to familiarise themselves with the new Code, maximise compliance, and manage any anxiety practices may have (possibly about resource requirements and/or getting it right first time), for the first cycle we intend to 'pilot' the Practices' requirements. By this, we mean that from the first cycle all Practices will be required to meet our requirements. However, we will adopt an enhanced 'support and improvement' feedback approach regarding the quality of the ROCR submissions. Within the first cycle, we will hold a range of support events, such as ongoing competence webinars / open forums, to assist practices and build their confidence.

In addition, the term 'pilot' also helpfully implies learning for both sides, affording room to further develop the ROCR, guidance or requirements, should this be required.

**10. Are there a minimum number of activities Practices should record?**

No. You are required to record the activities that are relevant to your Key Compliance Personnel, and the relevant risks and issues identified within practice.

As the ROCR reporting requirement is role-specific (not person-specific), Practices are only required to report on their activity for those holding a Key Compliance Personnel roles. So, even if you have a change in who holds that role mid-year, we would only expect you to report on the activity completed for the role itself, not each individual's activity.

**11. Do I have to do a separate entry for each type of personnel?**

No, you will be able to select multiple personnel per activity.

**12. Can I record activity completed by others, not just the Key Compliance Personnel?**

Yes, you are welcome to record all training on the ROCR. Maintaining the ROCR in this way may enable your practice to have a better overall picture of whether it is adequately addressing risk.

**13. Will the CLC provide any support to help our Practice meet the Ongoing Competence requirements?**

Yes, there will be a range of webinars. We will publicise these events through our newsletter and our website. If you have not already subscribed to our newsletter, please [visit our website](#) to do so.

**14. What happens if our practice is late submitting its ROCR?**

We expect all CLC practices to submit a ROCR by the first deadline (31 October 2026).

A range of support webinars will also help you and your practice prepare, and a dedicated team will be available to assist with any technical queries.

**15. Does this new Code impact on the annual licence renewal requirements?**

Your practice already completes an annual declaration as part of the formalities of reviewing its licence each year, going forward the timely submission of a ROCR will be included in the annual declaration.

You will receive the first of these declarations in the period leading up to licence renewal in or before October 2026 for your 2026/27 licence.

**16. Will our practice be required to provide evidence of the activities that we completed?**

Providing evidence of activities that your practice has completed is not a requirement.

It is possible that following the completion of the review of the first three cycles, we may ask Practices to provide additional types of evidence as a part of the reporting requirements. However, should this become a universal requirement, it would only apply for returns made on or after a specified date.

It is worth remembering that during inspections the CLC can, and often does, request evidence of a practice's training log and any completed training activity, and we will continue to do this as part of our standard monitoring and inspection regime.

**17. How will the information extracted from ROCRs be used?**

In the pilot year, we envisage that data will provide us with trend information, such as:

- Levels of activity under each impact statement
- Levels of activity related to Topics
- Activity levels by practice type, size, and scale
- Non activity.

**18. Will I be able to view our practice's past year's ROCRs?**

That may be possible, however for the time being we suggest that you maintain a screenshot of your ROCR, or a scanned copy each year for your own records.

**19. What are the consequences for Practices that fail to meet the deadline?**

All practices are expected to return the completed ROCR by the deadline. Blank returns will be considered as non-compliant.

The ROCR has been designed to avoid being overly administrative or technically burdensome. Therefore, we do not envisage any reason why it would not be possible for you to submit your practice's ROCR by the deadline.

However, should there be extenuating reasons that mean your Practice is not able to submit its ROCR by the deadline, you must contact us immediately to explain the situation.

Please remember, your Practice must at all times have a nominated Reporting Officer for this purpose. Therefore, staffing, or resourcing issues should be managed to ensure that this minimum requirement is met.

Any non-compliance from the previous year must be addressed in the current year. Failure to do so may delay the issue of your licence.

**20. How would the CLC deal with non-compliance over more than one year?**

Sustained failure to meet the minimum requirements may result in measures being taken against your Practice and its managers. Any measures taken will be proportionate, and in deciding on any measures, consideration will be given to a range of factors, including whether there has been repeated failure or intentional misreporting and the risk that failure to meet the minimum requirements may pose to clients or your wider practice. The decision of the CLC in these matters is final and not subject to appeal.

**21. Does the CLC accredit courses or course providers?**

No, we do not provide any form of accreditation for courses or course providers, and we are not planning to change this.

**Specific questions**

**22. Our practice has a nominated individual who supervises all our training requirements, could this individual be nominated for the purpose of the Ongoing Competence Code?**

Whilst additional staff can assist with any administration and recording processes, the Code specifies that the practice's Reporting Officer must be a CLC Registered Manager, such as the Head of Legal Practice (HoLP) in an Alternative Business Structure (ABS), or Partner or Director in a Recognised Body.

As you are required to have the Reporting Officer at all times, we expect staffing or resourcing issues to be managed continuously.

**23. I am a Sole Practitioner, am I expected to meet the same level of reporting requirements as practices with more resource than I have?**

The general risks to practices and consumers apply irrespective of the size and scale of the business. Some risks are heightened for Sole Practitioners due to the very nature of the business. That said, the activity you provide is likely to be proportionate to the size of the business. For example, Sole Practitioners are Recognised Bodies and they do not have the appointees of HoLP and HoFA, so they would only be required to report on the activities undertaken by the MLRO and their CLC Registered Manager.

This is why we consider that it is appropriate for Sole Practitioners to comply with the requirements for CLC Practices and must ensure they balance competing priorities appropriately. During the pilot year, we will provide advice and guidance through targeted events which may help to provide assurance about the anticipated minimal resource required for this.

If you think you may struggle to meet your requirements in time, it is imperative that you contact the CLC without delay.

**24. Our practice already uses a digital mechanism to record our risk and training activity, can we continue to use that document and submit it to you instead of the ROCR?**

Your practice can of course continue with any record keeping it considers valuable. However, a completed ROCR submission is a mandatory reporting requirement, and we recommend that you begin using the ROCR as soon as possible to embed it into your practice's routine regulatory functions.

**25. Do I need to record and report on all risks and issues facing the Practice on the ROCR?**

Not necessarily. Whilst our minimum reporting requirements relate to the training or development activities of Key Compliance Personnel associated with the relevant risks and issues identified, you may decide to adopt this ROCR template for some or all of your other employees. You are welcome to do this.

**26. Am I required to undertake a risk assessment? If so, how do I do it?**

In order to appropriately oversee ongoing competence activity which covers the practice's professional responsibilities (including breadth and quality of legal advice, supervisory responsibilities and risk mitigations) which keeps pace with relevant legislative, ethical and regulatory requirements, you are encouraged to undertake a risk assessment. It is envisaged that the ROCR reporting template will include some fields related to the risk/issue that the ongoing competence activity is seeking to address or mitigate.

There is no prescribed way to undertake a risk assessment, many practices already do this routinely and we do not wish to create duplicate processes.

As you identify risk/issues, we encourage you to consider the CLC's Core Topics and Suggested Topics (which can be found in the toolkit) because this may highlight areas that have not yet been considered.

We consider **Core Topics** to be fundamental areas necessary to maintain CLC Lawyers' day-to-day competence and to derisk practice. **Suggested Topics** are published annually in the CLC's Risk Agenda and may change each year to reflect the biggest risks faced by consumers and the CLC's regulated community. The CLC's Risk Agenda is informed by intelligence gathered within all of our regulatory regimes as well as external information. As such, it's a helpful resource for a CLC Practice to consider.

Our requirements for Practices centre around the reporting of activities completed against risks/issues identified, which may or may not be relevant to the listed Core and Suggested Topics. There will be an 'Other Topic' option within the ROCR, to enable you to include these.

**27. Should we record planned training as well as completed training?**

The ROCR is currently a retrospective submission, you are not required to include future training within your ROCR.

We will consider developing an online ability to log future plans which can be updated in real-time.