



The Law Society

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Lexcel
Legal Practice Quality Mark

Lexcel England and Wales v6.1
Standard for legal practices

*Excellence in legal practice
management and client care*



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About Lexcel

- With ever-increasing competitive forces and client demands, it's vital to manage the quality and delivery of legal services. A quality management system demonstrates commitment and an ability to consistently deliver services that meet client expectations, improve overall satisfaction and assist regulatory compliance.
- Designed specifically for the legal sector, Lexcel is the Law Society's legal practice quality mark for practice management and client care. It provides a flexible, supportive management framework to help practices develop consistent operational efficiencies and client service, manage risk effectively, reduce costs and promote profitability.
- Lexcel defines quality management procedures in seven areas: structure and strategy, financial management, information management, people management, risk management, client care, and file and case management.
- Achieving accreditation involves the submission of an application form and subsequent assessment by an independent assessment body. Lexcel accreditation is awarded for three years, with annual re-accreditation and monitoring visits to ensure continued compliance.
- Practices are required to achieve and maintain the stated requirements in the Standard. The independent assessment process validates that these have been met.
- Lexcel is owned and managed by the Law Society of England and Wales. This includes developing the Standard and associated products, administration and review of all applications, overseeing the assessment process and promoting the scheme. Except where specific franchise agreements are in place, the Law Society of England and Wales is the only body authorised to award Lexcel accreditation.

Who is Lexcel for?

- Legal practices in any jurisdiction in the world can apply for accreditation against the Lexcel Standard, regardless of the size or type of work undertaken. See the **Scheme rules** for further details.
- Two versions of Lexcel are available to reflect the needs of domestic and international markets:
 - **Lexcel England and Wales** - version 6.1 of the Standard for legal practices in England and Wales.
 - **Lexcel International** - version 5.1 of the Standard for practices in England and Wales with independent offices overseas and practices in foreign jurisdictions.
- Lexcel England and Wales is divided into two versions to meet the needs of legal practices and in-house legal departments. These entities are defined as:
 - **A law practice** in the form of partnerships, limited liability partnerships, sole practitioners, incorporated law firms and alternative business structures (ABS) authorised and regulated by the Solicitors Regulation Authority (SRA).
 - **An in-house legal department**, including those in corporations, public sector (including ABS'), law centres, not-for-profit and government organisations.
- For ease of reference, the generic term 'practice' is used throughout the Standard.
- Practices whose head office is in England and Wales must be authorised and regulated by the Solicitors Regulation Authority.
- Practices with multiple offices can apply by jurisdiction. For example, a law firm with five offices across England and Wales must submit one application and be assessed across all five offices. In contrast,

one that has two offices in England and Wales and an independent office overseas would need to submit two applications, if they wanted to apply for Lexcel across multiple jurisdictions. It is not mandatory for all offices across multiple jurisdictions to apply for Lexcel. Please see the **Scheme rules** for further details.

- Lexcel can be combined with other quality standards including ISO 9001, Investors in People and the Specialist Quality Mark (SQM) and could reduce the time and cost of assessment. A joint assessment may also be possible.
- Lexcel is accepted as a quality standard by the Legal Aid Agency, instead of accreditation against the SQM.
- An annual practice registration fee is payable to the Law Society and a fee is also payable to the independent assessment body.
- The annual practice registration fee is divided into five bands, based on the total number of admitted and non-admitted fee earners at the practice:
 - 1 fee earner
 - 2 – 15 fee earners
 - 16 – 40 fee earners
 - 41 – 85 fee earners
 - 86+ fee earners

Glossary of terms and guidance

- **Emboldened words** (apart from document headings) in the Lexcel Standard are defined in the **Glossary of terms**.
- A main requirement is presented in tabular form in the left-hand column. Specific requirements are listed in the right-hand column as sub-clauses.
- Separate **Guidance notes** provide further explanation of requirements and are divided into general and specific guidance based on the practice size:
 - General guidance – All practices
 - Specific guidance – For practices with 1 fee earner
 - Specific guidance – For small and medium practices (2 – 85 fee earners)
 - Specific guidance – For large practices (86+ fee earners).
- Practices have the flexibility to implement procedures that are appropriate to their circumstances in order to meet requirements in the Standard.
- Most practices will document all procedures in an office manual, but there is no specific requirement that prevents procedures being documented in a number of different sources.
- Although Lexcel will help practices comply with some aspects of legislation, accreditation does not guarantee compliance with local laws. This remains the responsibility of the practice.

Questions?

- If, after reading the Standard, **Scheme rules** and **Guidance notes**, you have any questions regarding Lexcel, please do not hesitate to contact us:
- **Tel:** +44 (0)20 7320 5933 **Email:** lexcel@lawsociety.org.uk

Glossary of terms	
Term	Definition
Authorisations	Practices need to consider whether authorisation procedures need to be in place whereby different personnel are given permission to approve expenditure to pre-defined levels.
Corporate social responsibility (CSR)	For the purposes of Lexcel, CSR is defined as the commitment by a practice to operate in an ethical manner and contribute in a positive way to society. This is an optional requirement for practices, although practices tendering for the provision of legal services to organisations may be required to have a CSR policy in place.
Evaluation	To make a judgement.
Flexible working	Flexible working practices have become increasingly relevant to the legal sector as part of recruitment and retention. Some examples of flexible working are part time working, annualised hours, compressed hours and remote working.
Malicious software (malware)	Software that is used to disrupt computer operation, gather sensitive data or gain access to private computer systems.
Must	A mandatory requirement.
Objective(s)	Any objectives agreed and set out need to be measurable. They will require some form of quantification or have indicators of progress to measure performance.
Personnel	All employed staff which includes a principal, locums, partners, members and directors.
Plan(s)	A ' plan ' is a documented outline of where a practice desires to be in the future and describes how it intends to arrive at that destination. A plan can be described as a map which supports practices to arrive at their desired destination in the future. In general, the Lexcel Standard permits practices to develop plans in the manner and detail that the practice considers appropriate, assuming a basic level of adequacy. All plans must have a named person who is responsible for the plan . They must also be reviewed at least annually.
Policy / policies	A ' policy ' is a documented general approach taken within the practice to the issue in question. A policy defines why a particular approach is adopted by the practice. All policies must have a named person who is responsible for the policy . They must also be reviewed at least annually.
Procedure(s)	A ' procedure ' is a written description of how an activity will occur within the practice. A procedure describes the steps that personnel are required to follow in order to complete an activity. At an assessment, a procedure can only be said to be complied with if the assessor can observe that the procedure contained in the practice's documentation is in effective operation. All procedures must have a named person who is responsible for the procedure . They must also be reviewed at least annually.

Glossary of terms (continued)

Term	Definition
Reasonable adjustments	The duty to make reasonable adjustments is a legal responsibility under anti-discrimination legislation. The requirement is intended to make sure that disabled people do not face difficulties in employment, education or when using services. A reasonable adjustment is a reasonable step taken to prevent a disabled person suffering a substantial disadvantage compared with people who are not disabled.
Register	Multiple records that are held in hard copy or electronic format.
Risk register	A risk register is a record of the risks facing the practice. There is no fixed format for the risk register prescribed by Lexcel. It should indicate who has responsibility for a particular risk and any measures taken by the practice to mitigate or reduce the risk.
Role profile	A description of the role undertaken by an individual including the key purpose of the role, summary of responsibilities and the skills and experience required of the individual.
Should	An optional requirement. In some cases, practices may be required to explain why they have chosen not to implement a requirement by their Lexcel assessor.
Strategic plan	A strategic plan identifies the practice's goals and the activities necessary to achieve those goals.
Supervisor(s)	A person(s) who is(are) of sufficient seniority and in a position of sufficient responsibility with the appropriate skills and experience to guide and assist others.

1 Structure and strategy

1.1 Practices must have documentation setting out the:	<ul style="list-style-type: none"> a. legal framework under which they operate b. management structure which designates the responsibilities of individuals and their accountability.
1.2 Practices must have a strategic plan , which must include:	<ul style="list-style-type: none"> a. objectives for at least the next 12 months b. the identification of resources required to meet the objectives c. the services the practice wishes to offer d. the client groups to be served e. how services will be delivered and marketed f. documented risk evaluation of objectives g. procedures for regular reporting on performance.
1.3 Practices must have a business continuity plan , which must include:	<ul style="list-style-type: none"> a. an evaluation of potential risks that could lead to business interruption b. ways to reduce, avoid and/or transfer the risks c. key people relevant to the implementation of the plan d. a procedure to test the plan annually, to verify that it would be effective in the event of a business interruption.
1.4 Practices should have a policy in relation to corporate social responsibility .	

2 Financial management

2.1 Practices must document the person who has overall responsibility for financial management.	
2.2 Practices must be able to provide documentary evidence of their financial management procedure , including:	<ul style="list-style-type: none"> a. annual budget including income and expenditure b. annual income and expenditure accounts c. annual balance sheet d. annual income and expenditure forecast to be reviewed quarterly e. variance analysis conducted at least quarterly of income and expenditure against budgets f. variance analysis conducted at least quarterly of cash flow and cash flow forecast.
2.3 Practices should have a time recording procedure .	
2.4 Practices must have a procedure in relation to billing clients, which must include:	<ul style="list-style-type: none"> a. the frequency and terms for billing clients b. credit limits for new and existing clients c. debt management.
2.5 Practices handling financial transactions must have a procedure , which must include:	<ul style="list-style-type: none"> a. the transfer of funds b. the management of funds received by the practice c. authorisations.

3 Information management

<p>3.1 Practices must have a policy to manage personal data which ensures compliance with data protection legislation, which must include:</p>	<ul style="list-style-type: none"> a. the appointment of a Data Protection Officer (DPO) if required, and if not practices should appoint one voluntarily. If a voluntary appointment is not made, practices must document why they have not made such an appointment and the suitable alternative arrangements they have put into place b. keeping appropriate records of processing activities and additionally, the lawful basis for processing categories of data and providing information to data subjects including information about data transfers to third countries c. a procedure for data subject access requests d. a procedure to manage and report data breaches e. regular data protection training for all staff f. a policy for reviewing processing operations in light of the obligation of data protection by design and default, which should include: <ul style="list-style-type: none"> i) a procedure for identifying when a data protection privacy impact assessment should be carried out g. a procedure for identifying and periodically reviewing data retention timescales.
<p>3.2 Practices must have an information management and security policy and should be accredited against Cyber Essentials. The policy must incorporate the following controls:</p>	<ul style="list-style-type: none"> a. a register of relevant information assets of both the practice and clients b. procedures for the protection and security of the information assets c. procedures for the retention and disposal of information d. the use of firewalls e. procedures for the secure configuration of network devices f. procedures to manage user accounts g. procedures to detect and remove malicious software h. a register of all software used by the practice i. training for personnel on information security j. a plan for the updating and monitoring of software.
<p>3.3 Practices must have an e-mail policy, which must include:</p>	<ul style="list-style-type: none"> a. the scope of permitted and prohibited use b. procedures for monitoring personnel using e-mail c. procedures for the storage and destruction of e-mails.
<p>3.4 If the practice has a website, the practice must have a website management policy, which must include:</p>	<ul style="list-style-type: none"> a. a procedure for content approval, publishing and removal b. the scope of permitted and prohibited content c. procedures for the management of its security d. consideration of accessibility requirements for disabled clients.
<p>3.5 Practices must have an internet access policy, which must include:</p>	<ul style="list-style-type: none"> a. the scope of permitted and prohibited use b. procedures for monitoring personnel accessing the internet.
<p>3.6 Practices must have a social media policy, which must include:</p>	<ul style="list-style-type: none"> a. a procedure for participating in social media on behalf of the practice b. the scope of permitted and prohibited content.

3 Information management (continued)

<p>3.7 Practices must have:</p>	<ul style="list-style-type: none"> a. a register of each plan, policy and procedure that is contained in the Lexcel Standard b. a named person responsible for each policy, plan and procedure that is contained in the Lexcel Standard c. a procedure for the review of each policy, plan and procedure that is contained in the Lexcel Standard.
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4 People management

<p>4.1 Practices must have a policy in relation to the health and safety of all personnel and visitors to the practice.</p>	
<p>4.2 Practices must have an equality and diversity policy, which must include:</p>	<ul style="list-style-type: none"> a. recruitment, selection and progression b. a procedure to deal with complaints and disciplinary issues in breach of the policy c. procedure to monitor diversity and collate equality data d. training of all personnel on compliance with equality and diversity requirements e. procedures for reasonable adjustments for personnel.
<p>4.3 Practices must have a learning and development policy, which must include:</p>	<ul style="list-style-type: none"> a. ensuring that appropriate training is provided to personnel within the practice b. ensuring that all supervisors and managers receive appropriate training c. a procedure to evaluate training d. a learning and development plan for all personnel.
<p>4.4 Practices must list the tasks to be undertaken by all personnel within the practice usually in the form of a role profile.</p>	
<p>4.5 Practices must have procedures to deal effectively with recruitment selection and progression, which must include:</p>	<ul style="list-style-type: none"> a. the identification of vacancies b. the drafting of the job documentation c. methods of attracting candidates d. clear and transparent selection e. storage, retention and destruction of records f. references and ID checking. g. where appropriate, the checking of disciplinary records.
<p>4.6 Practices must conduct an appropriate induction for all personnel, including those transferring roles within the practice and must cover:</p>	<ul style="list-style-type: none"> a. the management structure and the individual's responsibilities b. terms and conditions of employment c. immediate training requirements d. key policies.

4 People management (continued)

4.7	Practices must have a procedure which details the steps to be followed when a member of personnel ceases to be an employee, which must include:	<ul style="list-style-type: none"> a. the handover of work b. exit interviews c. the return of property belonging to the practice.
4.8	Practices must have a performance management policy , which must include:	<ul style="list-style-type: none"> a. the practice's approach to performance management b. performance review periods and timescales.
4.9	Practices must have a whistleblowing policy .	
4.10	Practices must have a flexible working policy .	

5 Risk management

5.1	Practices must have a risk management policy , which must include:	<ul style="list-style-type: none"> a. a compliance plan b. a risk register c. defined risk management roles and responsibilities d. arrangements for communicating risk information.
5.2	Practices must have a policy in relation to outsourced activities, which must include:	<ul style="list-style-type: none"> a. details of all outsourced activities including providers b. procedures to check the quality of outsourced work c. procedures to ensure providers have taken appropriate precautions to ensure information will be protected.
5.3	There must be a named supervisor for each area of work undertaken by the practice.	
5.4	Practices must have procedures to manage instructions, which may be undertaken even though they have a higher risk profile , including unusual supervisory and reporting requirements or contingency planning.	
5.5	Practices must maintain lists of work that the practice will and will not undertake. This information must be communicated to all relevant personnel and must be updated when changes occur.	
5.6	Practices must maintain details of the generic risks and causes of claims associated with the area(s) of work undertaken by the practice. This information must be communicated to all relevant personnel .	
5.7	Practices must have a procedure to monitor key dates, which must include:	<ul style="list-style-type: none"> a. the definition of key dates by work type b. ensuring that key dates are recorded on the file and in a back-up system.

5 Risk management (continued)

<p>5.8 Practices must have a policy on the handling of conflicts, which must include:</p>	<ul style="list-style-type: none"> a. the definition of conflicts b. training for all relevant personnel to identify conflicts c. steps to be followed when a conflict is identified.
<p>5.9 Practices must have a procedure to ensure that all personnel, both permanent and temporary, are actively supervised. Such procedures must include:</p>	<ul style="list-style-type: none"> a. checks on incoming and outgoing correspondence where appropriate b. departmental, team and office meetings and communication structures c. reviews of matter details in order to ensure good financial controls and the appropriate allocation of workloads d. the exercise of devolved powers in publicly funded work e. the availability of a supervisor f. allocation of new work and reallocation of existing work, if necessary.
<p>5.10 Practices must have a procedure to ensure that all those doing legal work check their files regularly for inactivity.</p>	
<p>5.11 Practices must have a procedure for regular, independent file reviews of either the management of the file or its substantive legal content, or both. In relation to file reviews, practices must:</p>	<ul style="list-style-type: none"> a. define and explain file selection criteria b. define and explain the number and frequency of reviews c. retain a record of the file review on the matter file and centrally d. ensure any corrective action, which is identified in a file review, is acted upon within 28 days and verified e. ensure that the designated supervisor reviews and monitors the data generated by file reviews f. conduct a review at least annually of the data generated by file reviews.
<p>5.12 Operational risk must be considered and recorded in all matters before, during and after the processing of instructions. Before the matter is undertaken, the fee earners must:</p>	<ul style="list-style-type: none"> a. consider if a new client and/or matter is accepted by the practice, in accordance with section 6.1 and 6.7 below b. assess the risk profile of all new instructions and notify the supervisor, in accordance with procedures under 5.4, of any unusual or high risk considerations in order that appropriate action may be taken. <p>During the retainer the fee earner must:</p> <ul style="list-style-type: none"> c. consider any change to the risk profile of the matter and report and advise on such circumstances without delay, informing the supervisor if appropriate d. inform the client in all cases where an adverse costs order is made against the practice in relation to the matter in question. <p>At the end of the matter the fee earner must:</p> <ul style="list-style-type: none"> e. undertake a concluding risk assessment by considering if the client's objectives have been achieved f. notify the supervisor of all such circumstances in accordance with documented procedures in section 5.4 above.

5 Risk management (continued)

<p>5.13 Practices must have a policy, approved by senior management, to mitigate and manage money laundering and terrorist financing risks and to ensure compliance with anti-money laundering (AML) legislation. The policy must include:</p>	<ul style="list-style-type: none"> a. a documented, practice wide risk assessment that identifies and assesses the risks of money laundering and terrorist financing to which the practice is subject b. the appointment of a nominated officer usually referred to as a Money Laundering Reporting Officer (MLRO) c. a procedure for making disclosures within the practice and by the MLRO to the authorities d. procedures for checking the identity of the practice's clients, and monitoring clients on an ongoing basis e. a plan for the training of personnel f. procedures for the proper maintenance of records g. a system for responding rapidly to AML enquiries from the authorities h. where appropriate with regard to the size and nature of the practice: <ul style="list-style-type: none"> i) appoint a person of sufficient seniority as the officer responsible for the practice's compliance with the current money laundering regulations ii) carry out screening of relevant employees iii) establish an independent audit function to evaluate, monitor compliance with and improve the effectiveness of the practice's AML policies, controls and procedures. <p>Otherwise, practices must document why 5.13h (i-iii) above are not appropriate.</p>
<p>5.14 Practices should have a policy in relation to the avoidance of involvement in property and mortgage fraud, which must include:</p>	<ul style="list-style-type: none"> a. carrying out relevant checks in relation to the conveyancer acting for the other party.
<p>5.15 Practices must have a policy setting out the procedures to prevent bribery in accordance with current legislation.</p>	
<p>5.16 Practices should have a policy setting out the procedures to prevent criminal facilitation of tax evasion by associated persons in accordance with current legislation.</p>	
<p>5.17 Practices should have a procedure in relation to the submission of a report to Office of Financial Sanctions Implementation if they become aware of, or have reasonable grounds to suspect, that a person is:</p>	<ul style="list-style-type: none"> a. a designated person or b. has committed an offence under sanctions regulations.

5 Risk management (continued)

<p>5.18 Practices will analyse at least annually all risk assessment data generated within the practice. This must include:</p>	<ul style="list-style-type: none"> a. any indemnity insurance claims (where applicable) b. an analysis of client complaints trends c. data generated by file reviews d. any matters notified to the COLP and/or COFA e. any material breaches notified to the SRA f. any non-material breaches recorded g. situations where the practice acted where a conflict existed h. the identification of remedial action i. risk of non-compliance with current policy to manage personal data.
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6 Client care

<p>6.1 Practices must have a policy for client care, including:</p>	<ul style="list-style-type: none"> a. how enquiries from potential clients will be dealt with b. ensuring that before taking on a client, the practice has sufficient resources and competence to deal with the matter c. protecting client confidentiality, including their data protection rights d. a timely response is made to telephone calls and correspondence from the client and others e. a procedure for referring clients to third parties f. the provision of reasonable adjustments for disabled clients.
<p>6.2 Practices must communicate the following to clients in writing, unless an alternative form of communication is deemed more appropriate:</p>	<ul style="list-style-type: none"> a. where appropriate, establish the client's requirements and objectives b. provide a clear explanation of the issues involved and the options available to the client c. explain what the fee earner will and will not do d. agree with the client the next steps to be taken e. keep the client informed of progress, as agreed f. establish in what timescale that matter will be dealt with g. establish the method of funding h. where appropriate, consider whether the intended action would be merited on a cost benefit analysis i. agree an appropriate level of service j. explain the practice's responsibilities and the client's k. provide the client with the name and status of the person dealing with their matter l. provide the client with the name and status of the person responsible for the overall supervision of their matter. m. explain to the client their rights as data subjects and provide the client with the name of the person responsible for data protection.

6 Client care (continued)

<p>6.3 Practices must have a procedure to regularly review any standing terms of business with regular clients to ensure they are in plain English. The practice must be able to produce such terms in relation to issues covered by this section.</p>	
<p>6.4 Practices must give clients the best information possible about the likely overall cost of the matter, both at the outset and when appropriate, as the matter progresses. In particular practices must:</p>	<ul style="list-style-type: none"> a. advise the client of the basis of the practice's charging b. advise the client where the practice will receive a financial benefit as a result of accepting instructions c. advise the client if the charging rates are to be increased d. advise the client of likely payments which the practice or the client may need to make to others e. discuss with the client how they will pay f. advise the client that there are circumstances where the practice may be entitled to exercise a lien for unpaid costs g. advise the client of their potential liability for any other party's costs.
<p>6.5 Practices must operate a written complaints handling procedure, including:</p>	<ul style="list-style-type: none"> a. the definition of what the practice regards as a complaint b. informing the client at the outset of the matter, that in the event of a problem they are entitled to complain c. the name of the person with overall responsibility for complaints d. providing the client with a copy of your practice's complaints procedure, if requested e. once a complaint has been made, the person complaining is informed in writing: <ul style="list-style-type: none"> i) how the complaint will be handled; and ii) in what time they will be given an initial and/or substantive response f. recording and reporting centrally all complaints received from clients g. identifying the cause of any problems of which the client has complained, offering any appropriate redress, and correcting any unsatisfactory procedures.
<p>6.6 Practices must have a procedure to monitor client satisfaction across all areas of the practice.</p>	
<p>6.7 Practices must have a procedure to accept or decline instructions, which must include:</p>	<ul style="list-style-type: none"> a. how decisions are made to accept instructions from new and existing clients b. how decisions are made to stop acting for an existing client c. how decisions are made to decline instructions.

7 File and case management

<p>7.1 Practices must ensure that the strategy for a matter is always apparent on the matter file and that in complex cases a project plan is developed.</p>	
<p>7.2 Practices must document procedures for the giving, monitoring and discharge of undertakings.</p>	
<p>7.3 Practices must have a procedure to:</p>	<ul style="list-style-type: none"> a. list open and closed matters, identify all matters for a single client and linked files where relevant and all files for a particular funder b. ensure that they are able to identify and trace any documents, files, deeds, wills or any other items relating to the matter c. safeguard the confidentiality of matter files and all other client information d. ensure that the status of the matter and the action taken can be easily checked by other members of the practice e. ensure that documents are stored on the matter file(s) in an orderly way.
<p>7.4 Practices will have procedures to ensure that matters are progressed in an appropriate manner. In particular:</p>	<ul style="list-style-type: none"> a. key information must be recorded on the file b. a timely response is made to telephone calls and correspondence from the client and others c. continuing cost information is provided d. clients are informed in writing if the person with conduct of their matter changes, or there is a change of person to whom any problem with service may be addressed.
<p>7.5 Practices must have a documented procedure for using barristers, expert witnesses and other external advisers who are involved in the delivery of legal services, which must include provision for the following:</p>	<ul style="list-style-type: none"> a. use of clear selection criteria in line with the equality and diversity policy b. where appropriate, consult with the client in relation to the selection of an advocate or other professional c. advising the client of the name and status of the person being instructed, how long she/he might take to respond and, where disbursements are to be paid by the client, the cost involved d. maintenance of records (centrally, by department or office) on barristers and experts used, including evidence of assessment against the criteria e. evaluation of performance, for the information of other members of the practice f. giving clear instructions g. checking of opinions and reports received to ensure they adequately provide the information sought (and, in litigation matters, comply with the rules of court and any court orders) h. payment of fees.

7 File and case management (continued)

7.6 Practices **must** have **procedures** to ensure that, at the end of the matter, the practice:

- a. if required, reports to the client on the outcome and explains any further action that the client is required to take in the matter and what (if anything) the practice will do
- b. accounts to the client for any outstanding money
- c. returns to the client any original documents or other property belonging to the client if required (save for items which are by agreement to be stored by the practice)
- d. if appropriate, advises the client about arrangements for storage and retrieval of papers and other items retained (in so far as this has not already been dealt with, for example in terms of business) and any charges to be made in this regard
- e. advises the client whether it is appropriate to review the matter in future and, if so, when and why
- f. archives and destroys files in an appropriate manner.



Excellence in legal practice management
and client care

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