



Board of Administration Agenda

REGULAR MEETING

TUESDAY, FEBRUARY 14, 2023

TIME: 10:00 A.M.

MEETING LOCATION:

accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health or safety of attendees and/or State of Emergency the continues to directly impact the ability of members to meet safely in person, Board LACERS the of Administration's February 14, 2023 meeting will be conducted via telephone and/or videoconferencing.

Important Message to the Public

Information to call-in to <u>listen and or participate</u>:

Dial: (669) 254-5252 or (669) 216-1590

Meeting ID# 161 085 0127

Instructions for call-in participants:

- 1- Dial in and enter Meeting ID
- 2- Automatically enter virtual "Waiting Room"
- 3- Automatically enter Meeting
- 4- During Public Comment, press *9 to raise hand
- 5- Staff will call out the last 3-digits of your phone number to make your comment

Information to listen only: Live Board Meetings can be heard at: (213) 621-CITY (Metro), (818) 904-9450 (Valley), (310) 471-CITY (Westside), and (310) 547-CITY (San Pedro Area).

President: Nilza R. Serrano Vice President: Elizabeth Lee

Commissioners: Annie Chao

Thuy Huynh Janna Sidley Sung Won Sohn Michael R. Wilkinson

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

Legal Counsel: City Attorney's Office

Public Pensions General

Counsel Division

LACERS Website Address/link:

www.LACERS.org

Notice to Paid Representatives

If you are compensated to monitor, attend, or speak at this meeting, City law may require you to register as a lobbyist and report your activity. See Los Angeles Municipal Code §§ 48.01 *et seq.* More information is available at ethics.lacity.org/lobbying. For assistance, please contact the Ethics Commission at (213) 978-1960 or ethics.commission@lacity.org.

Request for Services

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities.

Sign Language Interpreters, Communication Access Real-Time Transcription, Assistive Listening Devices, Telecommunication Relay Services (TRS), or other auxiliary aids and/or services may be provided upon request. To ensure availability, you are advised to make your request at least 72 hours prior to the meeting you wish to attend. Due to difficulties in securing Sign Language Interpreters, five or more business days' notice is strongly recommended. For additional information, please contact: Board of Administration Office at (213) 855-9348 and/or email at ani.ghoukassian@lacers.org.

Disclaimer to Participants

Please be advised that all LACERS Board and Committee Meeting proceedings are audio recorded.

CLICK HERE TO ACCESS BOARD REPORTS

- I. PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE BOARD'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA THIS WILL BE THE ONLY OPPORTUNITY FOR PUBLIC COMMENT PRESS *9 TO RAISE HAND DURING PUBLIC COMMENT PERIOD
- II. BOARD PRESIDENT VERBAL REPORT
- III. GENERAL MANAGER VERBAL REPORT
 - A. REPORT ON DEPARTMENT OPERATIONS
 - B. UPCOMING AGENDA ITEMS
- IV. RECEIVE AND FILE ITEMS
 - A. ETHICAL CONTRACT COMPLIANCE REPORT NOTIFICATION TO THE BOARD
 - B. BENEFITS PAYMENTS APPROVED BY GENERAL MANAGER
 - C. LEGISLATIVE UPDATE FOR FEBRUARY 2023
 - D. <u>977 N. BROADWAY PROJECT REPORT FOR THE QUARTER ENDING DECEMBER</u> 31, 2022
- V. CONSENT ITEM(S)
 - A. <u>APPROVAL OF MINUTES FOR THE REGULAR MEETING OF JANUARY 10, 2023</u> AND POSSIBLE BOARD ACTION
 - B. <u>FINDINGS TO CONTINUE TELECONFERENCE MEETINGS AND DETERMINATION THAT COVID-19 STATE OF EMERGENCY CONTINUES TO DIRECTLY IMPACT THE ABILITY OF MEMBERS TO MEET SAFELY IN PERSON AND POSSIBLE BOARD ACTION</u>
- VI. BOARD/DEPARTMENT ADMINISTRATION
 - A. REVIEW OF SAFETY STANDARDS FOR A RETURN TO IN-PERSON MEETINGS
 AND SERVICES AND POSSIBLE BOARD ACTION
- VII. INVESTMENTS
 - A. CHIEF INVESTMENT OFFICER VERBAL REPORT INCLUDING DISCUSSION ON THE PORTFOLIO EXPOSURE TO GLOBAL EVENTS
 - B. <u>REVIEW OF LACERS 2021 PRINCIPLES FOR RESPONSIBLE INVESTMENT</u>
 ANNUAL TRANSPARENCY AND ASSESSMENT REPORTS
 - C. <u>NOTIFICATION OF COMMITMENT OF UP TO \$40 MILLION IN NB PARTNERS FUND IV, LP</u>

- VIII. DISABILITY RETIREMENT APPLICATION(S)
 - A. ADOPTION OF FINDINGS OF FACT FOR HAGOP TCHAKERIAN AND POSSIBLE BOARD ACTION
 - B. CLOSED SESSION PURSUANT TO GOVERNMENT CODE SECTION 54957(b) TO CONSIDER THE DISABILITY RETIREMENT APPLICATION OF SHANNON WILLIAMS AND POSSIBLE BOARD ACTION
 - IX. OTHER BUSINESS
 - X. NEXT MEETING: The next Special meeting of the Board is scheduled for Wednesday, February 22, 2023 at 9:00 a.m., and the next Regular meeting of the Board is scheduled for Tuesday, February 28, 2023 at 10:00 a.m. via telephone and/or videoconferencing. Please continue to view the LACERS website for updated information on public access to Board meetings while response to public health concerns relating to the novel coronavirus continue.
 - XI. ADJOURNMENT

BOARD Meeting: 2/14/23 Item IV–A

LACERS' ETHICAL CONTRACT COMPLIANCE REPORT NOTIFICATION TO THE BOARD

RESTRICTED SOURCES

The Board's Ethical Contract Compliance Policy was adopted in order to prevent and avoid the appearance of undue influence on the Board or any of its Members in the award of investment-related and other service contracts. Pursuant to this Policy, this notification procedure has been developed to ensure that Board Members and staff are regularly apprised of firms for which there shall be no direct marketing discussions about the contract or the process to award it; or for contracts in consideration of renewal, no discussions regarding the renewal of the existing contract.

Name	Description	Inception	Expiration	Division
Anthem	Medical HMO & PPO	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
Kaiser	Medical HMO	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
SCAN	Medical HMO	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
United Healthcare	Medical HMO	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
Delta Dental	Dental PPO and HMO	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
Anthem Blue View Vision	Vision Services Contract	January 1, 2023	December 31, 2023	Health, Wellness, & Buyback
Moss Adams	External Auditing Consulting Services	July 1, 2020	June 30, 2023	Internal Audit
Axiom Investors LLC	Active Growth Non-U.S. Emerging Markets Equities	January 1, 2022	December 31, 2022	Investments
BlackRock Institutional Trust Company, N.A.	Multi Passive Index Portfolio Management	November 1, 2022	October 31, 2027	Investments

LACERS' ETHICAL CONTRACT COMPLIANCE REPORT NOTIFICATION TO THE BOARD

Name	Description	Inception	Expiration	Division
RhumbLine Advisers Limited Partnership	Multi Passive Index Portfolio Management	November 1, 2022	October 31, 2027	Investments
State Street Global Advisors Trust Company	Multi Passive Index Portfolio Management	November 1, 2022	October 31, 2027	Investments
Principal Global Investors, LLC	Active U.S. Mid Cap Core Equities	July 1, 2014	June 30, 2023	Investments
Dimensional Fund Advisors, LP	Active Non-U.S. Equities Emerging Markets Value	July 1, 2014	June 30, 2023	Investments
Institutional Shareholder Services Inc.	Proxy Voting Analysis Services	March 1, 2018	February 28, 2023	Investments
Box, Inc.	Retirement Application Portal Custom Consulting Services	December 1, 2021	November 30, 2022	Systems

LACERS' ETHICAL CONTRACT COMPLIANCE REPORT NOTIFICATION TO THE BOARD

ACTIVE RFPs

Description	Respondents	Inception	Expiration	Division
Mixed Media Diversity, Equity, & Inclusion Fellowship Programming	deepSEE Consulting, Experience Institute, LLC, Peace in Action, LLC, Upper Diamond	October 27, 2022	December 2, 2022	Administration

BENEFIT PAYMENTS APPROVED BY GENERAL MANAGER: ITEM IV-B

Pursuant to the authority delegated to the General Manager under Board Rule GMA 1, General Manager Authorization, adopted by the Board of Administration on June 14, 2016, the following benefit payments have been approved by the General Manager:

SERVICE RETIREMENTS

Member Name	Service	<u>Department</u>	Classification
Blevins, Bettye J	43	PW - Engineering	Sr Administrative Clerk
Marden, Carol A	42	Dept. of Bldg. & Safety	Administrative Clerk
Ponce De Leon, Sophia	36	Police Dept Civilian	Police Service Rep
Sanchez			
Kishita, Karen	35	PW - Street Use	St Svc Investigator
Castro, Fernando P	35	Dept. of Airports	Airport Police Captain
Augustine, Vincent Gregg	35	GSD - Materials Mgmt.	Storekeeper
Lopez, Jose C	34	Dept. of Rec. & Parks	Sr Gardener
Moore, James E	33	PW - Sanitation	San Solid Resources Mgr
Reza, Javier F	33	PW - Solid Resource	Ref Coll Truck Oper
Corrales, Bessy L	33	LA Housing Dept.	Exec Admin Asst
Haig, Brian D	31	Dept. of Airports	Exec Asst Airports
Lam, Kiet Vi	31	Dept. of Bldg. & Safety	Systems Programmer
Mach-Leung, Lina Phuong	30	Dept. of Airports	Commun Engineer
Gubatan, Gerald G	30	Council - As Needed	Council Aide
Price, Nancy Ann	28	Dept. of Airports	Environmental Spec
Minetta, Victoria Anne	28	EWDD	Human Rel Advocate
Dixson, Daniel D	28	Dept. of Airports	Airport Police Ofcr
Koretz, Paul	28	Council	Council Member
Bonin, Michael John	25	Council	Council Member
Ter Ghevondian, Vartan	23	City Attorney's Office	Paralegal
Hersch, David Irwin	23	Council	Council Aide
Tatum, Walter D	22	Dept. of Airports	Security Officer
Parra, Robert	22	PW - Sanitation	Ref Coll Truck Oper
Jackson, Kathy D	21	Dept. of Airports	Custodian Airport
Feuer, Michael Nelson	21	City Attorney's Office	City Attorney
Torrence, Garry A	21	PW - Sanitation	Ref Coll Truck Oper
Lee, Poh Choo	20	Library Dept.	Administrative Clerk
Farrell, Mitchell Dale	18	Council	Council Member
Fusano, Michael Chris	17	Dept. of Rec. & Parks	Park Maint Supvr
Garrabrant, Ronald Scott	16	Dept. of Rec. & Parks	Park Services Att
Dieguez Davila, Cristobal	16	Dept. of Airports	Custodian Airport
Cisneros, Dora Alma	16	LA Housing Dept Reg and	Administrative Clerk
Phillips, Carl L	16	Dept. of Airports	Heavy Duty Truck Oper

Cedillo, Gilbert	15	Council	Council Member
Bell, Angela L	15	Dept. of Airports	Sr Security Officer
Kharbertyan, Grigor	15	Library Dept.	Administrative Clerk
Payton, Carol Ann	15	Fire Dept Civilian	Emer Med Servs Educator
Dy Gadoury, Doris	15	Dept. of Bldg. & Safety	Sr Admin Clerk
Goldman, Cara Lisa	14	Council - As Needed	Council Aide
Segura, Luis F	10	Police Dept Civilian	Background Investgr
Reyes, Tomas T	9	Dept. of Rec. & Parks	Special Prog Asst
Morris, Wilma J	7	Dept. of Transportation	Crossing Guard
Lyle, Joel Michael	7	Council - As Needed	Council Aide
Karau, Karen	5	Dept. of Rec. & Parks	Rec Facility Director
Chang, Allan A	0.1	Personnel Dept.	Relief Corr Nurse

BENEFIT PAYMENTS APPROVED BY GENERAL MANAGER: ITEM V-B

Pursuant to the authority delegated to the General Manager under Board Rule GMA 1, General Manager Authorization, adopted by the Board of Administration on June 14, 2016, the following benefit payments have been approved by the General Manager:

Approved Death Benefit Payments

<u>Deceased</u> <u>Beneficiary/Payee</u>

TIER 1

Andrews, Joanne V John F Andrews for the payment of the

Accrued But Unpaid Continuance Allowance

Baeza, Helen Madeline Ayala for the payment of the

Accrued But Unpaid Continuance Allowance

Baker, Ashton E Ashton K Baker for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Bass, Robert Christell Bass for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Bennett, Ruth E Randy L Bennett for the payment of the

Accrued But Unpaid Continuance Allowance

Bullock, Charlotte Gail	Donna Elizabeth Bullock for the payment of the Accrued But Unpaid Service Retirement Allowance Burial Allowance
	Gail Bullock for the payment of the Accrued But Unpaid Service Retirement Allowance
Burdette, Allen	Deloyce Burdette for the payment of the Accrued But Unpaid Service Retirement Allowance Burial Allowance

Accrued But Unpaid Service Retirement Allowance
Burial Allowance

Capucetti, Bruce S

Gabriella Capucetti-Gomez for the payment of the Burial Allowance

Maria Cristina Capucetti for the payment of the

Maria Cristina Capucetti for the payment of the Accrued But Unpaid Service Retirement Allowance

Gloria J Bynum for the payment of the

Burial Allowance

Castillo, John M Rachel G Castillo for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Cortez, Yolanda Yolanda G Cortez for the payment of the

Accrued But Unpaid Survivorship (Disability) Allowance

Croudy, Ronald L Troy Croudy for the payment of the

Accrued But Unpaid Service Retirement Allowance

Bynum, Emerson L

Accrued But Unpaid Service Retirement Allowance

Burial Allowance Unused Contributions

Dang, Thinh T Thai T Dong for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Donald, Shelly Venus Donald for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Egan, Phyllis M Daniel B Egan for the payment of the

Accrued But Unpaid Continuance Allowance

Fisher, Don E Don G Fisher for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Marilyn Sue Fisher for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Flores, Pete Norma Flores for the payment of the

Accrued But Unpaid Service Retirement Allowance

Flucus, Shirley Jo Eric D Flucus for the payment of the

Accrued But Unpaid Service Retirement Allowance

Galan, Jesus Davila	Maria Guadalupe Davila for the payment of the
,	

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Goins, Jackie Maxcinery Goins for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Gonzalez, Hector Rachel Gonzalez for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Guss, Iskender Alex

Jannet Guss for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Hamac, Deogracias E Nelia Pena Hamac for the payment of the

Accrued But Unpaid Service Retirement Allowance

Harmon, Rex Debra C Gaines for the payment of the

Accrued But Unpaid Continuance Allowance

Healy, Louann R Donald Healy for the payment of the

Accrued But Unpaid Continuance Allowance

Helms, Karen E, Conservatee Self-Realization Fellowship Church for the payment of the

Accrued But Unpaid Service Retirement Allowance

Humes, Roy Anthony Anice Joan Hartwell for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Jackson, Thiren Douglas Fernette M Jackson for the payment of the

Burial Allowance

Kimble W Jackson for the payment of the

Burial Allowance

Jenkins, Mark Edward Dolores Jenkins for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Kramer, Albert G Neal Elliot Kramer for the payment of the

Burial Allowance Unused Contributions

Kurtz, Willa Keith Kurtz for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Larson, Harry W Leora M Larson for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Leacher, Guy Ruby Leacher for the payment of the

Accrued But Unpaid Service Retirement Allowance

Lucero, Connie	Mary Ann Gutierrez for the payment of the Accrued But Unpaid Survivorship (Retirement) Allowance
Marinkovich, Violet F	Peter Marinkovich for the payment of the Accrued But Unpaid Service Retirement Allowance
Mc Connachie, George H	Penny Lynne Mc Connachie for the payment of the Accrued But Unpaid Service Retirement Allowance Burial Allowance
Mccanne, David A	Lucy F Mccanne for the payment of the Burial Allowance
Mclaughlin, James F	Patricia V Mclaughlin for the payment of the Accrued But Unpaid Vested Retirement Allowance Burial Allowance
Olivier, Carol D	Lisa Galleguillos for the payment of the Accrued But Unpaid Continuance Allowance
Olivier, Kenneth S	Ken And Carol Olivier Family Trust for the payment of the Burial Allowance
	Lisa Galleguillos for the payment of the Accrued But Unpaid Service Retirement Allowance

Piechura, Donald R	Christine C Piechura for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Poon, Paul C Doreen Poon Yonemura for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance Unused Contributions

Rao, Joe Ling Changhong Yu for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Ross, Marvalyn Yvonne Javette Ross for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Seros, Edith Alexandra Seros for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Sher, Arthur L Dana Sher for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Silva, John Mary C Silva for the payment of the

Accrued But Unpaid Service Retirement Allowance

Smith, Alonzo	Juanita M Jones Smith for the payment of the
	Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Valdez, Jose M Otilia R Valdez for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Valencia, Carmen L Gabriel Valencia for the payment of the

Accrued But Unpaid Continuance Allowance

Villa, Maria P Jose Luis Ruvalcaba for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Vinger, Gregory A. Eric Vinger for the payment of the

DRO Lump Sum

Wallace, Nellie Chavez Buckner for the payment of the

Accrued But Unpaid Disability Continuance Allowance

Wecker, Robert C Virginia Lou Wecker for the payment of the

Accrued But Unpaid Service Retirement Allowance

Burial Allowance

Weiser, John K William H Weiser for the payment of the

Accrued But Unpaid Service Retirement Allowance

Yarger, William Charles

Susan J Yarger for the payment of the Accrued But Unpaid Service Retirement Allowance Burial Allowance

TIER 3 None

BENEFIT PAYMENTS APPROVED BY GENERAL MANAGER: ITEM V-B

Pursuant to the authority delegated to the General Manager under Board Rule GMA 1, General Manager Authorization, adopted by the Board of Administration on June 14, 2016, the following benefit payments have been approved by the General Manager:

Approved Death Benefit Payments

<u>Deceased</u> <u>Beneficiary/Payee</u>

TIER 1
Active

Coleman, Lori D Barry L Coleman for the payment of the (Deceased Active) Service Retirement Survivorship Allowance

Dickinson, Stephen Charles Kevin C. Dickinson for the payment of the

(Deceased Active) FDBP Student

Duncan, Kevin Edward Linda Gail Duncan for the payment of the (Deceased Active) Survivor Contributions Death Refund

Gill, Harold E Renee Gill for the payment of the

(Deceased Active) Accumulated Contributions

Martin, Victor R Vanessa Martin for the payment of the

(Deceased Active) Accumulated Contributions

Mc Call, Diane W Terez V Mccall for the payment of the

(Deceased Active) Accumulated Contributions

Moore, Sylvester E Andre Moore for the payment of the

(Deceased Active) Accumulated Contributions

Edward Moore for the payment of the

Accumulated Contributions

Reyes, Leticia Valerie C Zuniga for the payment of the

(Deceased Active) Accumulated Contributions

TIER 3

None

Disclaimer: The names of members who are deceased may appear more than once due to multiple beneficiaries being paid at different times.





MEETING: February 14, 2023 IV - C

ITEM:

REPORT TO BOARD OF ADMINISTRATION

From: Neil M. Guglielmo, General Manager

nefm. Duglisher

SUBJECT: LEGISLATIVE UPDATE OF FEBRUARY 2023

ACTION: □ CLOSED: CONSENT: RECEIVE & FILE:

Recommendation

That the Board receive and file this report.

Executive Summary

The United States Congress convened on January 3, 2023 to commence the 118th Congressional session, while the California State Legislature convened on January 4, 2023 to commence a new legislative session. This report provides updates on current legislation that may be of interest to the Board.

The updated Legislative Watch List is attached. Notably, two Federal bills were passed and signed by the President into law. The current Watch List includes one State, thirteen Federal, and eleven City Council proposals. Newly added bills are highlighted with a yellow bill number.

At this time, it is not recommended for the Board to take a position on any specific proposed legislation.

Discussion

BILLS PASSED INTO LAW

The following bills passed into law and will be removed from the future Legislative Watch List. Staff will work with respective consultants and legal counsel toward operational and legal compliance, as necessary.

SECURE ACT 2.0 (Consolidated Appropriations Act, 2023)

As part of the Consolidated Appropriations Act, 2023, this law was signed by President Biden on December 29, 2022 and generally goes into effect on January 1, 2023 (though some provisions have delayed effective dates). It is one of the largest packages in the history of retirement tax law changes and seeks to increase retirement savings and simplify and clarify retirement plan rules.

Key Impacts on LACERS:

RMDs

- The new law increases the age for required minimum distributions (RMDs) from the plan, from age 72 to age 73 (for those participants who turn age 72 on or after January 1, 2023), and then to age 75 on or after January 1, 2033. This means LACERS will need to adjust RMD ages in administering these distributions.
- It reduces the excise tax penalty on late RMDs from 50% to 25%.
- It allows surviving spouses to elect to be treated as the member for purposes of RMD rules (effective for calendar years after 2023).

Overpayments

- The new law removes the threat of plan disqualification where a plan is unable to secure repayment for certain inadvertent overpayments to a member. Presumably, this provides more flexibility in the requirement to recoup overpayments.
- It expands the types of errors that can be self-corrected through the IRS correction program (EPCRS). LACERS will monitor for updated guidance from the IRS on the expansion of EPCRS and any changes specific to inadvertent overpayments.

Public Pensions General Counsel will work with outside tax counsel on Plan amendments, and to continue monitoring for any technical corrections and updated guidance that may follow and impact LACERS or its members.

FINANCIAL DATA TRANSPARENCY ACT OF 2022 (Incorporated in H.R. 7776 – James M. Inhofe National Defense Authorization Act for Fiscal Year 2023)

This Act was signed by President Biden on December 23, 2022 and incorporated in the National Defense Authorization Act of 2023. The Act requires certain regulatory agencies, such as the Security Exchange Commission (SEC) to adopt and implement a standardized reporting of financial information for entities that they regulate. The purpose is to provide financial information that is automatable, searchable, and machine-readable. The regulatory agencies will have two years for development of the reporting standards and another two years to implement with a total of four years for full implementation.

Key Impacts on LACERS:

Financial Data Reporting

- Impacts state and local government financial reporting standards as required by organizations such as, Government Finance Officers Association (GFOA), Government Accounting Standards Board (GASB) and Generally Accounting Standards Board (GAAP).
- Potential increase in costs for financial system upgrades and administrative burden to conform to the new reporting standards as this is an unfunded mandate for state and local governments.

Public Pensions General Counsel and LACERS will continue to monitor.

BILLS AND/OR CITY PROPOSALS ADDED TO THE WATCHLIST

The following are identified bills/proposals of interest since the last legislative update.

- H.R. 2617 Consolidated Appropriations Act, 2023
- H.R. 7776 James M. Inhofe National Defense Authorization Act for Fiscal Year 2023
- S. 4295 Financial Data Transparency Act of 2022
- H.R. 82 Social Security Fairness Act of 2023
- SJR-1 Social Security Act: Repeal of Benefit Reductions

INFORMATIONAL

The following bills did not pass or did not move forward as is, in the prior congressional legislative session and will be removed from the Legislative Watch List. Prior bills that have not passed in the prior congressional session may be reintroduced again in 2023. LACERS will continue to monitor these topics and any relevant legislation impacting LACERS as the legislative session progresses.

- H.R. 2954 Securing a Strong Retirement Act of 2021 (provisions were incorporated into Consolidated Appropriations Act, 2023)
- H.R. 3 Elijah E. Cummings Lower Drug Costs Now Act
- H.R 2337 Social Security Fairness Act of 2019
- S.1302 Social Security Fairness Act
- H.R. 82 Social Security Fairness Act of 2021
- H.R. 480 Medicare Economic Security Solutions Act
- S.1770 Retirement Security and Savings Act of 2021
- H.R. 5832 Retirement Savings Lost and Found Act of 2021
- H.R. 5384 Equal Treatment of Public Servants Act of 2021
- S. 4295 Financial Data Transparency Act of 2022 (provisions were incorporated into James M. Inhofe National Defense Authorization Act for Fiscal Year 2023)

The following council files requires no further action and will be removed from the Legislative Watch List.

- 21-0600-S35 Budget Recommendation / Personnel Department / Targeted Local Hire Programs / Yearly Goal
- 21-0846 COVID-19 Virus / City Employees and Contractors / Vaccination Requirement / Condition of Employment

Strategic Plan Impact Statement

The Board's action on this item aligns with the Strategic Plan Goal to uphold good governance practices which affirm transparency, accountability, and fiduciary duty.

Prepared By: Chhintana Kurimoto, Management Analyst, Administration Division

NMG/TB/SC/LL/CK

Attachment: 1. LACERS Legislative Watch List February 2023

				STATUS			
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BILL NO	AUTHOR	TITLE/TOPIC STATEWIDE LEGISLATION	Introduced	Assembly	Senate	House	Final Status
	<u> </u>	T			T	1	
SJR-1	Dave Cortese	Social Security Act: repeal of benefit reductions - This measure would request the Congress of the United States to enact, and the President to sign, legislation that would repeal the Government Pension Offset and the Windfall Elimination Provision from the Social Security Act. Status bar: Senate:Cmt Impact: Public Pensions General Council and LACERS will continue to monitor.	12/05/2022		01/18/2023 Re-referred to Com. On L., P.E. & R.		
		FEDERAL LEGISLATION					
		EMPLOYER COMPLIANCE/REPORTING ISSUES					
HR 2617	Gerald Connolly	Consolidated Appropriations Act, 2023 - This bill provides appropriations to federal agencies for the remainder of FY2023, provides supplemental appropriations for disaster relief and to support Ukraine, extends several expiring authorities, and modifies or establishes various programs that address a wide range of policy areas. Provisions include: Division T- Secure 2.0 Act of 2022 Status bar: Introduced Passed House Passed Senate Resolving Differences To President Became Law Impact: Includes provisions from HR 2954 - Securing a Strong Retirement Act of 2021 (Secure Act 2.0), increases the age for required minimum distributions (RMDs) from the plan from age 72 to age 73 (for those born from 1951 to 1959), then to age 75 (for those born in 1960 or later). It also provides additional flexibility to plan fiduciaries seeking to recoup inadvertent overpayments to members and removes the threat of plan disqualification where a plan is unable to secure repayment for certain inadvertent overpayments to a member. Public Pensions General Council and LACERS will continue to monitor.	4/16/2021		11/15/2022 Passed/agreed to in Senate: Passed Senate with amendments by Unanimous Consent. 09/27/2022 Committee on Homeland Security and Governmental Affairs.	09/28/2021 Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended.	12/29/2022 Signed by President. Became Public Law No: 117- 328.

					STA	ATUS	
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 7776	Peter DeFazio	James M. Inhofe National Defense Authorization Act for Fiscal Year 2023 – This bill establishes end strengths for the branches of the Armed Forces and addresses other issues. The bill also authorizes for FY2023 various activities and programs, including those relating to (1) the Department of Defense (DOD), including procurement and military construction activities; (2) the Department of Energy National Security Programs; (3) the Defense Nuclear Facilities Safety Board; (4) the naval petroleum reserves; (5) the U.S. Merchant Marine; and (6) the Coast Guard. Provision includes Title LVIII: Financial Data Transparency Status bar: Introduced Passed House Passed Senate Resolving Differences To President Became Law Impact: Provision requires certain financial regulatory agencies (including the SEC) to adopt specified data standards with respect to format, searchability, and transparency. Once implemented, the reporting standards may affect the way issuers format and submit information. As with most governmental agencies, LACERS financial reports abide by the Government Accounting Standards Board (GASB) and Generally Accounting Standards Board (GAAP). Public Pensions General Counsel and LACERS will continue to monitor and implement operational changes accordingly. This bill will be removed from the next watch list.	5/16/2022		07/08/2022 Passed/agreed to in Senate: Passed Senate, under the order of 7/20/2022, having achieved 60 votes in the affirmative, with an amendment	06/08/2022 Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended.	12/23/2022 Signed by President. Became Public Law No: 117- 263
S. 4295	Mark Warner	Financial Data Transparency Act of 2022 – This bill requires federal financial regulatory agencies to adopt specified data standards with respect to format, searchability, and transparency. This bill also decreases, beginning September 30, 2031, the cap on the surplus funds of the Federal Reserve banks. (Amounts exceeding this cap are deposited in the general fund of the Treasury.) Status bar: Introduced Impact: Provisions were incorporated in the James M. Inhofe National Defense Authorization Act for Fiscal Year 2023. This bill will be removed from the next watch list.	5/24/2022		05/24/2022 Read twice and referred to the Committee on Banking, Housing, and Urban Affairs		01/03/2023 Enacted via other measures: Provisions were incorporated in James M. Inhofe National Defense Authorization Act for Fiscal Year 2023 (HR 7776).

				STATUS			
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 2954	Richard E. Neal	Securing a Strong Retirement Act of 2021 - To increase retirement savings, simplify and clarify retirement plan rules, and for other purposes. Status bar: Introduced Passed House Passed Senate To President Became Law Impact: Provisions were incorporated in the Consolidated Appropriations Act, 2023. This bill will be removed from the next watch list.	5/04/2021		03/30/2022 Received in the Senate and referred to the Committee on Finance.	O3/29/2022 Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended. O5/05/2021 Ways and Means Committee Ordered to be Reported in the Nature of a Substitute (Amended) by Voice Vote.	O1/03/2023 Enacted via other measures: Provisions were incorporated in Consolidated Appropriations Act, 2023 (HR 2617).
<u>S 1770</u>	Benjamin L. Cardin	Retirement Security and Savings Act of 2021 – To amend the Internal Revenue Code of 1986 to Reform retirement provisions, and for other purposes. Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.	5/20/2021		05/20/2021 Read twice and referred to the Committee on Finance		01/03/2023 Died in previous Congress.

				STATUS			
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 5832	Suzanne Bonamici	Retirement Savings Lost and Found Act of 2021 - To establish the Retirement Savings Lost and Found, and for other purposes. Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.	11/2021			11/03/2021 Referred to the House Committee on Ways and Means; Committee on Education and Labor.	01/03/2023 Died in previous Congress.
		INVESTMENT ISSUES					
		N/A					
		SOCIAL SECURITY ISSUES					
HR 82	Graves, Garret	Social Security Fairness Act of 2023 - This bill repeals provisions that reduce Social Security benefits for individuals who receive other benefits, such as a pension from a state or local government. The bill eliminates the government pension offset, which in various instances reduces Social Security benefits for spouses, widows, and widowers who also receive government pensions of their own. The bill also eliminates the windfall elimination provision, which in some instances reduces Social Security benefits for individuals who also receive a pension or disability benefit from an employer that did not withhold Social Security taxes. These changes are effective for benefits payable after December 2023.	1/09/2023			01/09/2023 Introduced in House	
		Status bar: Introduced Passed House Passed Senate To President Became Law					
		Impact: Public Pensions General Counsel and LACERS will continue to monitor.					

				STATUS			
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 2337	Richard E. Neal	Public Servants Protection and Fairness Act of 2021 - To amend title II of the Social Security Act to provide an equitable Social Security formula for individuals with noncovered employment and to provide relief for individuals currently affected by the Windfall Elimination Provision. Related to alternative formula equalizing benefits for certain individuals with noncovered employment, additional monthly payments for certain individuals whose benefit amount is reduced by the windfall elimination provision, improvement in social security account statements for public servants, study on availability of information relating to retirement plans, hold harmless for the social security trust funds. Status bar: Introduced Passed House Passed Senate To President Became Law	4/01/2021			04/01/2021 Referred to the Subcommittee on Social Security. Action By: Committee on Ways and Mean 04/01/2021 Referred to Ways and Means Committee	01/03/2023 Died in previous Congress.
<u>S 1302</u>	Sherrod Brown	Social Security Fairness Act of 2021 - Amend title II of the Social Security Act to repeal the Government pension offset and windfall elimination provisions. Status bar: Tracker: Introduced Passed Senate Passed House To President Became Law Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.	4/22/2021		04/22/2021 Referred to Finance Committee		01/03/2023 Died in previous Congress.

				STATUS			
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 82	Rodney Davis	Social Security Fairness Act of 2021 - This bill repeals provisions that reduce Social Security benefits for individuals who receive other benefits, such as a pension from a state or local government, eliminates the <i>government pension offset</i> , which in various instances reduces Social Security survivors' benefits for spouses, widows, and widowers who also receive government pensions of their own, and eliminates the <i>windfall elimination provision</i> , which in some instances reduces Social Security benefits for individuals who also receive a pension or disability benefit from an employer that did not withhold Social Security taxes. These changes are effective for benefits payable after December 2021.	01/04/2021			09/21/2022 Placed on the Union Calendar, Calendar No. 372	01/03/2023 Died in previous Congress.
		Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law				01/04/2021 Referred to the Subcommittee on Social Security. Action By: Committee on Ways and Means	
						Referred to Ways and Means Committee	
HR 480	Katie Porter	Medicare Economic Security Solutions Act – To amend title XVIII of the Social Security Act to limit the penalty for late enrollment under part B of the Medicare Program to 15 percent and twice the period of no enrollment, and to exclude periods of COBRA, retiree, and VA coverage from such late enrollment penalty.	01/25/2021			02/02/2021 Referred to Health Subcommittee	01/03/2023 Died in previous Congress.
		Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law					
		Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.					

				STATUS			
BILL NO	AUTHOR	TITLE/TOPIC	Introduced	Assembly	Senate	House	Final Status
HR 5834	Kevin Brady	Equal Treatment of Public Servants Act of 2021 - To amend title II of the Social Security Act to replace the windfall elimination provision with a formula equalizing benefits for certain individuals with noncovered employment, and for other purposes. Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.	11/03/2021			11/03/2021 Referred to the House Committee on Ways and Means.	01/03/2023 Died in previous Congress.
		MEDICAL/HEALTH ISSUES					
HR 3	Frank Pallone	Elijah E. Cummings Lower Drug Costs Act Now - This bill establishes several programs and requirements relating to the prices of prescription drugs; require the Department of Health and Human Services (HHS) to negotiate prices for certain drugs. The bill also makes a series of additional changes to Medicare prescription drug coverage and pricing and requires drug manufacturers to report specified information for certain high-cost drugs, and it provides funds for opioid epidemic initiatives and biomedical research.	04/22/2021			04/27/2021 Referred to Oversight and Investigations Subcommittee	01/03/2023 Died in previous Congress.
		Status bar: Tracker: Introduced Passed House Passed Senate To President Became Law					
		Impact: Failed to move forward in the prior legislative session. This bill will be removed from the next watch list.					

				STATUS	T
COUNCIL ITEM NO	AUTHOR	TITLE/TOPIC CITY OF LOS ANGELES	Introduced	Comment	Council Adopted
21-0295	Rodriguez	Los Angeles City Employees' Retirement System (LACERS) / Los Angeles Fire and police Pensions (LAFPP) / Personnel Department / City Labor Partners / Health Savings Accounts (HSA) Motion: Request the City Administrative Officer (CAO) with the assistance of the Los Angeles City Employees' Retirement System (LACERS), Los Angeles Fire and Police Pensions (LAFPP), the Personnel Department and the City's labor partners report back on the cost of Health Savings Accounts (HSA) insurance products, which would create reduced premiums to enable long term health care for members in retirement.	03/16/2021	Ongoing. Pending CAO Report back. 05/11/2021 – LACERS report back to CAO. See LACERS Board report on 5/11/2021 here. 04/14/2021 – Council Adopted item forthwith.	04/14/2021
<u>20-1537</u>	Koretz	First Responders / Public Safety Officers / COVID-19 Pandemic / Disability Retirement Benefits / LACERS Public Safety Tier 1 Enhancement Benefits Provision Motion: Direct the City Administrative Officer (CAO) report in 60 days in regard to providing disability retirement benefits for the aforementioned 83 public safety officers under the LACERS Public Safety Tier 1 Enhanced Benefits provision for the following groups: a. 24 LAPD Officers (General Fund) b. 27 Municipal Police Officers (General Fund) c. 24 Park Rangers (General Fund) d. Eight Port Police Officers (Proprietary Fund)	11/24/2020	Ongoing. Pending Ordinance being prepared by City Attorney. 03/25/2022 – Council adopted/action final of CAO's Report relative to enhanced disability benefits for public safety officers. 03/10/2022 – CAO Report back dated 3/9/22	03/25/2022
<u>20-1606</u>	Blumenfield- Bonin – et al.	City Healthcare Costs Reduction / Current Employees and Retirees Motion: Request in consultation with the Los Angeles City Employees' Retirement System (LACERS), Los Angeles Fire and Police Pensions (LAFPP), the Personnel Department and the City's labor partners, be directed to report to the Executive Employee Relations Committee and appropriate Council Committees with viable options and recommendations to reduce City healthcare costs for current employees and retirees, consistent with existing legal requirements, City commitments and considerations of equity.	12/15/2020	Ongoing. Pending CAO Report back. 04/27/2021 – LACERS report back to CAO. See LACERS Board report on 4/27/2021 here. 03/03/2021 – Council adopted/action final. 02/22/2021 – Budget and Finance Committee approved items. Report back pending. LACERS will work with the relevant departments and groups to report back.	03/03/2021

				STATUS	
COUNCIL ITEM NO	AUTHOR	TITLE/TOPIC	Introduced	Comment	Council Adopted
19-1577	Blumenfield- Bonin – et al.	 Los Angeles City Employees' Retirement System (LACERS) Investments / Climate Transition Risk Framework / Climate-Change Watch List Motion: Request that the Board of the Los Angeles City Employees' Retirement System (LACERS), with the assistance of the City Administrative Officer (CAO), report in six months with the following: a. Recommendations on the feasibility for the LACERS Board to adopt a similar Climate Transition Risk Framework to San Francisco Employees' Retirement System to identify investments in fossil fuel companies that pose an environmental and financial risk. b. Options to create a climate-change watch list that will report the riskiest investments in fossil fuel companies and develop a strategy to engage with the respective companies to reduce their oil and gas reserves and increase their efforts to move towards renewables and address climate change. c. A plan to divest from uncooperative fossil fuel companies and appropriately reinvest capital. d. A watch list to identify other LACERS investments such as in tobacco and firearm companies that contradict the City Council official positions and goal to provide a healthy and secure future for Angelenos. 	12/11/2019	Ongoing. Pending CAO Report back. 01/13/2023 – Council rereferred item to Budget, Finance and Innovation Committee, pursuant to Council Action of January 13, 2023, Council File No. 23-2000. 04/29/2021 – LACERS 04/28/2021 Report document referred to Budget and Finance Committee. See report here. 04/28/2021 – Report Document submitted by LACERS relative to investments in fossil fuel companies that pose an environmental and financial risk.	12/2/2020
21-0002-S135	Koretz- Blumenfield	 H.R. 82 (Davis) / Social Security Fairness Act of 2021 / Social Security Windfall Elimination Provision / Government Pension Offset Provisions / Surviving Spouse Motion: City Council resolution with the concurrence of the Mayor relative to LACERS request for City support of the Congressional Bill, HR 82, the Social Security Fairness Act of 2021 (pending) and any similar legislation which would rectify inequities resulting from the Social Security Windfall Elimination and Government Pension Offset Provisions. 	06/16/2021	Ongoing. Pending in Committee. 06/16/2021 – Resolution referred to the Rules, Elections, and Intergovernmental Relations Committee.	
<u>21-0600-S35</u>	Los Angeles City Council	Budget Recommendation / Personnel Department / Targeted Local Hire Programs / Yearly Goal Motion: Adopted Budget Recommendation: Instruct the Personnel Department, with the assistance of the City Administrative Officer and Labor Partners, to report to the Personnel, Audits, and Animal Welfare Committee on the steps necessary to achieve a goal of 750 hires a year through the Targeted Local Hire Programs. (Pursuant to adoption of the Mayor's 2021-22 Budget on May 20, 2021)	05/20/2021	No further action required. This item will be removed from the list. 10/13/2021 – Council adopted item. 08/27/2021 – Personnel Depart. Report submitted and referred to Personnel, Audits, and Animal Welfare Committee	10/13/2021

				STATUS	T
COUNCIL ITEM NO	AUTHOR	TITLE/TOPIC	Introduced	Comment	Council Adopted
21-0846	Blumenfield Koretz Krekorian Raman Ridley-Thomas Rodriguez Price	COVID-19 Virus / City Employees and Contractors / Vaccination Requirement / Condition of Employment Motion: The City Administrative Officer, Chief Legislative Analyst, Director of Personnel and City Attorney, in consultation with labor representatives, report back in fifteen (15) days on a proposed policy to require that all City employees and contractors, as a condition of employment, (1) be fully vaccinated from the COVID-19 virus; and (2) report their COVID-19 vaccination status to the appropriate City department.	07/28/2021	No further action required. Reference 21-0921. This item will be removed from the list. 08/18/2021 – Council adopted item. 08/17/2021 – Rules, Elections, and Intergovernmental Relations Committee waived consideration of item.	08/18/2021
<u>21-0551-S1</u>	Koretz Martinez	Local Business Contracting / Job Creation / Sales Tax Revenue / Local Investment / Procurement Process Motion: Controller to report on its letter to the Mayor and City Council, dated May 20,2021, which recommended a series of measures to increase contracting with local businesses, create jobs, and boost sales tax revenue to pay for additional city services.	06/15/2021	Ongoing. 01/13/2023 –Council rereferred item to Personnel, Audits, and Hiring Committee, pursuant to Council Action of January 13, 2023, Council File No. 23-2000. 08/04/2021 – Personnel, Audits and Animal Welfare approved as amended. 06/15/2021 – Motion referred to Personnel, Audits, and Animal Welfare Committee	
<u>21-1116</u>	Buscaino Cedillo Koretz Martinez Rodriguez	Facebook and Affiliated Companies / Photo-Sharing Program / Body Image / Mental Health Crisis / City Pension Funds Divestment Motion: The City's three pension fund systems and any other City investment entity, in coordination with the City Administrative Officer and the Office of Finance, be directed to begin the process of divestment of any of the City's funds which may be currently invested in Facebook and its affiliated companies.	10/05/2021	Ongoing. 01/13/2023 – Council rereferred item to Budget, Finance and Innovation Committee, pursuant to Council Action of January 13, 2023, Council File No. 23-2000. 1/11/2022 – LACERS and LAFPP joint letter response to City Council. See Board report on 1/11/2022 here. 10/05/2021 – Motion referred to Budget & Finance Committee	

				STATUS		
COUNCIL ITEM NO	AUTHOR	TITLE/TOPIC	Introduced	Comment	Council Adopted	
21-0565	Koretz Lee Buscaino	Part-Time Employees / Pro-Rated Benefits / Economic Assessment Motion: City Council instruct the Personnel Department with the assistance of the City Administrative Officer to report on the steps necessary to provide prorated benefits to all part-time employees of the City of Los Angeles as well as an economic assessment of providing these benefits.	05/25/21	Ongoing. 01/13/2023 – Council rereferred item to Personnel, Audits, and Hiring Committee, pursuant to Council Action of January 13, 2023, Council File No. 23-2000. 02/03/2022 – Personnel, Audits, and Animal Welfare Committee transmitted Council File to Budget and Finance Committee. 02/02/2022 – Personnel, Audits, and Animal Welfare Committee approved as amended. 01/25/2022 – Personnel Department report relative to part-time employee benefits referred to Budget and Finance Committee, Personnel, Audits, and Animal Welfare Committee.		
22-0088	City Employees Retirement System Department of Fire and Police Pensions	Facebook / Unilever / City Pension Fund Systems / Divestment Motion: The three City pension fund systems and any other City investment entity, in coordination with the City Administrative Officer and the Office of Finance, be directed to begin the process of divestment from Facebook. The three City pension fund systems and the Office of Finance also be directed to divest from Unilever.	01/21/2022	Ongoing. 01/13/2023 –Council rereferred item to Budget, Finance and Innovation Committee; Personnel, Audits, and Hiring Committee, pursuant to Council Action of January 13, 2023, Council File No. 23-2000. 01/24/2022 – City Employees Retirement System; Department of Fire and Police Pensions document(s) referred to Budget and Finance Committee; Personnel, Audits, and Animal Welfare Committee. 01/21/2022 – Joint Report from Department of Fire and Police Pensions and Los Angeles City Employees Retirement System, dated January 21, 2022. See Report here.		





MEETING: FEBRUARY 14, 2023

REPORT TO BOARD OF ADMINISTRATION

From: Neil M. Guglielmo, General Manager ITEM: IV - D

nifm. Dugliffine

SUBJECT: 977 N. BROADWAY PROJECT REPORT FOR THE QUARTER ENDING DECEMBER

31, 2022

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☒

Recommendation

That the Board receive and file this update report on the 977 N. Broadway Project and the attached presentation.

Executive Summary

Presented to the LACERS Board of Administration ("Board") is the 977 N. Broadway Project Report for the Quarter Ending December 31, 2022. This is the second quarterly report issued since the Board approved the Fiscal Year 2022-23 Capital Budget and Operating Expense Budget for LACERS' new Headquarters Building on May 24, 2022.

Discussion

The attached report provides detailed updates on the progress and status of the 977 N. Broadway Project.

Strategic Plan Impact Statement

Ownership in 977 North Broadway advances the Board Governance Goal and Organization Goal by being a cost-effective investment in the long-term as compared to leasing and provides LACERS with complete control over its administrative facilities adding to the organization's efficiency, effectiveness, and resiliency.

Prepared By: Horacio Arroyo, Senior Management Analyst

NMG/TB:ha

Attachments: 1. 977 N. Broadway Project Report for the Quarter Ending December 31, 2022



BOARD Meeting: 02/14/23 Item IV-D Attachment 1

977 N. BROADWAY PROJECT REPORT FOR QUARTER ENDING DECEMBER 31, 2022

For Los Angeles City Employees' Retirement System



TABLE OF CONTENTS

- Executive Summary
- Capital Project Summary
- Project Timeline
- Financial Overview



EXECUTIVE SUMMARY



The Headquarters Move Project completed design scopes, building enclosure work, tenant improvements, and IT migration has been completed. The furniture installation scope is near completion.

Project Timeline

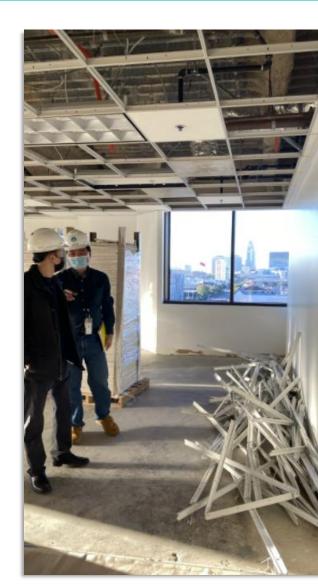
- Working through the permitting processes and supply chain issues have been the primary drivers of the extended construction schedule and move-in delays.
- ❖ LACERS completed our initial move from LA Times to 977 N. Broadway on December 22, 2022.
- ❖ LACERS occupancy of the building is now projected by mid-March 2023.

Budget

- ❖ LACERS has spent 83.60% of the capital budget for the 977 N. Broadway Project.
- Ongoing efforts to mitigate the effects of supply-chain disruption on budget and project schedule.

Completed Milestones

- Façade/Enclosure/Abatement construction work has been completed.
- $\ \, \ \, \ \,$ Seismic strengthening construction work has been completed.
- Furniture/finishes selections have been delivered.
- IT infrastructure migration completed. The Server Room is now fully operational.
- FitWel Certification application submitted and under review.
- Carpet installation has been completed on all floors.





Cost Control

- ❖ Realign project priorities to stay within the approved budget.
- ❖ Regular communications with contractors, vendors, manufacturers, and suppliers to prepare and mitigate supply-chain disruptions and cost increases.
- Change orders due to permitting and lead time delays in the project, modifications required after the tenant improvement work, and scope changes were reviewed to ensure the expense was justified and tracked.

Pre-Construction

- Internal demolition has been completed.
- ❖ Pre-construction for make-ready work was completed.
- ❖ Design work on security and gate infrastructure was submitted and approved by LADBS.
- ❖ Electrical work package was approved, issued, and work contracted.
- ❖ Pre-construction estimates completed for tenant improvement, low-voltage, and furniture.
- ❖ FitWel certification gap analysis performed and consultant contracted.

Permitting

Permit applications approved by LADBS

Floors 1, 3, 4, and 5 2nd Floor Package

Plumbing

Diesel Generator

Electrical

Parking Spaces

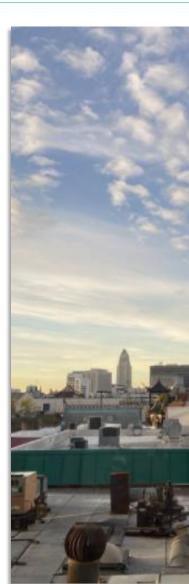
HVAC

Mechanical

Fall Arrest Anchorage Security Gate/Fence

Structural work for Nat Gas Generator

❖ SCAQMD Permit to operate new backup diesel generator - Approved





Construction Achievements

- ❖ Seismic reinforcement work has been completed.
- ❖ Façade/Enclosure/Abatement work has been completed.
- * Roof replacement work has been completed.
- ❖ Parking Garage paint/restriping has been completed.
- ❖ New diesel generator has been placed on the roof along with a 50-gallon tank. A fuel filling station has been installed on the ground floor that will pump diesel up to the 50-gallon tank on the roof. The final installation of fuel lines is complete.
- ❖ Majority of Tenant Improvement work is complete except for touch-up work.
- Majority of furniture delivery and installation is complete except for minor items due to manufacturer supply-chain delays.

Technology Milestones

- ❖ Security Equipment Installed Pinnacle Solutions, the technology consultant for the project, has installed all security cameras and are in the configuration phase. Panic button installation and configuration are being coordinated with ITA, the Pinnacle Security team, and Verkada (the manufacturer of the security hardware).
- ❖ AV Equipment Installation Pinnacle has installed Audio/Video equipment throughout the floors. Installation includes conference room monitors, video conferencing equipment, microphones, paging speakers, and mass communication equipment.
- ❖ Information Technology Migration The 977-server room has been officially turned over to LACERS Systems team. Systems has completed the migration of equipment from the LA Times to 977 N. Broadway.
- ❖ Network Equipment Procurement The new headquarters has been equipped with the latest, best-of-breed, network appliances inclusive of routers, firewalls, switches, wireless access points, and security devices.





Initial Move Complete

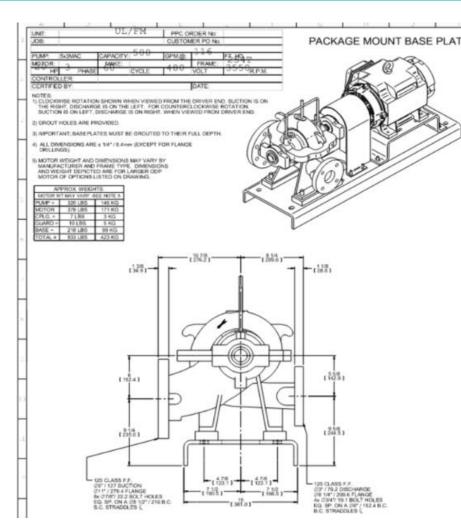
- On December 22 and 23, LACERS completed the initial move from LA Times to 977 N. Broadway.
- LACERS identified approximately 40 staff members who could not exclusively work remotely.
- ❖ LACERS' Admin and Systems worked to ensure that workstations, equipment, and supplies remained at LA Times to allow staff still working there to continue to their work.
- ❖ To ensure LACERS surrenders the LA Times space by March 31, LACERS has scheduled the second move for March 3, 2023.
- ❖ Subsequently, the decommissioning of our suite at LA Times will be carried out in mid-March.
- ❖ In addition, to ensure continuity of operations should LACERS not be able to occupy 977 N. Broadway by March 3rd, LACERS is reaching out to other City departments to identify workspace for staff that cannot work remotely.
- ❖ LACERS will surrender our leased space to Onni by March 31, 2023.





Fire Pump Inspection Delays

- LACERS worked diligently with LAFD to address a Notice of Violations for Reg IV Noncompliance.
- ARC Engineering, the General Contractor, and Electrical subcontractors successfully designed temporary and permanent solutions to address LAFD's concerns.
- The temporary solution has been approved and implemented to secure occupancy status, projected for early March.
- This temporary solution allows LAFD to carry out the Fire & Life Safety inspections required for LACERS' occupancy. Testing is expected in early February.
- ❖ Following the completion of all the Fire & Life Safety testing, LACERS will implement a previously approved permanent solution.





Other Fire & Life Safety (FLS) Inspection Delays

- ❖ Security Gate
 - LACERS has been working with LAFD to complete initial courtesy inspections that focus on FLS equipment.
 - ❖ After a delay of several weeks, LAFD confirmed that the front gate can continue to be installed as previously approved.
- Inspection also resulted in several changes to newlyinstalled equipment such as Exit Signs, addition of new fire alarm sub panels, etc.
- Currently, waiting for a comprehensive building-wide Fire & Life Safety test that would bring LACERS closer to occupancy.
- ❖ Inspections should be completed in late February granting LACERS the ability to occupy the building.
- The corrections LACERS has received have caused delays in the schedule and have triggered new budget change-orders that require the use of contingency funds.
- Staff continues to monitor all new expenses and anticipate closing out the project within the approved budget.





During Q2, the furniture delivery and installation made significant progress. Due to supply-chain constraints, delivery and installation of some final furniture pieces is still ongoing. Completion is expected by March 1, 2023.

October 2022





December 2022







The tenant improvement scope was largely completed during Q2. The Reception and Board Room areas were completed and fully furnished during this quarter.

October 2022





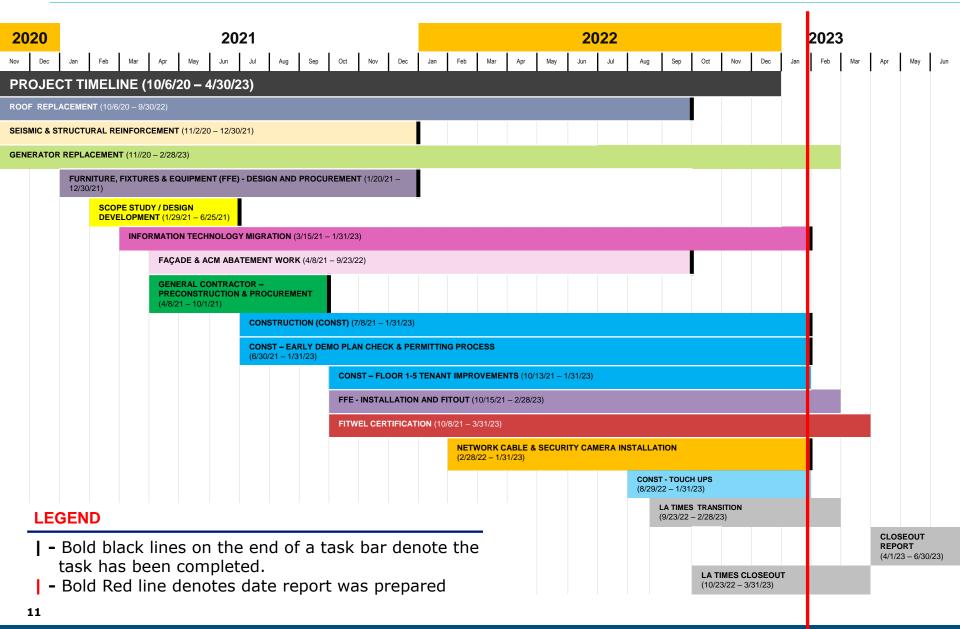
December 2022





PROJECT TIMELINE





FINANCIAL OVERVIEW



FY 2022/23 Q2 Financial Status Report

(October 2022 – December 2022)

Budget	Budgeted Amount	Actuals FYTD	% Budgeted Amount Expended FYTD	Budget Variance Comments
Operating	\$1,543,200	\$584,461	36.18%	
Capital	\$19,878,381	\$17,467,969	87.43%	
Capital Contingency	\$100,000	0	-	Board Approved additional contingency funds on September 27.
Total	\$21,593,773	\$18,052,430	83.60%	

NOTE: The data presented in this chart reflect expenses paid out through our Property Management Account.

977 N BROADWAY



LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

202 W. FIRST STREET, SUITE 500

LOS ANGELES, CA 90012

(800) 779-8328 / RTT: (888) 349-3996

LACERS.ORG



Agenda of: Feb. 14, 2023

Item No: V - A

MINUTES OF THE REGULAR MEETING BOARD OF ADMINISTRATION LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health or safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Board of Administration's January 10, 2023 meeting will be conducted via telephone and/or videoconferencing.

January 10, 2023

10:01 a.m.

PRESENT via Videoconferencing: President: Nilza R. Serrano

Vice President: Elizabeth Lee

Commissioners: Annie Chao

Thuy Huynh Janna Sidley Sung Won Sohn Michael R. Wilkinson

Legal Counselor: Anya Freedman

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

The Items in the Minutes are numbered to correspond with the Agenda.

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PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE BOARD'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA – *THIS WILL BE THE ONLY OPPORTUNITY FOR PUBLIC COMMENT* – **PRESS *9 TO RAISE HAND DURING PUBLIC COMMENT** – President Serrano asked if any persons wanted to make a general public comment to which there was no response.

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BOARD PRESIDENT VERBAL REPORT – President Serrano welcomed everyone to 2023 and stated if she or Vice President Lee lose connection, Commissioner Wilkinson will chair the meeting in their absence.

GENERAL MANAGER VERBAL REPORT

- A. REPORT ON DEPARTMENT OPERATIONS Neil M. Guglielmo, General Manager, advised the Board of the following items:
 - Government Finance Officers Association announced that LACERS has received GFOA's Award for Outstanding Achievement
 - ERIP Liability Payments Quarter ending 12/31/2022
 - LACERS HQ Update
 - Retirement Services Division Update
 - Health Benefits Administration Update
 - Member Services Update
- B. UPCOMING AGENDA ITEMS There were no items discussed.

IV

RECEIVE AND FILE ITEMS

- A. ETHICAL CONTRACT COMPLIANCE REPORT NOTIFICATION TO THE BOARD This report was received by the Board and filed.
- B. BENEFITS PAYMENTS APPROVED BY GENERAL MANAGER This report was received by the Board and filed.
- C. MONTHLY REPORT ON SEMINARS AND CONFERENCES FOR NOVEMBER 2022 This report was received by the Board and filed.

Vice President Lee lost connection to the meeting at 10:21 a.m. and rejoined the meeting at 10:25 a.m.

Item V-A taken out of order.

V١

CONSENT ITEM(S)

Commissioner Chao moved approval of Consent Items VI-A and VI-B, seconded by Commissioner Sidley, and adopted by the following vote: Ayes, Commissioners Chao, Huynh, Sidley, Sohn, Wilkinson, Vice President Lee, and President Serrano -7; Nays, None.

- A. APPROVAL OF MINUTES FOR THE REGULAR MEETINGS OF NOVEMBER 22, 2022 AND DECEMBER 13, 2022 AND POSSIBLE BOARD ACTION
- B. FINDINGS TO CONTINUE TELECONFERENCE MEETINGS AND DETERMINATION THAT COVID-19 STATE OF EMERGENCY CONTINUES TO DIRECTLY IMPACT THE ABILITY OF MEMBERS TO MEET SAFELY IN PERSON AND POSSIBLE BOARD ACTION

CONTINUE HOLDING LACERS BOARD AND COMMITTEE MEETINGS VIA TELECONFERENCE AND/OR VIDEOCONFERENCE

RESOLUTION 230110-A

WHEREAS, LACERS is committed to preserving public access and participation in meetings of the Board of Administration; and

WHEREAS, all LACERS Board and Committee meetings are open and public, as required by the Ralph M. Brown Act (Cal. Gov. Code 54950 – 54963), so that any member of the public may attend and participate as the LACERS Board and Committees conduct their business; and

WHEREAS, the Brown Act, Government Code Section 54953(e), makes provisions for remote teleconferencing participation in meetings by members of a legislative body, subject to the existence of certain conditions; and

WHEREAS, the COVID-19 State of Emergency proclaimed by the Governor on March 4, 2020 remains active; and

WHEREAS, on October 12, 2021, the Board met via teleconference and determined by majority vote, pursuant to Government Code Section 54953(e)(1)(B)-(C), that due to the COVID-19 State of Emergency, meeting in person would present imminent risks to the health or safety of attendees; and

WHEREAS, the Board has reconsidered the circumstances of the State of Emergency; and

WHEREAS, COVID-19 remains a public health concern in Los Angeles, with substantial or high community transmission;

NOW THEREFORE, BE IT RESOLVED that pursuant to Government Code Section 54953(e)(1)(B)-(C), the Board finds that holding Board and Committee meetings in person would present imminent risks to the health or safety of attendees.

BE IT FURTHER RESOLVED that pursuant to Government Code Section 54953(e)(3)(A) and (B)(i), the Board finds that the COVID-19 State of Emergency continues to directly impact the ability of Board and Committee members to meet safely in person.

VII

BOARD/DEPARTMENT ADMINISTRATION

A. EXTEND CONTRACT WITH MOSS ADAMS LLP (MOSS ADAMS) FOR ONE YEAR AND AMEND CONTRACT'S SCOPE OF SERVICES TO INCLUDE THE ANNUAL FINANCIAL AUDIT OF 977 BUILDING OPERATIONS AND POSSIBLE BOARD ACTION – Melani Rejuso, Departmental Audit Manager, presented and discussed this item with the Board. After a five minute discussion, Commissioner Wilkinson moved approval of the following Resolution:

CONTRACT EXTENSION WITH MOSS ADAMS LLP (MOSS ADAMS) FOR FINANCIAL AND OTHER AUDIT SERVICES

RESOLUTION 230110-B

WHEREAS, LACERS currently has a three-year contract from July 1, 2020 to June 30, 2023 with Moss Adams, LLP (Moss Adams) to provide financial and other audit services;

WHEREAS, LACERS implemented a competitive bidding process in 2020 that resulted in the selection of Moss Adams to provide audit services;

WHEREAS, Moss Adams provided audit services and required audit reports related to LACERS financial statements, 115 Trust Account (Health/Dental accounts), and employers' (City, Airports and Harbor) allocations and pension amounts;

WHEREAS, LACERS continues to require a competent Financial Auditor for the purpose of providing audited financial information for annual actuarial valuation and for the issuance of LACERS' and the City's Annual Comprehensive Financial Reports;

WHEREAS, Charter Section 371(e)(10) provides exemption from the competitive bidding process for contracts that are "undesirable, impractical or impossible";

WHEREAS, the quality and reliability of audit reports increase over time as an auditor becomes more familiar with the subject matter of its audits, and industry best practices recommend retaining an auditor for at least five years;

WHEREAS, conducting a competitive bidding process requires the expenditure of LACERS resources and trust funds and devotion of time by LACERS' Board of Administration;

WHEREAS, the foregoing supports a finding that conducting a competitive bidding process at this time is undesirable and impractical;

WHEREAS, LACERS requires financial auditing services related to its ownership of the headquarters building located at 977 North Broadway Boulevard; and

WHEREAS, LACERS and Moss Adams LLP are both amenable to amending the current contract and extending it for an additional one year.

NOW, THEREFORE, BE IT RESOLVED, that the Board:

- 1. Make a determination that a competitive bidding process for financial and other audit services would not be advantageous pursuant to City Charter Section 371(e)(10);
- 2. Approve a one-year extension to LACERS' contract with Moss Adams LLP for financial and other audit services, for the period beginning July 1, 2023, and ending June 30, 2024. The period extension includes an annual fee adjustment of \$1,000;
- 3. Approve amendments to the scope of services for Moss Adams' contract to include the annual financial audit of 977 building operations starting with the audit of FY2022. The annual audit fee starts at \$29,500 with an annual fee adjustment of \$1,000;
- 4. Authorize the General Manager to approve and execute the necessary contract amendment documents with Moss Adams LLP, subject to the approval of the City Attorney as to form, and make

any necessary clerical, typographical, or technical corrections to this document.

Which motion was seconded by Commissioner Sidley, and adopted by the following vote: Ayes, Commissioners Chao, Huynh, Sidley, Sohn, Wilkinson, Vice President Lee, and President Serrano -7; Nays, None.

Item V-A taken out of order.

V

COMMITTEE REPORT(S)

A. INVESTMENT COMMITTEE VERBAL REPORT FOR THE MEETING ON DECEMBER 13, 2022 - Vice President Lee stated that Northern Trust presented a report to the Committee regarding the Securities Lending Activity Report for the period July 1, 2021 to June 30, 2022. The Committee also approved a contract with Institutional Shareholder Services Inc. and discussed a commitment to NB Partners Fund IV, LP in closed session.

VII

BOARD/DEPARTMENT ADMINISTRATION

B. TRIENNIAL BOARD POLICY REVIEW: SECTION 2.0 GOVERNING STATUTES AND POSSIBLE BOARD ACTION – John Koontz, Senior Management Analyst, presented this item to the Board. Commissioner Wilkinson moved approval, seconded by Commissioner Chao, and adopted by the following vote: Ayes, Commissioners Chao, Huynh, Sidley, Sohn, Wilkinson, Vice President Lee, and President Serrano -7; Nays, None.

VIII

INVESTMENTS

- A. CHIEF INVESTMENT OFFICER VERBAL REPORT INCLUDING DISCUSSION ON THE PORTFOLIO EXPOSURE TO GLOBAL EVENTS Rod June, Chief Investment Officer, reported on the portfolio value of \$21.13 billion as of January 9, 2023. Mr. June discussed the following items:
 - Jennifer Choi appointed CEO of Institutional Limited Partners Association (ILPA) in December 2022; Allison Nankivell is the Chair of the Board of Directors
 - Kroner Center for Financial Research annual meeting to be held on January 20, 2023 at UCSD
 - National Association of Securities Professionals (NASP) "A Day of Education in Private Equity" conference is being held on March 23, 2023, in Los Angeles
 - Future Agenda Items: Presentation of the Real Estate Portfolio ending June 30, 2022; Contract with Principal Global investors; and Contract with Dimensional Fund Advisors

Mr. June shared that the current Russian exposure for LACERS is 1.4 basis points.

B. PRESENTATION BY AKSIA CA LLC OF THE PRIVATE EQUITY PORTFOLIO PERFORMANCE REVIEW FOR THE PERIOD ENDING JUNE 30, 2022 – Jeff Goldberger,

Managing Director, Heidi Poon, Managing Director, and Trevor Jackson, Managing Director, with Aksia CA LLC, presented and discussed this item to the Board for 30 minutes.

C. CONTRACT WITH INSTITUTIONAL SHAREHOLDER SERVICES INC. REGARDING PROXY VOTING SERVICES AND POSSIBLE BOARD ACTION – Ellen Chen, Investment Officer II, presented this item to the Board. Vice President Lee moved approval of the following Resolution:

CONTRACT RENEWAL INSTITUTIONAL SHAREHOLDER SERVICES INC. PROXY VOTING SERVICES

RESOLUTION 230110-C

WHEREAS, LACERS' current five-year contract with Institutional Shareholder Services Inc. (ISS) for proxy voting services expires on February 28, 2023; and,

WHEREAS, a contract renewal with ISS will allow LACERS to uphold good governance practices by managing and exercising LACERS' proxy voting rights; and,

WHEREAS, on December 13, 2022, the Investment Committee considered and concurred with a staff recommendation for a five-year contract renewal with ISS; and

WHEREAS, on January 10, 2023, the Board approved the Investment Committee's recommendation for a five-year contract renewal with ISS.

NOW, THEREFORE, BE IT RESOLVED, that the General Manager is hereby authorized to approve and execute a contract subject to satisfactory business and legal terms and consistent with the following services and terms:

Company Name: Institutional Shareholder Services Inc.

Service Provided: Proxy Voting Services

Effective Dates: March 1, 2023 through February 28, 2028

<u>Duration</u>: Five years

Annual Fee: \$71,910

Which motion was seconded by Commissioner Sidley, and adopted by the following vote: Ayes, Commissioners Chao, Huynh, Sidley, Sohn, Wilkinson, Vice President Lee, and President Serrano -7; Nays, None.

President Serrano recessed the Regular Meeting at 11:20 a.m. to convene in Closed Session discussion.

D. CLOSED SESSION PURSUANT TO GOVERNMENT CODE SECTION 54956.81 TO CONSIDER A COMMITMENT TO NB PARTNERS FUND IV, LP AND POSSIBLE BOARD ACTION

President Serrano reconvened the Regular Meeting at 11:27 a.m.	
IX	
OTHER BUSINESS – There was no other business.	
X	
NEXT MEETING: The next Regular meeting of the Board is scheduled for at 10:00 a.m. at LACERS, 202 W. 1st Street, Suite 500, Los Angeles, Coand/or videoconferencing. Please continue to view the LACERS website public access to Board meetings while response to public health of coronavirus continue.	A 90012, and/or via telephone site for updated information on
XII	
ADJOURNMENT – There being no further business before the Board the Meeting in honor of Scott Minerd, who passed away on Decembe Investment Officer at Guggenheim Partners and helped to improve Angeles, at 11:30 a.m.	r 21, 2022, and was the Chief
	Nilza R. Serrano President
Neil M. Guglielmo Manager-Secretary	





REPORT TO BOARD OF ADMINISTRATION MEETING: FEBRUARY 14, 2023

From: Neil M. Guglielmo, General Manager ITEM: V - B

SUBJECT: FINDINGS TO CONTINUE TELECONFERENCE MEETINGS AND DETERMINATION

THAT COVID-19 STATE OF EMERGENCY CONTINUES TO DIRECTLY IMPACT THE ABILITY OF MEMBERS TO MEET SAFELY IN PERSON AND POSSIBLE BOARD

ACTION

ACTION:
☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☐

Recommendation

That the Board approve continuing to hold LACERS Board and Committee meetings via teleconference and/or videoconference, under Government Code Sections 54953(e)(1)(B)-(C) and 54953(e)(3)(A) and (B)(i).

Discussion

LACERS is committed to preserving public access and participation in meetings of the Board of Administration. All LACERS Board and Committee meetings are open and public, as required by the Ralph M. Brown Act (Cal. Gov. Code 54950 – 54963), so that any member of the public may attend and participate as the LACERS Board and Committees conduct their business. The Brown Act, Government Code Section 54953(e), makes provisions for remote teleconferencing participation in meetings by members of a legislative body, subject to the existence of certain conditions. The COVID-19 State of Emergency proclaimed by the Governor on March 4, 2020 remains active: COVID-19 remains a public health concern in Los Angeles, with substantial or high community transmission.

The Board met via teleconference on October 12, 2021, and determined by majority vote, pursuant to Government Code Section 54953(e)(1)(B)-(C), that due to the COVID-19 State of Emergency, meeting in person would present imminent risks to the health or safety of attendees.

Strategic Plan Impact Statement

The Board's action on this item aligns with the LACERS Strategic Plan Goal to uphold good governance practices which affirm transparency, accountability, and fiduciary duty.

Prepared By: Ani Ghoukassian, Commission Executive Assistant II

Attachment: Proposed Resolution

Board Meeting: 02/14/23

Item: V-B Attachment

CONTINUE HOLDING LACERS BOARD AND COMMITTEE MEETINGS VIA TELECONFERENCE AND/OR VIDEOCONFERENCE

PROPOSED RESOLUTION

WHEREAS, LACERS is committed to preserving public access and participation in meetings of the Board of Administration; and

WHEREAS, all LACERS Board and Committee meetings are open and public, as required by the Ralph M. Brown Act (Cal. Gov. Code 54950 – 54963), so that any member of the public may attend and participate as the LACERS Board and Committees conduct their business; and

WHEREAS, the Brown Act, Government Code Section 54953(e), makes provisions for remote teleconferencing participation in meetings by members of a legislative body, subject to the existence of certain conditions; and

WHEREAS, the COVID-19 State of Emergency proclaimed by the Governor on March 4, 2020 remains active; and

WHEREAS, on October 12, 2021, the Board met via teleconference and determined by majority vote, pursuant to Government Code Section 54953(e)(1)(B)-(C), that due to the COVID-19 State of Emergency, meeting in person would present imminent risks to the health or safety of attendees; and

WHEREAS, the Board has reconsidered the circumstances of the State of Emergency; and

WHEREAS, COVID-19 remains a public health concern in Los Angeles, with substantial or high community transmission;

NOW THEREFORE, BE IT RESOLVED that pursuant to Government Code Section 54953(e)(1)(B)-(C), the Board finds that holding Board and Committee meetings in person would present imminent risks to the health or safety of attendees.

BE IT FURTHER RESOLVED that pursuant to Government Code Section 54953(e)(3)(A) and (B)(i), the Board finds that the COVID-19 State of Emergency continues to directly impact the ability of Board and Committee members to meet safely in person.





MEETING: February 14, 2023

REPORT TO BOARD OF ADMINISTRATION

From: Neil M. Guglielmo, General Manager ITEM: VI-A

SUBJECT: REVIEW OF SAFETY STANDARDS FOR A RETURN TO IN-PERSON MEETINGS AND

SERVICES AND POSSIBLE BOARD ACTION

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☐

Recommendation

That the Board:

- Authorize LACERS General Manager to apply the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023) at LACERS Headquarters located at 977 N. Broadway and rescind the Board's previously adopted LACERS COVID-19 Board Meeting Standards:
- 2. Direct LACERS General Manager to take necessary actions to apply the February 1, 2023 "Revised COVID-19 City Updates Memo" and the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023) at 977 N. Broadway; and,
- Authorize LACERS General Manager to make necessary updates to LACERS application of the City of Los Angeles COVID-19 Workplace Safety Standards based on changes in federal, state, and local regulatory mandates, including City ordinances on an ongoing basis.

Executive Summary

The LACERS COVID-19 Board Meeting Safety Standards (CVSS) were approved to promote the health, safety, and welfare of Members, staff, contractors, the Board and the public, by requiring proof of full vaccination with a COVID-19 vaccine to enter Board and Committee meetings. The CVSS also echoed the mask wearing and social distancing requirements of the City of Los Angeles (City).

LACERS recommends that the Board rescind the CVSS and requests that LACERS implement the revised City standards for all operations at 977 N. Broadway (LACERS Headquarters). This request is in line with the Board's previous approval of these standards being periodically updated to incorporate changes in federal, state, and local regulatory mandates, including City ordinances, but LACERS is now seeking to establish one standard for all operations at LACERS Headquarters, including Board meetings.

Discussion

Safety Standards

On August 24, 2021, the County of Los Angeles' Department of Public Health (DPH) issued a memorandum titled "Evaluation of COVID-19 Vaccine Requirements for Indoor Public Spaces," which explained that "because Los Angeles is and has remained at a level of high community transmission, additional layers of protection in certain indoor settings where COVID-19 transmission is more likely to occur must be considered to avoid further negative impacts to the populous and business community." DPH recommended a vaccination requirement for "indoor public settings that present a higher risk of transmission...because of exceptions to the universal indoor masking requirement, increased levels of physical exertion by customers, or large numbers of people at an establishment or the close proximity of employees and/or customers for long periods of time." DPH allowed for municipalities to require more stringent measures.

On September 17, 2021, DPH issued an Order titled "Responding Together at Work and in the Community" (Order) with the stated goal of slowing the continuously high trends in and level of transmission of COVID-19. The Order advises "[t]he best way to reduce the current level of community transmission and to prevent future surges is for everyone who is eligible, including those who have recovered from a COVID-19 infection, to get fully vaccinated as soon as possible." Specifically, the DPH Order mandates proof of vaccination or a negative COVID-19 test for Mega Events defined as events with large crowds, including indoor events with greater than 1,000 attendees and outdoor events with greater than 10,000 attendees. The DPH Order also required proof of vaccination for all indoor spaces at bars, breweries, wineries, distilleries, nightclubs, and lounges. The locations covered under the DPH Order were required to follow the mandates of the Order. The Order also strongly recommended that operators of all restaurants verify the COVID-19 vaccination status of their patrons for indoor service. The Order does not supersede any stricter limitation imposed by a local public entity and, in announcing the Order, the DPH applauded cities across the County for creating additional safeguards in spaces where people are intermingling with the use of targeted vaccination mandates.

On October 6, 2021, the Los Angeles City Council (City Council) adopted Ordinance No. 187219 requiring proof of vaccination with a COVID-19 vaccine to enter certain indoor public locations, large events, and City buildings. The ordinance sought to promote the health, safety, and welfare of its workers, contractors, and the public and to encourage vaccination, by requiring proof of full vaccination with a COVID-19 vaccine to enter recreational locations and events within the City that routinely allow for higher-risk interaction, and City buildings where City workers and contractors put themselves at risk to provide services to the general public.

On December 14, 2021, the Board adopted the LACERS COVID-19 Board Meeting Safety Standards meant to protect Board Members, staff, contractors, Members, and the public and prevent the spread of COVID-19. The standards define the types of requirements that Board Members, staff, contractors, Members, and the public must follow to enter the LACERS Headquarters for Board and Committee meetings including providing proof of vaccination, wearing a face covering, and maintaining social distancing.

Since the Board's adoption of the LACERS COVID-19 Board Meeting Safety Standards, the circumstances and conditions that existed in 2020 and 2021 described in Section 8.22 of the Los

Angeles Administrative Code that warranted the "Declaration of Local Emergency" of March 4, 2020, and City Council Ordinance No. 187219 in October of 2021, have adjusted to a level currently manageable by the regularly constituted branches and departments of the City government.

On September 2, 2022, based on the Centers for Disease Control and Prevention (CDC) indicators and thresholds, the CDC moved LA County into the Low Community Level for severe illness in the community from COVID-19, reflecting minimal stress on the hospital system in LA County associated with COVID 19. As a result, on September 20, 2022, the California Department of Public Health issued "Guidance for Face Coverings" revising the universal indoor masking requirement. The significant revision to the document was downgrading the mask requirement to wearing a mask is a "strong recommendation" to all persons based on personal preference and informed by their own personal level of risk.

Shortly thereafter, on September 22, 2022, the DPH issued a Health Officer Order entitled "Responding Together at Work and in the Community," aligning the State of California's guidance regarding masks. Despite the change in the requirement, the County required employers to continue to offer well-fitting medical masks and respirators at no cost to their employees who work indoors and have contact with other workers, customers, or members of the public. Although some of the workplace standards have changed, the County reinforced that employers and employees continue to be subject to California Division of Occupational Safety and Health (Cal/OSHA) COVID-19 Prevention Emergency Temporary Standards. On October 3, 2022, the City of Los Angeles issued revised COVID-19 Workplace Safety Standards (City Standards) which reflected the changes to the mask mandate and updates to the social distancing requirement.

On November 9, 2022, LACERS presented the Board supplemental security measures and implementing vaccine verification checks when in-person meetings resumed. Responsive to the City Standards (Revised October 3, 2022), the Board approved the recommended adding of funding for security guard to verify the vaccination status of visitors attending Board meetings. In the event the Board rescinds the CVSS and aligns with City Standards, a vaccine verification check would no longer be required.

On December 6, 2022, the Mayor submitted a resolution recommending that the City Council terminate the local emergency of March 4, 2020. Subsequently, on December 7, 2022, the Los Angeles City Council adopted the Mayor's recommendation terminating the local emergency effective February 1, 2023. On January 5, 2023, the City's Emergency Management Department, as part of its ongoing COVID-19 Safety Officer Briefings, informed City departments that although the Declaration of Local Emergency is set to expire, the City Standards will continue to be in effect and updated as the Cal/OSHA's COVID-19 Prevention Emergency Temporary Standards would still be in effect. Correspondingly, on February 1, 2023, the City of Los Angeles issued the "Revised COVID-19 City Updates Memo" providing the City's minimum requirements for preventing the resurgence of COVID-19, solidifying the lessons learned during the pandemic, and preparing City departments for the next pandemic. This memorandum was followed by revised City Standards on February 3, 2023.

Most significantly, the revised City Standards states that proof of vaccination will no longer be required for members of the public to enter indoor portions of City facilities. Also, in conforming with City

Standards, masking would no longer be required at LACERS Board meetings, rather it would be "strongly recommended."

This is a significant juncture for updating LACERS Safety Standards as LACERS Headquarters nears completion and as existing Board teleconferencing allowances are set to expire.

Remote Board Meetings

On March 4, 2020, because of the COVID-19 pandemic, Governor Gavin Newsom issued Governor's Executive Order N-29-20 suspending certain Brown Act requirements and allowing the Board to meet remotely. As the Executive Order was set to expire, Assembly Bill 361 (AB 361) was passed in September 2021 to extend continued flexibility for remote meetings during the COVID-19 State of Emergency.

On September 13, 2022, Assembly Bill 2449 (AB 2449) was signed by the Governor effective on January 1, 2023. AB 2449 provides additional but limited options and new rules for teleconferencing under the Brown Act. Notably, the bill sets rules for a Board member's remote participation, but agencies may continue to hold teleconference meetings at which the public participates remotely. AB 2449 allows the legislative body of a local agency to use teleconferencing without complying with the traditional Brown Act teleconferencing rules or the modified AB 361 rules in certain circumstances. To do so, however, at least a quorum of the members of the legislative body must participate in person from a singular physical location identified on the agenda, which location will be open to the public and within the boundaries of the local agency.

In addition to the above, AB 2449 also contains several provisions that allow a member of the Board to participate remotely if the member notifies the Board prior to the beginning of the meeting and of their need to participate remotely for a "just cause" or due to "emergency circumstances." Moreover, AB 2449 establishes that remote participation, whether for "just cause" or due to "emergency circumstances," cannot exceed three consecutive months or twenty percent of regular meetings per calendar year. Moreover, a member of the Board is limited to two virtual attendances based on "just cause" per calendar year. Utilization of AB 2449 will require video broadcast of Board meetings, which LACERS is preparing for.

For the past year, LACERS has relied on AB 361 to hold remote meetings by teleconference, balancing the risks posed by COVID-19 against the need for public access. However, effective February 28, 2023, the Governor's state of emergency will expire requiring the Board to make adjustments including a return to in-person meetings. The transition to in-person meetings underscores the need to revisit the protocol that shall be followed during the Board meetings including mask requirements and verification of vaccination status. Beyond these safety standards, LACERS will propose putting additional security enhancements in place during Board meetings including mobile magnetometers and security officers during the upcoming budget process. These enhancements are part of LACERS' role of managing the new headquarters.

Considering this change in operations, should the Board desire to keep the CVSS in place, in lieu of Recommendation No. 1, the Board may opt to adopt the Updated Redlined Version of the COVID-19 Board Meeting Safety Standards (Attachment 2) which makes several administrative updates in accordance with the revised City Standards but keeps the vaccination check requirement and masking

in place for Board meetings. All other operations at LACERS Headquarters would default to the City Standards unless otherwise directed by the Board.

Strategic Plan Impact Statement

The Board's action on this item aligns with the LACERS Strategic Plan Goal of Board Governance to uphold good governance practices which affirm transparency, accountability, and fiduciary duty.

Prepared By: Isaias Cantú, Senior Management Analyst II

NMG/TB/EA:ic

Attachments:

- 1. Proposed Board Resolution
- 2. Redlined Version of the COVID-19 Board Meeting Safety Standards
- 3. February 1, 2023 "Revised COVID-19 City Updates Memo"
- 4. City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023)
- 5. Photographs of the Board room located at 977 N. Broadway

BOARD Meeting: 2/14/23 Item VI-A

Item VI-A Attachment 1

LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM (LACERS)

BOARD MEETING SAFETY STANDARDS

PROPOSED RESOLUTION

WHEREAS, on March 4, 2020, the Mayor executed a "Declaration of Local Emergency" based on conditions of disaster or of extreme peril to the safety of persons and property that had arisen both internationally and within the United States, including throughout the City of Los Angeles, as a result of the introduction of the novel coronavirus (COVID-19), a novel communicable disease, which was first detected in 2019;

WHEREAS, on October 6, 2021, City Council adopted Ordinance No. 187219 requiring proof of vaccination with a COVID-19 vaccine to enter certain indoor public locations, large events, and City buildings to promote the health, safety, and welfare of its workers, contractors, and the public and to encourage vaccination, by requiring proof of full vaccination with a COVID-19 vaccine;

WHEREAS, on December 14, 2021, the LACERS Board adopted the COVID-19 Board Meeting Safety Standards to protect the health and safety of individuals participating in or attending in-person meetings conducted by the LACERS Board and all Committees of the Board;

WHEREAS, the circumstances and conditions that existed in 2020 and 2021 described in Section 8.22 of the Los Angeles Administrative Code that warranted the "Declaration of Local Emergency" of March 4, 2020, City Council Ordinance No. 187219 in October of 2021, and the adoption of the COVID-19 Board Meeting Safety Standards, have adjusted to a level currently manageable by the regularly constituted branches and departments of the City government;

WHEREAS, the Board has been meeting remotely due to the Governor's Executive Order N-29-20 suspending Brown Act teleconferencing requirements and that Executive Order is set to expire,

WHEREAS, Assembly Bill 361 was passed in September 2021 to extend continued flexibility for remote meetings during the COVID-19 State of Emergency or when the Board finds that COVID-19 continues to directly impact the ability of members to meet safely in person;

WHEREAS, beginning January 1, 2023, Assembly Bill 2449 provides additional but limited options and new rules for teleconferencing under the Brown Act that were outlined to the Board by the City Attorney on November 8, 2022;

WHEREAS, on December 6, 2022, the Mayor submitted a resolution to Council recommending that the City Council terminate the local emergency of March 4, 2020, effective February 1, 2023;

WHEREAS, on December 7, 2022, City Council adopted the Mayor's recommendation terminating the local emergency effective February 1, 2023;

WHEREAS, on February 3, 2023, the City updated the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023) upon which the LACERS COVID-19 Board Meeting Safety Standards were based; and,

WHEREAS, City departments are subject to the requirements set forth by the February 1, 2023 "Revised COVID-19 City Updates Memo" and the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023);

NOW, THEREFORE, BE IT RESOLVED, that the Board:

- Authorize LACERS General Manager to apply the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023) at LACERS Headquarters located at 977 N. Broadway and rescind the Board's previously adopted LACERS COVID-19 Board Meeting Standards:
- 2. Direct LACERS General Manager to take necessary actions to apply the February 1, 2023 "Revised COVID-19 City Updates Memo" and the City of Los Angeles COVID-19 Workplace Safety Standards (Revised February 3, 2023) at 977 N. Broadway; and,
- 3. Authorize LACERS General Manager to make necessary updates to LACERS application of the City of Los Angeles COVID-19 Workplace Safety Standards based on changes in federal, state, and local regulatory mandates, including City ordinances on an ongoing basis.

BOARD Meeting: 2/14/23

Item VI-A Attachment 2

LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM COVID-19 BOARD MEETING SAFETY STANDARDS

Revised December 14, 2021 February 14, 2023

Notice: These standards will be periodically updated based on changes in federal, state, and local regulatory mandates, including City ordinances, adopted in response to conditions caused by the <u>novel Coronavirus of 2019 (COVID-19) (SARS-CoV-2)</u> pandemic.

The Los Angeles City Employees' Retirement System's (LACERS) COVID-19 Board Meeting Safety Standards are established to protect the health and safety of individuals participating in or attending-in-person meetings conducted by the LACERS Board of Administration (Board) and all Committees of the Board (Committees).

LACERS is subject to various authorities that include, but are not limited to:

- State Executive Orders (Governor's Executive Orders)
- California Occupational Safety Health Administration (Cal/OSHA)*
- California Labor Code
- California Department of Public Health (California DPH)
- California Occupational Safety Health Administration (Cal/OSHA)
- Los Angeles County Department of Public Health (<u>LA County</u> DPH)
- City ordinances
- City memoranda
- Center for Disease Control and Prevention (CDC)
- City Ordinance No. 187134, "COVID-19 Vaccination Requirement for All Current and Future City Employees"

* For COVID-19 prevention, LACERS is subject to the requirements set forth by the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS).

Status.

The City of Los Angeles' COVID-19 Declaration of Local Emergency ended on February 1, 2023.

The State of California is anticipating a termination of the State emergency on February 28, 2023.

On December 15, 2022, the Occupational Safety and Health Standards Board voted to

adopt non-emergency COVID-19 prevention regulations and will become effective once approved by the Office of Administrative Law. The Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS) remain in effect until the new regulations become effective.

With the lifting of the local COVID-19 emergency, the City has revised its safety standards as of February 3, 2023.

For department questions about LACERS' COVID-19 Board Meeting and Workplace Safety Standards, please email:

OfficeServices@lacers.org

A. VACCINATION STATUS AND INFORMATION COLLECTION

- COVID-19 Vaccination Status. All individuals who are physically present at a Board or- Committee meeting ("in-person attendees") must provide proof that they are fully vaccinated for COVID-19 in order to enter a LACERS Board of Administration or Committee meeting and the LACERS Headquarters.
- 2. Verification. LACERS requires verification of the vaccination status of all in-person attendees prior to admittance to any Board or Committee meeting. All in-person attendees must present to LACERS' designated staff or representative a vaccination card, mobile vaccination verification, and/or medical provider documentation and photo identification for review. Neither COVID-19 test results nor vaccination exemptions will be accepted for in-person entry to a Board or Committee meeting.
- 3. **Confidentiality.** LACERS will not retain copies of vaccination cards, mobile vaccination verifications, medical provider documentation, or any other verification information and will treat all vaccination records as confidential.
- 4. **Disclosure.** All individuals must report their vaccination status to LACERS' designated representative prior to admittance to LACERS Board or Committee meeting.
- 5. These Vaccination Status and Information Collection requirements do not apply to City Employees and contractors subject to and compliant with City Ordinance No. 187134, "COVID-19 Vaccination Requirement for All Current and Future City Employees.
- 6. Non-Discrimination. LACERS will not discriminate against or harass employees or job applicants on the basis of a protected characteristic; the department in working with designated Human Resources will provide reasonable accommodations related to disability or sincerely-held religious beliefs or practices; and will not retaliate against anyone for engaging in protected activity (such as requesting a reasonable accommodation).

B. FACE COVERINGS

 All Attendees. All -in-person attendees at a LACERS Board or Committee meeting are required to wear a <u>well-fitting medical mask or respirator face covering</u> that always covers both the nose and mouth at all times, except while actively eating or drinking, provided a physical distance of six or more feet from other individuals is maintained.

- LACERS does not permit any other exception to this requirement.
- 2. Requesting Face Coverings. All in-person attendees can request a <u>well-fitting medical</u> mask face coveringor respirator from LACERS at no cost and without fear of retaliation.
- 2.3. Enhanced Face Coverings. LACERS must provide high-quality and well-fitting masks and respirators to attendees of a LACERS Board or Committee meeting who request them at no cost.

C. PHYSICAL DISTANCING

Physical distancing (of six or more feet) is required in indoor settings under the following situations:

- 1. Individuals who are actively eating or drinking;
- 2. All exposed individuals in the event of a major outbreak; and
- 3. All exposed individuals when determined necessary in the event of a non-major outbreak or, where six feet of physical distancing is not feasible, as much distance between persons as feasible.

NOTE: Where not otherwise required under these Standards, physical distancing is encouraged where possible.

D. ENTRY SELF-SCREENING

- 1. **Compliance with DPH Orders.** LACERS will utilize daily self-screening protocols as ordered by the DPH.
- 2. **Self-Screening.** All Board or Committee in-person attendees shall evaluate their own symptoms before reporting to the LACERS Headquarters.

E. EXPOSURE NOTIFICATION

- 1. Timing of Notice. Upon knowledge that an attendee of a LACERS Board or Committee meeting has a positive diagnosis, regardless of vaccination status, previous infection, or lack of symptoms of COVID-19 while at the LACERS Board or Committee meeting. Within one (1) business day from the time LACERS knows of a COVID-19 case, written notification will be given to all in-person attendees (where possible) who may have been present at the Board or Committee meeting during the high-risk exposure period.
- Secure the Boardroom. When an attendee of a Board or Committee meeting has been confirmed to have occupied the room within 24 hours during the infectious period for COVID-19, LACERS will ensure that the Board room is secured, ventilated, and disinfected.
- 3. Identify Exposed Attendees. Identify list of names (such as Board members, LACERS employees, other City employees, Members, contractors, and facility personne) the sick attendee had close contact with during the Board meeting.
- 4. **Potential Exposure Notification**. LACERS shall send a potential exposure notification within one business day to all potentially exposed attendees.

- 2.5. Manner of Notice. Notice may be provided via email, personal service, or text.
- 3.6. Notice to Public Health Officials. LACERS will notify local health officials of outbreaks as required by DPH.

F. CLEANING AND DISINFECTION

- 1. Cleaning supplies. Cleaning supplies will be made available at the speaker's podium to allow each attendee using the speaker's table to clean the space (including the tabletop, chair, and microphone).
- 2. Cleaning and disinfecting when someone is sick or diagnosed with COVID-19 in the Board room. When an attendee of a Board or Committee meeting has been confirmed to have occupied the room within 24 hours during the infectious period for COVID-19, LACERS will ensure that the Board room is secured and disinfected. Per the CDC and LA County DPH, if more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, regular cleaning is enough and the Boardroom can be reoccupied.

Note 1. Custodial staff will have the necessary knowledge and training, and be provided with appropriate PPE, and supplies required to conduct COVID-19 disinfection.

Note 2. Once the required COVID-19 cleaning and disinfection have been completed by the custodial staff, the Boardroom which had been secured can be reoccupied.

ALTERNATE OPTIONS FOR PARTICIPATION

- 0.—For individuals who cannot verify their vaccination status, LACERS will provide alternate methods for accessing and participating in Board and Committee meetings, including link(s) to teleconferencing and dial-in options.
- 0.—Alternate methods for accessing and participating in Board and Committee meetings will be provided on the meeting agenda. LACERS will provide instructions on how to use those alternate methods.

G. DEFINITIONS

- "LACERS Headquarters" means the Indoor Portion of LACERS' office space within the LA Times building at 202 W. First Street, Suite 500, Los Angeles, CA 90012977 N. Broadway, Los Angeles, CA 90012.
- 2. "Close contact" "Close contact" per California DPH means someone sharing the same indoor airspace for a cumulative being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in anyover a 24-hour period during an infected person's (laboratory-confirmed or a clinicial diagnosis) within or overlapping with the high-risk exposure period. This definition applies regardless of the use of face coverings. EXCEPTION: Individuals have not had a close contact if they wore a respirator required by the employer and used in compliance with California Code of Regulations, Title 8, Section 5144 Respiratory Protection, whenever they were within six feet of the COVID-19 case during the high-risk exposure period.
- 3. "COVID-19" (Coronavirus Disease 2019) means the disease caused by SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).
- 3.4. "COVID-19 case" means a Board or Committee in-person attendee who:
 - Has a positive "COVID-19 test;" or
 - Has a positive COVID-19 diagnosis from a licensed healthcare provider; or
 - Is subject to a COVID-19-related order to isolate issued by a local or state health official: or
 - Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.
- 3.—"COVID-19 hazard" means potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person or persons exhaling, talking or vocalizing, or coughing, or sneezing, or from procedures performed on persons which may aerosolize saliva or respiratory tract fluids. This also includes objects or surfaces that may be contaminated with SARS-CoV-2.
- 4.5. "COVID-19 symptoms" means fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.
- 6. "COVID-19 test" means a viral test for SARS-CoV-2 that is: (A) Approved by the United States Food and Drug Administration (FDA) or has an Emergency Use Authorization from the FDA to diagnose current infection with the SARS-CoV-2 virus; and (B)

Administered in accordance with the FDA approval or the FDA Emergency Use Authorization as applicable.

- Cleared, approved, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test); and
- Administered in accordance with the authorized instructions (FDA approval or FDA EUA, as applicable).
- To meet the return to work criteria, self-administered and self-read over-the-counter (OTC) tests are acceptable per Cal/OSHA if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided.
- Currently FDA-authorized viral tests for SARS-CoV-2 (NAATs or antigen) can be used for both diagnostic and screening purposes. Per California DPH, Antigen tests directly detect fragments of SARS-CoV-2 viral protein (as opposed to viral RNA detected by nucleic acid amplification tests [NAAT aka PCR tests]). The main drawbacks of Antigen tests are lower sensitivity (more false negatives) and intended use limited to individuals suspected of COVID-19 within 5-12 days of symptom onset (number of days varies by manufacturer).
- 7. "Employees" means full, part-time, and as-needed LACERS employees regardless of appointment type, volunteers, interns, hiring hall, appointed officers, board members, and 120-day retired employees, elected officials and at-will appointees of elected officials.
- 8. "Exposed group" means all attendees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the infectious period. A common area at work includes Boardroom, bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:
 - For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.
 - If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
 - If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group. Note. An exposed group may include the employees of more than one employer.
- 9. "Face coverings" means <u>a well fitting medical grade mask, surgical mask, or higher level</u> respirator such as N95, KN95, KF94 .
 - A face coverings is a solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face. that comply with OSHA standards including surgical masks, medical procedure masks,

voluntary-use respirators (such as N95s), and masks made of tightly-woven fabric or non-woven material of at least two layers. A face covering has no visible holes or openings and must cover the nose and mouth. A well-fitted mask does not include beandanas, balaclavas, scarves, ski masks, gaiter, turtleneck, collar, or and masks with a single layer of fabric or any mask that has an unfiltered one-way exhaust valve are not acceptable face coverings. Cloth masks are not acceptable.

For medical grade masks, per LA County DPH, masks with an adjustable nose bridge that are made of at least three layers of non-woven material (melt-blown fabric and/or polypropylene) will provide increased protection and meet the requirements for a "medical mask." These masks are often sold as disposable, protective, medical, or surgical masks.

Special considerations are made for people with communication difficulties or certain disabilities. Clear masks or cloth masks with a clear plastic panel that fit well are an alternative type of mask for people who interact with: people who are deaf or hard of hearing, children or students learning to read, people learning a new language, and people with disabilities.

[Note. Face shields are not a replacement for face coverings, although they may be worn together for additional protection. Surgical masks and medical procedure masks that meet the FDA requirements for fluid barrier protection and particulate filtration would not be single-layered. Masks with a single layer of fabric that look like a surgical mask or medical procedure mask will likely not provide the protection intended for wearing face coverings.]

- "Fully vaccinated" means 14 days or more after an individual received the final dose of a two-dose COVID-19 vaccine series (Moderna or Pfizer-BioNTech) or a single dose of a one-dose COVID-19 vaccine (Johnson & Johnson/Janssen). [Note. For persons (foreign visitor or traveler), who are fully vaccinated outside the United States, COVID-19 vaccine must be listed for emergency use or approved by the World Health Organization (WHO).]
- 4. "High-risk exposure period" means the following time period:
 - For COVID-19 cases who develop COVID-19 symptoms, from two days before they
 first develop symptoms until all of the following are true: it has been 10 days since
 symptoms first appeared; 24 hours have passed with no fever, without the use of
 fever-reducing medications; and symptoms have improved.
 - For COVID-19 cases who never develop COVID-19 symptoms, from two days before until 10 days after the specimen for their first positive test for COVID-19 was collected.
- 10. "Identification" means a valid (unexpired) driver's license or government issued identification card or a current work or school identification card which contains the individual's name and photograph.
- 11. "Infectious High-risk exposure period" per California DPH means:

- For symptomatic infected persons, [starting] 2 days before the infected person had any symptoms through Day 10 after symptoms first appeared (or through Days 5-10 if testing negative on Day 5 or later), and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved, OR
- For asymptomatic infected persons, [starting] 2 days before the positive specimen collection date through Day 10 (or through Days 5-10 if testing negative on Day 5 or later) after specimen collection date for their first positive COVID-19 test.
- 5.12. "Individual" means any and all in-person attendees at a LACERS Board of Administration meeting or Committee meeting.
- 6.13. "Isolation" means separating those infected with a contagious disease from people who are not infected.
- 7.14. "Major Outbreak" means 20 or more COVID-19 cases among workers at the same worksite within a 30-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.
- 8.15. "Outbreak" means at least three COVID-19 cases among workers at the same worksite within a 14-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.
- 9.16. "Partially Vaccinated" means those who have received at least one dose of a COVID-19 vaccine, but do not meet the definition of fully vaccinated as defined herein.
- 40.17. "Quarantine" means to restrict the movement of persons who were exposed to COVID-19 in case they become infected.
- 18. "Respirator" means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering face-piece respirator.
- 44.19. "Returned case" means a COVID-19 case who returned to work purcuant to Cal/OSHA T8 CCR § 3205 (c)(10) and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 90 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 90 days after the first positive test. If a period of other than 90 days is required by a CDPH regulation or order, that period shall apply.
- 42.20. "Unvaccinated" means individuals who have not received any doses of COVID-19 vaccine or whose status is unknown.
- 21. "Worksite" means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the high-risk exposure infectious period. It does not apply to buildings, floors, or other locations that a COVID-19 case did not enter. locations where the worker worked by themselves without exposure to other

- employees, or to a worker's personal residence or alternative work location chosen by the worker when working remotely-
- 22. "Work Exclusion" prevents a person from working as an employee or entering a specific work facility.
- 43.23. "Work Restriction" prevents a person from working as an employee performing certain types of work (e.g., direct contact with clients or others), or restriction from contact with specific populations.



Karen Bass Mayor

MEMORANDUM

To: All City Department Heads

From: Karen Bass, Mayor

Subject: Revised COVID-19 City Updates Memo

Date: February 1, 2023

When the pandemic began in March 2020, a series of guidelines were issued to protect the City workforce from COVID-19 while ensuring continuity of operations. Nearly three years later, the COVID-19 Declaration of Local Emergency will end on February 1, 2023. The State of California is anticipating a termination of the State emergency on February 28, 2023.

Although COVID-19 is still with us and will likely remain for some time, today we have access to tools that we did not have in 2020 – including updated vaccines, at-home testing, and therapeutics. These tools have been instrumental in allowing us to collectively look towards the future with hope and optimism as we establish the "new normal."

I would like to thank all of you for your ongoing work and support since the pandemic began. Not only have you continued to provide Angelenos with key services through an incredibly difficult time, but you also did so while facing significant operational challenges. Your tireless commitment and dedication to the people of Los Angeles is commendable.

We will continue to monitor COVID-19's evolution as a disease and in the community and will issue additional guidance as necessary. In the meantime, effective immediately, the May 4, 2022 COVID-19 City Guidelines Memo is hereby rescinded in its entirety, and replaced with the following update:

A. Protocols for City Employees, Volunteers, and Contractors Working at City Facilities

- 1. Workplace Safety Standards: The City's COVID-19 Workplace Safety Standards (or "Standards") remain the City's COVID-19 safety protocols that departments must follow. The Standards are established for the health and safety of its employees, contractors, and the public against COVID-19. These Standards will be periodically revised, if and when needed, to reflect applicable COVID-19 public health requirements and workplace safety regulatory requirements, recommendations and/or guidance. More stringent requirements may be established by the City as necessary, and as authorized by various regulatory agencies.

 Departments should also consult and follow other additional applicable regulations that are not covered under these Standards.
- 2. Department Reconstitution Plans: Department Reconstitution Plans have provided guidance and direction for ensuring the effective transition through surge phases during the COVID-19 pandemic. The plans have outlined the process for the transfer of essential functions, personnel, records, and equipment for a phased reopening at different capacity levels, including leading up to full department reopening. After the lifting of the Declaration of Local Emergency, Departments should retain a copy of the most recent Reconstitution plan, should there be a need to modify operations due to future public health emergencies.

B. Protocols for Members of the Public Visiting City Facilities

 Proof of Vaccination: Upon the lifting of the emergency on February 1, 2023, Proof of Vaccination will no longer be required for members of the public to enter indoor portions of City facilities, per the sunset provision of <u>Municipal Code Section 200.127</u>.

C. Commission, Board, and Other Brown Act Meetings

- 1. **AB361**: Commission, Board and other Brown Act bodies may continue to meet virtually per AB361 until February 28, 2023, coinciding with the termination of the State of California's COVID-19 State of Emergency on that date.
- 2. **Virtual Meeting Options**: After February 28, 2023, City of Los Angeles Brown Act bodies should plan to resume meeting in-person. Departments should consult the body's corresponding City Attorney for additional information on options related to continuation of hybrid or virtual meeting protocols and requirements.

D. Public Events in City Facilities

- 1. Civic Center: Indoor special events at the Civic Center may resume after February 1, 2023 during regular business hours (8am to 5pm) and require scheduling with the GSD Special Events and Filming Unit a minimum of ten working days in advance of the event. Beginning March 1, 2023, after hours special events at the Civic Center can be scheduled with GSD. The 10th floor conference rooms in City Hall will reopen for meetings on March 1, 2023. Outdoor special events in the Triforium, City Hall East Plaza, City Hall South Plaza, South Lawn and Forecourt, may continue in accordance with applicable rules promulgated by the General Services Department. Filming permits will be issued by Film LA for filming on the exterior. For filming in the interior, interested parties should contact Film LA for details.
- 2. Non-Civic Center City Facilities: City facilities not located in the Civic Center will reopen (or have re-opened) based on the phased-in operations outlined in Department Reconstitution Plans. For special events in these non-Civic Center facilities, members of the public should check with the corresponding department for information regarding building policies.

E. Contracting

Emergency contracting provisions related to the City's COVID-19 Declaration will sunset with the termination of the emergency. Departments should consult their designated City Attorneys with any questions regarding specific contracting issues.

F. Emergency Operations Center (EOC)

- 1. **EOC Meetings and Situation Reports**: The City's EOC will be deactivated for COVID-19 after February 1, 2023. Deactivation includes transition to regular day-to-day processes and procedures, and Duty Officer Status on COVID-19 related matters. The Emergency Management Department (EMD) will continue to monitor COVID-19 and the impact on the population and City services, and will be prepared to resume activation in support of COVID-19 should the need arise.
- 2. **EOC Resource Requests**: By January 31, 2023, all COVID-19 resource requests submitted to the EOC should be closed. No other orders will be processed through the EOC at this time. All orders will transition to the normal procurement process starting on February 1, 2023.
- 3. **After Action Reporting:** An After-Action Report (AAR) addressing the City's EOC response to COVID-19 through the conclusion of this activation on February 1, 2023 will be prepared. Relevant departments and EOC responders will be contacted separately regarding next steps.

G. COVID Sick Leave

COVID-19 specific leave codes can still be utilized by staff until further notice. An updated memo will be distributed once there are any changes. Please consult your Human Resources staff for more information.

H. Telecommuting

1. Citywide Telecommute Policy: In 2020, the City implemented the Emergency COVID-19 Telecommuting Process which is being adapted and discussed with our labor partners in the form of the Citywide Telecommute Policy. This Citywide Telecommute Policy will supersede the prior policy and shall serve as the basis for individual departmental telecommute policies tailored to meet operational needs. While this process is underway, General Managers can direct any questions or concerns to the CAO's Employee Relations Division.

I. Employee Vaccinations

The requirement for City Employees to be vaccinated for COVID-19 remains in place until further notice.

Thank you again for your continued support and cooperation. If there are any questions, please contact Thalia Polychronis, Assistant General Manager of the Emergency Management Department (thalia.polychronis@lacity.org | 213-841-9364).

BOARD Meeting: 2/14/23

Item VI-A Attachment 4

CITY OF LOS ANGELES COVID-19 WORKPLACE SAFETY STANDARDS

Revised February 3, 2023

INTRODUCTION

The City's COVID-19 Workplace Safety Standards are established for the health and safety of its employees, contractors, and the public against the novel Coronavirus of 2019 (COVID-19).

These Standards will be periodically revised, if needed, to reflect applicable COVID-19 requirements and/or guidance from sources such as:

- State Executive Orders (Governor's Executive Orders)
- California Division of Occupational Safety and Health (Cal/OSHA)*
- California Labor Code
- California Public Health Officer Orders and guidance (California DPH)
- Los Angeles County Department of Public Health (LA County DPH)
- City ordinances
- City memoranda
- Centers for Disease Control and Prevention (CDC)

*For COVID-19 prevention, City departments are subject to the requirements set forth by the <u>Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS)</u> unless the department's operation is covered by <u>Cal/OSHA Aerosol Transmissible Diseases (ATD) Standard</u>. Such departments/operations must also consult those regulations for additional applicable requirements that are not covered herein.

Status.

The City of Los Angeles' COVID-19 Declaration of Local Emergency ended on February 1, 2023. The State of California is anticipating a termination of the State emergency on February 28, 2023.

On December 15, 2022, the Occupational Safety and Health Standards Board voted to adopt non-emergency COVID-19 prevention regulations and will become effective once approved by the Office of Administrative Law. The Cal/OSHA COVID-19 Prevention Emergency Temporary Standards (ETS) remain in effect until the new regulations become effective¹.

With the lifting of the local COVID-19 emergency, the City is revising its safety standards.

For department questions about COVID-19 Workplace Safety Standards, you may email:

per-covid-safetystandards@lacity.org

¹ Per LA County, "Local health jurisdictions may implement additional protective measures based upon local conditions."

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1. COVID-19 VACCINATION

UPDATE.

Proof of Vaccination: Upon the lifting of the COVID-19 Declaration of Local Emergency on February 1, 2023, Proof of Vaccination will no longer be required for members of the public to enter indoor portions of City facilities, per the sunset provision of Municipal Code Section 200.127.

The requirement for City Employees to be vaccinated for COVID-19 remains in place until further notice.

LA County DPH requires employees who work in High-Risk Settings and who are currently eligible for a COVID-19 booster vaccination, receive their booster dose no later than March 1, 2022. (This includes emergency medical technicians (EMTs), EMT-paramedics.) Employees not yet eligible for a booster must receive a booster within 15 days of becoming eligible for receiving one.

As of February 25, 2022, LA County DPH aligned with <u>State Health Officer's Health Care Worker Vaccine Requirement Order</u> which allows for workers with completed primary series vaccination and recent infection to defer booster dose by up to 90 days from date of first positive test or clinical diagnosis, which may extend the booster dose requirement beyond March 1st. Workers with a deferral due to a proven COVID-19 infection must receive their booster dose no later than 15 days after the expiration of their deferral.

For a detailed list of "workers" under this Order, see: <u>Health Care Worker Vaccination Requirement (LA County DPH Health Officer Order).pdf</u>

- 1.1 **COVID-19 Vaccination.** All employees must be fully vaccinated for COVID-19, or have an approved medical or religious exemption.
- 1.2 **Boosters.** Booster shots for the COVID-19 vaccines may be required in accordance with guidance provided by the CDC, federal Food and Drug Administration (FDA), California DPH, LA County DPH and/or any other medical entity that provides health and safety guidance.
- 1.3 Tracking and Verification. The City will treat all vaccination tracking data and verification records as confidential. Each City department will have its employees upload vaccination records to a secured and confidential database maintained by a third party administrator selected by the City. Designated Human Resources and confidential staff (e.g., Medical Services Division Administrator) may review vaccination records, mobile vaccination

- verifications, and/or medical provider documentation and attest through a secured database entry, to the status of an employee as fully vaccinated.
- 1.4 **Disclosure.** All employees, including employees who have been granted an exemption or deferment, must report their vaccination status.
- 1.5 **Non-Discrimination.** Departments will not discriminate against or harass employees or job applicants on the basis of a protected characteristic; the department in working with designated Human Resources will provide reasonable accommodations related to disability or sincerely-held religious beliefs or practices; and will not retaliate against anyone for engaging in protected activity (such as requesting a reasonable accommodation).

2. FACE COVERINGS

UPDATE. At the time of this updated document, LA County DPH Health Officer Order (HOO) entitled, "*Responding Together At Work and in the Community*," dated September 22, 2022 highlighted the following changes:

- "Revised to strongly recommend, but no longer require, masking for all persons using public transit or at indoor transportation hubs. Transit agencies may elect to continue requiring masking.
- Revised to align with the <u>State Public Health Officer's September 20, 2022</u> <u>quidance</u> regarding masking in the following high-risk settings: correctional facilities, homeless shelters, emergency shelters, and cooling and heating centers.
- Continues to require masking at all indoor healthcare settings."

"Per LA County, the changes to this HOO was based on, "evidence that the County of Los Angeles has receded to a Low COVID-19 Community Level as determined by the CDC and receded to a weekly rate of current COVID-19 transmission that is below 100 new cases per 100,000 people. Public Health continues urging individuals to continue taking common sense precautions, such as, being up to date on their vaccinations, including obtaining the Fall 2022 bivalent COVID-19 booster; that persons at elevated risk for severe illness continue to mask at indoor public spaces, that persons continue to mask at indoor transportation hubs and while on public transportation, including ride shares and shuttles; test prior to gathering with others who are at an elevated risk for severe illness; and increase ventilation at indoor settings."

"Regardless of the CDC's COVID-19 Community Level, employers are required to offer well-fitting medical masks and respirators, such as an N95, KN95 or KF94, at no cost to their employees who work indoors and have contact with other workers, customers, or members of the public, or in vehicles with more than one person. Respirators must be offered at no cost to workers in indoor settings where customers

may spend time unmasked."

"In workplaces, employers and employees are subject to either the Cal/OSHA COVID-19 Emergency Temporary Standards or the Cal/OSHA Aerosol Transmissible Diseases Standard and should consult those regulations for additional applicable requirements."

The City is updating its face covering standards at the workplace as follows. In most workplace settings including indoor public transit and transportation hubs face coverings are no longer required and are optional with few exceptions listed below. In settings where face coverings are no longer required or optional, to protect those persons at elevated risk for severe health outcomes due to COVID-19 infection, the City strongly recommends using face coverings. This face covering requirement may be changed or be updated as regulations change or as conditions warrant.

- 2.1 Face coverings are still required in the following settings and conditions. All employees, regardless of vaccination status, previous infection, or lack of symptoms, are required to wear clean and undamaged face coverings (any of the following are acceptable: a well-fitting medical grade mask, surgical mask, or higher level respirator such as N95, KN95, KF94 for more information see *Definitions* section) that fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face in the following workplace settings and conditions:
 - (a) Specific Higher Risk Settings.
 - (i) Healthcare and congregate care (such as long-term care & adult/senior care facilities) indoor settings. A well-fitting medical mask or respirator that covers their mouth and nose are **required** for all individuals regardless of vaccination status while working indoors with others and in vehicles with more than one person in the following settings:
 - Healthcare settings (applies to all healthcare settings including those that are not covered by the <u>State Health Officer Order issued on July</u> 26, 2021)
 - Long Term Care Settings & Adult and Senior Care Facilities
 - (ii) Local correctional facilities and detention centers settings.
 - (iii) For these other specified high-risk settings homeless shelters, emergency shelters and cooling centers the following CDC Community Levels determine the masking requirements:
 - When the CDC COVID-19 Community Levels are **low**:

- o face coverings are optional and not required in non-clinical settings and when there have been no outbreaks (defined as three suspected, probable, or confirmed COVID-19 cases within a 14-day period among epidemiologically linked residents and/or staff) in the entire facility or within separated, closed sub units that do not allow for mixing of those residents with the general population.
- When the COVID-19 Community Level is **medium or high**:
 - Facilities must maintain or reinstate universal masking for all staff and residents, regardless of if there are no outbreaks within the facility.

<u>Clinical Areas.</u> Universal masking of all staff and residents, regardless of vaccination status and Community Level, is <u>required</u> in all clinical areas (or when any healthcare is being delivered), including isolation and quarantine areas, or any other areas that are covered by other specified high-risk settings.

(b) **During Outbreaks.**

- non-major outbreaks all employees in the exposed group when indoors, or when outdoors and less than six feet from another person unless an exception applies;
- major outbreaks all employees, regardless of vaccination status, must be offered respirators to use on a voluntary basis; where respirators are not worn, employees in the exposed group must be separated from other persons by at least six feet where feasible;
- (c) Early Exit of Isolation or Quarantine (both indoor and outdoor) employees who have exited isolation or quarantine early must follow the indoors masking above but must also wear a mask outdoors while around people for 10 days following symptom on-set or positive test if no symptoms or after the exposure after the employee's isolation or quarantine period;
- (d) **COVID-19 Rebound Case** employees who ended their isolation period and begin to have symptoms again 2 8 days after the isolation period ended or after testing positive again must wear a mask both indoors and outdoors while around people for 10 days following the start of rebound. Per LA County DPH, COVID-19 rebound is when people with COVID-19 get better, then begin to have symptoms 2-8 days after they have recovered; they may also test positive again;
- (e) **Other** In any other location where masking/face covering is the policy of the facility, business or venue; and
- (f) **Agency Orders** when the California DPH and LA County DPH require more stringent measures than these Standards listed above in this section (a-e).

- 2.2 **When a face covering is required** (per section 2.1 *Face Coverings*) to be worn in the workplace, in settings and conditions listed above (see sub-sections a-f above), employees are allowed to take off face covering when:
 - (a) Alone in a room and vehicles. While alone in a separate room, office or interior space and in vehicles where a face covering is required;
 - (b) **Actively eating/drinking indoors.** While actively eating or drinking indoors, provided a physical distance of six (6) or more feet from other individuals is maintained in locations and situations where a face covering is required;
 - (c) **Specific Tasks.** When specific tasks as determined by local, state, or federal regulators or workplace safety guidelines that cannot be feasibly performed with a face covering (or alternative) and **are** required to be worn as outlined above (in Section 2.1.) This exception is limited to the period of time in which such tasks are actually being performed. Employees who cannot feasibly wear a mask while performing their work, must be tested for COVID-19 at least weekly. Such testing is to be conducted during paid time and at no cost to the employee;
 - (d) **Accommodation**. If employees qualify for an accommodation related to a medical or a mental health condition, or a documented religious exemption, or if a particular disability, or who are hearing-impaired or communicating with a hearing-impaired person prevents them from wearing a face covering when face coverings **are** required to be worn as outlined above (in Section 2.1).
 - (i) Employees who qualify for such exemptions as listed above must wear an effective non-restrictive alternative, such as a face shield with a drape on the bottom or a clear masks or cloth masks with a clear plastic panel that fit well are an alternative type of mask for people who interact with: people who are deaf or hard of hearing, children or students learning to read, people learning a new language, and people with disabilities, so long as their condition or disability permits it.
 - (ii) In the event an employee is unable to wear an alternative type of face covering, that employee must undergo weekly testing for COVID-19, and such testing be conducted during paid time and at no cost to the employee. Employees in this category whose medical condition prevents them from wearing a mask or an alternative type of face covering, as it could obstruct breathing or who could be unconscious, incapacitated, or otherwise unable to remove a mask without assistance, will be engaged in an interactive accommodation discussion with Human Resources.
- 2.3 **Enhanced Face Coverings.** Departments must provide high quality and well-fitting masks and respirators to employees when required as outlined above in Section 2.1.
- 2.4 Voluntary Use of Face Coverings. Regardless of vaccination status, employees have the option of voluntarily wearing a face covering that is acceptable in the workplace, when not required by these safety Standards or by an applicable Public Health Order. Upon request by an employee, in workplace indoor settings where masking is recommended,

but not required, departments must provide, for voluntary use, well-fitting medical masks and respirators, such as an N95, KN95 or KF94, at no cost to their employees who work indoors and have contact with other workers, customers, or members of the public, or in vehicles with more than one person. Employees can request face coverings from their employing department at no cost to the employee and without fear of retaliation. No one can be prevented from wearing a mask to participate in an activity or enter a business.

2.5 **Respirators**². Upon request, regardless of vaccination status departments must provide a NIOSH-approved respirator (such as an N95) to employees who are working indoors or in vehicles with more than one person for voluntary use in compliance with Cal/OSHA's Cal/OSHA's Respiratory Protection Standard, subsection Title 8 CCR, §5144(c)(2) at no cost. Such requests can be made by employees without fear of retaliation. Departments may also permit workers to voluntarily use their own respirators, such as N95, as long as the respirator used will not create a hazard.

Outbreaks:

- (a) During a non major outbreak, departments must provide notice to employees in the exposed group of their right to request a respirator for voluntary use.
- (b) During a major outbreak, departments must provide a respirator for voluntary use in compliance with Cal/OSHA's Respiratory Protection Program to employees in the exposed group.
- (c) During a major outbreak employees who are not wearing respirators required by the department and used in compliance with Cal/OSHA's Respiratory Protection Program shall be separated from other persons by at least six feet, except where a department can demonstrate that six (6) feet of separation is not feasible, and except for momentary exposure while persons are in movement. Methods of physical distancing include: telework or other remote work arrangements; reducing the number of persons in an area at one time, including the public; visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel; staggered arrival, departure, work, and break times; and adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees. When it is not feasible to maintain a distance of at least six (6) feet, individuals shall be as far apart as feasible.

Note 1. Department operations that fall under <u>Cal/OSHA's Aerosol Transmissible Diseases (ATD)</u> <u>Standard</u> (Title 8 California Code of Regulations (CCR), §5199) or who are already covered by

² Per Cal/OSHA respirator filters should be replaced if they get damaged, deformed, dirty, or difficult to breathe through. Filtering Facepiece Respirators (FFRs) such as N95s are disposable respirators that cannot be cleaned or disinfected. Disposable FFRs are mainly for one-time use only. Ideally, such respirators should not be used once they are soiled or the inner lining gets moist. The minimum number of FFRs would be 2 per/person/work-shift (1 plus 1 replacement). Additional N95 replacement may be needed depending on the nature and/or condition of work (e.g., when working outdoors in a hot humid weather, dusty environment, job requiring physical exertions, etc.)

<u>Cal/OSHA's Respiratory Protection Standard</u> (Title 8 CCR, § 5144) where employees are required to wear tight fitting respirators to protect themselves from breathing in harmful substances, including chemical, biological, and radiological agents, will continue to follow all the required elements of Cal/OSHA Title 8 CCR, §5144.

Note 2. Other than the categories under Note 1 above, departments issuing N95 respirators as an upgraded face covering for protection against the spread of COVID-19 are not required to have a written respiratory protection program or medically evaluate and fit test employees. Department must ensure that employees' use of a respirator will not create a hazard e.g. if the employee is engaged in strenuous physical activity like continuous heavy lifting. When respirators are provided for voluntary use to employees, the department shall encourage their use and ensure the respirator is the correct size for the employee. Departments shall train affected employees on how to properly wear the N95, provide manufacturer's respirator use instruction, information on how to do a seal check, the fact that facial hair interferes with a seal, and provide information contained in Title 8, CCR § 5144, Appendix D.

Note 3. Consult the Department Safety Engineer or the Personnel Department's Occupational Safety and Health Division for further guidance on applicable respirator standards, if needed.

Note 4. Department must implement measures to clearly communicate to non-employees the masking requirements on their respective premises. Persons younger than two years old and very young children must not wear a mask because of the risk of suffocation. No one can be prevented from wearing a mask to participate in an activity or enter a business.

3. PERSONAL PROTECTIVE EQUIPMENT (PPE) AND BARRIERS

- (a) **PPE.** Departments must continue to evaluate the need for PPE, such as respirators, gloves, goggles, and face shields to prevent COVID-19 related exposure and provide PPE as necessary. Departments shall provide and ensure use of eye and respiratory protection for employees exposed to procedures that aerosolizes saliva or other potentially infectious materials.
- (b) **Barriers.** All protective barriers that were installed in response to the COVID-19 pandemic are to remain in place. (Departments may choose to include additional barriers.)

4. PHYSICAL DISTANCING

Physical distancing (of six or more feet) is required in indoor and outdoor settings under the following situations:

- (a) employees who are actively eating or drinking while indoors³ where a face-covering is required (See Section 2.1);
- (b) all exposed employees in the event of a major outbreak; and

³ "Actively eating or drinking" refers to the limited time during which the face covering can be briefly removed to eat or drink, after which it must be immediately put back on.

(c) all exposed employees when determined necessary in the event of a non-major outbreak or, where six feet of physical distancing is not feasible, as much distance between persons as feasible.

Note. Where not otherwise required under these Standards, physical distancing is encouraged where possible.

5. CLEANING AND DISINFECTION

- 5.1 **Personal Work Stations and Vehicles:** Employees should be encouraged to regularly sanitize their personal work stations and equipment including assigned vehicles, during their shifts. Departments shall provide cleaning materials and gloves (or other appropriate personal protective equipment per manufacturer's instruction) to employees for these purposes. Department must also ensure that hand sanitizers are available for all drivers and riders so that they can sanitize their hands before entering and exiting any shared vehicle. Hand sanitizers with methyl alcohol are prohibited.
- Cleaning and disinfecting of rooms or areas or vehicles when someone is sick or diagnosed with COVID-19 in the space. (The following does not apply in facilities which house persons overnight. Also the following are not meant for cleaning in healthcare facilities, correctional care institutions, or other locations for which specific guidance already exists. http://ph.lacounty.gov/media/Coronavirus/) Departments are to ensure that the rooms or spaces or vehicles occupied by a person confirmed to have COVID-19 within 24 hours during their infectious period is secured. Per the CDC and LA County DPH, if more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, regular cleaning is enough and space can be reoccupied. For any COVID-19 disinfection questions or need, the Personnel Department's Medical Services Division (MSD) must be contacted. MSD will provide further guidance to the department's Human Resources and/or the General Services Department (GSD) Custodial Services regarding the sanitary (cleaning and disinfection) measures that should be taken.
 - **Note 1.** Leased buildings will also follow the cleaning/disinfection procedures; GSD will request the necessary service to the leased facility building management per MSD's quidance.
 - **Note 2.** Custodial staff will have the necessary knowledge and training, and be provided with appropriate PPE, and supplies required to conduct COVID-19 disinfection.
 - **Note 3.** Once the required COVID-19 cleaning and disinfection per MSD's instructions have been completed by the custodial staff, the affected space(s) which were secured can be reoccupied.

6. VENTILATION

Regardless of community risk level, proper ventilation throughout indoor spaces should be maintained.

6.1 **Buildings:** Review the *Interim Guidance for Ventilation, Filtration, and Air Quality in Indoor Environments⁴.* Evaluate how to maximize ventilation with outdoor air -- the highest level of filtration efficiency compatible with the existing ventilation system -- and evaluate the use of additional air cleaning systems. During an outbreak, use filters with the highest compatible filtering efficiency and evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and implement their use to the degree feasible.

For buildings with mechanical or natural ventilation, or both, the City shall maximize the quantity of outside air provided to the extent feasible, except when the United States Environmental Protection Agency (EPA) Air Quality Index is greater than 100 for any pollutant or if opening windows or maximizing in outdoor air by other means would cause a hazard to employees, for instance from excessive heat or cold.

Note. Leased facilities and their building operator are also subject to the same interim guidance to provide a safe workplace, whether they have employees on site or not. GSD has and will continue to request that building landlords comply with the interim guidance.

- 6.2 **Vehicles:** When riding in vehicles with others, windows must be kept open, and the ventilation system set to maximize outdoor air and not set to recirculate air. Windows do not have to be kept open if one or more of the following conditions exist:
 - (a) The vehicle has functioning air conditioning in use and excessive outdoor heat would create hazard for employees;
 - (b) The vehicle has functioning heating in use and excessive outdoor cold would create hazard for employees;
 - (c) Protection is needed from weather conditions, such as rain or snow; and/or
 - (d) The vehicle has a cabin air filter in use and the United States Environmental Protection Agency Air Quality Index for any pollutant is greater than 100 (Contact fleet maintenance).

7. SIGNAGE

Departments must maintain signage at the site/facility consistent with Cal/OSHA and/or any Public Health Orders, when and where applicable for infection control.

⁴ Issued by California DPH on October 7, 2021: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx

8. ENTRY SCREENING

Departments will continue to utilize daily screening or self-screening protocols.

- 8.1 **Self-Screening.** Employees must perform self-screening by evaluating their own symptoms before reporting to work. Departments may use other methods such as posting self-screening signs or performing in-person screening at the facility entrances, using third party daily symptom monitoring applications, etc. Employees must also perform self-screening prior to riding with others in a vehicle or shared transportation and not board the vehicle if having COVID-19 symptoms.
- 8.2 **In-Person Screenings.** If a department chooses to conduct in-person screenings in indoor settings, then: (i) face coverings are required of both screeners and employees; and (ii) non-contact thermometers must be used for temperature checks.

Note: Before coming to work or riding shared transportation, employees who have COVID-19 symptoms, or become sick or who are under isolation or quarantine orders, shall inform their supervisor and/or Human Resources as soon as possible and stay home and/or seek medical care, if needed. Employees who have had a close contact outside of work must inform their supervisor and/or Human Resources and follow applicable requirements.

9. COVID-19 TESTING

Departments **must either offer** COVID-19 testing to **or require** COVID-19 testing of employees depending on the situation as listed below. COVID-19 testing (See *Definitions* section, COVID-19 test) must be provided in a manner that ensures employee confidentiality. When testing is required, or recommended, employees may obtain a COVID-19 test from either their healthcare provider or from a Los Angeles County COVID-19 free testing site using the link: https://covid19.lacounty.gov/testing/. (See also https://covid19.lacounty.gov/testing/. (See also https://www.covid.gov/tests.)

When a test is required or offered, the department must make testing available during "paid time⁵" and "at no cost to employees⁶."

⁵ Per Cal/OSHA, "paid time" means that the employer must make testing available during paid time. While the employee must be compensated for their time and travel expenses, the employer is not obligated to provide the test during the employee's normal working hours.

⁶ Per Cal/OSHA, ensuring that an employee does not incur costs would include paying employees' wages for their time to get tested, as well as travel time to and from the testing site. It would also include reimbursing employees for travel costs to the testing site (for example, mileage or public transportation costs).

COVID-19 Testing Requirements:

Scenario #1 COVID-19 Cases or Employees showing COVID-19 Symptoms

Require COVID-19 Testing: A COVID-19 case without symptoms. A negative test is required to exit early isolation. The test cannot be taken earlier than Day 5.

Offer COVID-19 Testing to:

All employees regardless of vaccination status, showing COVID-19 Symptoms.

Scenario #2 After a Close Contact in the Workplace

Require COVID-19 Testing:

- When required by a regulatory agency (a department will receive an order to comply or citation from a regulatory agency mandating COVID-19 testing);
- For close contacts without symptoms who remain at work (no quarantine), a negative test is required between days 3-5; or
- For close contacts with symptoms, a negative test is required to exit early quarantine. The test cannot be taken earlier than Day 5.

Offer COVID-19 Testing to: All employees regardless of vaccination status. See additional requirements under *Multiple Infections and COVID-19 Outbreaks* section.

Offer of COVID-19 Testing Not Necessary for: Returned cases-Employees returned to work after recovering from COVID-19 infection, and have remained free of COVID-19 symptoms, and it is within 90 days after:

- the initial onset of COVID-19 symptoms; or
- the first positive test if employees never developed symptoms.

If California or LA County Public Health may require a period of other than 90 days by regulation or order that period shall apply.

Scenario #3

Employees part of an Exposed Group of a Non-Major Outbreak or a Major Outbreak

Require COVID-19 Testing to:

All employees within the exposed group regardless of vaccination status -

- twice a week during a major outbreak or more frequently or additional testing when recommended by Public Health Department or exclude starting from the date that the outbreak begins; and
- continue testing those who remain at the workplace until the outbreak ends; or
- when deemed necessary by Cal/OSHA through its "Order to Take Special Action."

Offer COVID-19 Testing to:

All employees within the exposed group regardless of vaccination status -

- weekly for non-major outbreak in the first two weeks; and
- continue at least weekly for non-major outbreak who remain at the workplace until the outbreak ends; or
- more frequently or additional testing when recommended by the Public Health Department.

Offer of COVID-19 Testing Not Necessary for:

Employees who were not present at the workplace during the infectious period -

- Returned cases Employees returned to work after recovering from COVID-19 infection, and have remained free of COVID-19 symptoms, and is within 90 days
 - o after the initial onset of COVID-19 symptoms; or
 - the first positive test if employees never developed symptoms.

Scenario #4

Employees who are exempted from wearing face coverings due to specific task

Require COVID-19 Testing:

At least once per week regardless of vaccination status.

Scenario #5

Employees who are exempted from receiving a COVID-19 vaccine

Require COVID-19 Testing: Per the City Ordinance "COVID-19 Vaccination Requirement for all Current and Future City Employees," employees who have approved exemptions that prevent them from receiving a COVID-19 vaccine as follows:

- Currently at the workplace be tested weekly.
- Teleworkers who will be required to report to any work locations on an as needed basis tested on an ad-hoc basis.

10. PROCEDURES FOR ADDRESSING COVID-19 CASE(S), COVID-19 SYMPTOMS OR CLOSE CONTACT IN THE WORKPLACE

10.1 **COVID-19 Case.**

Upon knowledge that an employee or contracted workers has a positive diagnosis, regardless of vaccination status, previous infection, or lack of symptoms of COVID-19 while at the workplace, the department shall ensure the following occurs:

- (a) Separate the employee or contracted workers from other employees and individuals, and send home immediately (if not already) to self-isolate per the Exclusion from the Workplace Due to COVID-19 Cases or Close Contact section.
- (b) Secure the affected work spaces and vehicles (if applicable), ventilate the space or vehicle (if possible), and if the space will be used within 24 hours since the COVID-19 case was last present at the workplace, follow the *Cleaning and Disinfection* section.
- (c) Notify Human Resources immediately and provide the following:
 - (i) a timeline of when the employee was last at work (which is critical for the custodial services crew to commence the cleaning procedure);
 - (ii) a list of names (such as coworkers, other City employees, contractors, facility residents, or building tenants) the sick/diagnosed employee had close contact with during the infectious period (with up to 2 days before symptoms appeared or 2 days prior to the test date for COVID-19 asymptomatic employees); and
 - (iii) the date the employee first began to experience symptoms (to the extent possible) and/or tested positive.
- (d) Notifications. Human Resources will:
 - (i) Contact MSD for next steps using COVID-19 Case Referral Form.
 - (ii) **Potential Exposure Notification.** Send written potential exposure notification within one (1) business day to all employees, their authorized representatives, independent contractors, and other employees present on the premises at the same worksite during the infectious period with information as required by the California Labor Code § 6409.6. **Note:** MSD will provide recommendations to Human Resources regarding which individuals need to be notified about close contact.
 - Manner of Notice. The notice following the requirements of California Labor Code § 6409.6 shall be written in a way that does not reveal any personal identifying information of the COVID-19 case, and in the manner the City department normally uses to communicate employment-related information. Notice can be provided via email, personal service, or text. Additionally, oral notification is required where the department has reason to believe

that the employee did not receive or did not understand the written notification.

- (iii) Close Contact Notification (Employee). Notify all identified close contacts and require that they quarantine in accordance with the Exclusion from the Workplace Due to COVID-19 Cases or Close Contact section.
 - All potentially exposed employees with close contacts must be offered testing (see exceptions under, COVID-19 Testing section) at no cost during paid time and be provided with information about benefits.
- (iv) COVID-19 Case and Close Contact Notification (Labor). Send written notification within one (1) business day to the authorized labor representative, if any, of the COVID-19 case and of any employee who had a close contact with information as required by the California Labor Code §6409.6(a)(2) and (c).
- (e) Department must take any reports of exposure seriously and investigate any evidence of exposure/close contacts. If COVID-19 case is determined to be work-related, the department must follow the injury and illness reporting and investigation protocols (e.g., provide employees with workers' compensation claims form, investigate whether any workplace conditions could have contributed to the risk of COVID-19 exposure, what could be done to reduce exposure to COVID-19 hazards, etc.) including recording in Cal/OSHA Form 300 log, etc., and as outlined in the Department's Injury and Illness Prevention Plan (IIPP) and/or their written COVID-19 Prevention Program (CPP).

10.2 **COVID-19 Symptoms.**

- (a) Upon knowledge that an employee or contracted workers is developing COVID-19 symptoms when they arrive at work or who becomes sick during the day while at work, the department should immediately separate the employees from other employees, customers, and the public and contact Human Resources/or MSD for advice and next steps.
- (b) If the employee developed symptoms after a reported close contact, the department shall ensure exclusion, and other requirements are followed per these Standards and relevant information provided to affected employees, as appropriate.
- (c) All employees who have COVID-19 symptoms must be offered testing at no cost during paid time.

Note. Employees who have had a close contact outside of work must inform their supervisor and/or Human Resources Section and follow guidance provided by Human Resources.

11. EXCLUSION FROM THE WORKPLACE DUE TO COVID-19 CASES OR CLOSE CONTACT

Exclusion from the Workplace. To limit the transmission of COVID-19 in the workplace, in non-high-risk settings, departments shall ensure that <u>both</u>: COVID-19 cases and employees who are experiencing symptoms after a close contact are excluded from the workplace until the following return to work requirements are met. See Section 11.2.2 below for high-risk settings.

11.1 **COVID-19 CASES.** The following isolation requirements apply to <u>all employees</u>, regardless of vaccination status, previous infection, or lack of symptoms (Persons are considered to have COVID-19 if they have a positive viral test and/or their healthcare provider has reason to believe they have COVID-19 [presumptive clinical diagnosis]).

If an employee has severe COVID-19 or an immune disease, the employee may need to isolate for longer and follow the guidance of a licensed healthcare provider.

(a) TABLE 1. COVID-19 CASES - WITHOUT SYMPTOMS

COVID-19 CASES - WITHOUT SYMPTOMS

must self-isolate immediately;

Option 1

obtain a COVID-19 viral test on Day 5 after the last known exposure (Employees may choose to obtain a COVID-19 viral test.); if COVID-19 symptoms do not develop; and if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work.

If an employee tests positive, on or after Day 5 the employee may return to the workplace after Day 10.

Option 2

If no test was obtained, isolation must continue for at least 10 days from the last known close contact.

Follow masking requirements. (See Face Coverings section.)

(b) TABLE 2. COVID-19 CASES - WITH SYMPTOMS OR RESOLVING SYMPTOMS

COVID-19 CASES - WITH SYMPTOMS OR RESOLVING SYMPTOMS

must self-isolate immediately;

at least 10 days have must passed since COVID-19 symptoms first appeared;

at least 24 hours have passed since a fever of 100.4 degrees Fahrenheit or higher has resolved without the use of fever-reducing medications before the employee can return to work; and Other COVID-19 symptoms are not present or have improved before the employee can return to work.

Follow masking requirements. (See Face Coverings section.)

(c) TABLE 3. PRESUMPTIVE CLINICAL DIAGNOSIS (HEALTHCARE PROVIDER TELLS EMPLOYEE TO ISOLATE)

PRESUMPTIVE⁷ CLINICAL DIAGNOSIS (HEALTHCARE PROVIDER TELLS EMPLOYEE TO ISOLATE)

must self-isolate immediately and remain removed from the workplace until the COVID-19 case isolation requirements are met; if the healthcare provider reassesses the initial diagnosis and concludes that the patient is not infected with SARS-CoV-2 (patient never tested positive); the patient can leave isolation if fever-free for 24 hours; and symptoms have improved.

If employees are close contacts to a confirmed case that are required to quarantine, they must continue to follow quarantine requirements (outlined below) and other instructions provided by the healthcare provider.

Follow masking requirements. (See Face Coverings section.)

⁷ Per County DPH, presumed COVID-19 means a patient with clinically compatible symptoms of COVID-19 and no clear alternate diagnosis with/without exposure history. This presumptive clinical diagnosis is used when the provider has a high index of suspicion that a patient has COVID-19 despite a negative COVID-19 test.

(d) TABLE 4. REBOUND COVID-19 CASES - WITH SYMPTOMS RECURRING, WORSENING OR TESTING POSITIVE AGAIN AFTER ENDING ISOLATION

REBOUND COVID-19 CASES - WITH SYMPTOMS RECURRING, WORSENING OR TESTING POSITIVE AGAIN AFTER ENDING ISOLATION

must re-isolate immediately;

Before returning to work, the following criteria must be met:
at least 5 days must have passed since rebound began; and
at least 24 hours have passed since a fever of 100.4 degrees
Fahrenheit or higher has resolved without the use of fever-reducing
medications before the employee can return to work; and
Other COVID-19 symptoms are not present or have improved.

Follow masking requirements. (See Face Coverings section.)

11.2 **CLOSE CONTACTS.** The following applicable steps must be met before an employee who had close contact with a COVID-19 case can return to work. Employees who were close contacts during an outbreak must have a negative test taken within three (3) to five (5) days after the close contact or shall be excluded from the workplace starting from the date of the last known contact (see *Multiple Infections and COVID-19 Outbreaks* section). The following requirement applies regardless of vaccination status.

- 11.2.1 The following requirements apply regardless of vaccination status except those who work in high-risk and non-outbreak settings.
 - (a) TABLE 5. CLOSE CONTACT <u>WITHOUT</u> SYMPTOMS

CLOSE CONTACT - WITHOUT SYMPTOMS

No quarantine occurs - employees remain in the workplace and monitor symptoms⁸ for 10 days.

Exception. Quarantine or work exclusion is required for certain workers in specific high-risk settings (see Table 7 below).

must obtain a COVID-19 viral test on three (3) to five (5) days after the last known exposure

If an employee tests positive, the employee must be isolated and removed from the workplace until the COVID-19 case isolation requirements are met.

Recently returned cases. An antigen test is preferred for employees who have tested positive within the previous 90 days of close contact. In order to not be subject to the 3 - 5 day testing, employees must provide HR with proof of a COVID-19 positive test within the previous 90 days of close contact.

Follow masking requirements. (See Face Coverings section.)

⁸ Per California CDPH, symptom self-monitoring should include checking temperature twice a day and watching for fever, cough, shortness of breath, or any other symptoms that can be attributed to COVID-19 for 10 days following the last date of exposure.

(b) TABLE 6. CLOSE CONTACT - WITH SYMPTOMS

CLOSE CONTACT - WITH SYMPTOMS

Quarantine immediately (monitor symptoms for 10 days).

Option 1

obtain a COVID-19 viral test five (5) days after the last known exposure. Employees may choose to obtain a COVID-19 viral test. An antigen test is preferred for employees who have tested positive within the previous 90 days of close contact; if COVID-19 symptoms are not present; and if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work.

If an employee tests positive, the employee must remain removed from the workplace until the COVID-19 case isolation requirements are met.

(If the employee or anyone who lives with the employee is at an increased risk for severe illness⁹ obtaining a test as soon as possible is recommended by LA County DPH. California DPH recommends <u>retesting</u> if tested during the first 1-2 days of symptoms and tested negative with an antigen test)

Option 2

If no test was obtained, quarantine must continue for at least 10 days from the last known close contact.

Follow masking requirements. (See Face Coverings section.)

⁹ Severe illness means that a person with COVID-19 may need: hospitalization, intensive care, a ventilator to help them breathe or they may even die.

- 11.2.2 **High-Risk Settings.** Employees who work in the following settings listed below have high transmission risk and populations served are at risk of more serious COVID-19 disease consequences including hospitalization, severe illness, and death:
 - Homeless Shelters
 - Emergency Shelters
 - Cooling and Heating Centers
 - Long Term Care Settings & Adult and Senior Care Facilities*
 - Local correctional facilities and detention centers*
 - Healthcare settings*
 - * Note that some employees in these high risk settings are covered by the Aerosol Transmissible Diseases standard (section 5199) and are subject to different requirements.

Employees who work in a healthcare setting and are exposed to COVID-19, are required to be excluded from work depending on exposure, vaccination status, and staffing levels at the facility and follow appropriate LA County Public Health guidance:

- Work Restrictions for Asymptomatic Healthcare Personnel with Exposures
- Work Restrictions for Asymptomatic EMS Personnel with Exposures

The following requirements apply to employees who are a) not fully vaccinated or b) not infected with SARS-CoV-2 within the prior 90 days **and** working in non-health care high-risk settings.

TABLE 7. CLOSE CONTACT - SPECIFIC NON-HEALTH CARE HIGH-RISK SETTINGS

CLOSE CONTACT - SPECIFIC NON-HEALTH CARE HIGH-RISK SETTINGS

Quarantine immediately (monitor symptoms for 10 days) for at least five days.

Option 1

obtain a COVID-19 viral test five (5) days after the last known exposure (if the employee or anyone who lives with the employee is at increased risk for severe illness, getting test as soon as possible is recommended by LA County DPH);

if COVID-19 symptoms are not present; and if the COVID-19 viral test collected on Day 5 (or later) is negative, the employee may return to work.

continued

If employees develop symptoms after returning to work, they must be excluded from the workplace and test as soon as possible. If employees test positive, they must follow COVID-19 case isolation requirements in Table 1.

If an employee tests positive, the employee must remain removed from the workplace until the COVID-19 case isolation requirements are met.

Option 2

If no test was obtained, and no symptoms are present, quarantine must continue for at least 10 days from the last known close contact.

Follow masking requirements. (See Face Coverings section.)

11.3 Use the following table to count days, where the tables above refer to action to be taken on a specified day e.g. "day 5" or "day 10."

TABLE 8. COUNTING THE DAYS

COUNTING THE DAYS

COVID Case - With Symptoms

- Day 0 is the first day of symptoms.
- Day 1 is the first full day after symptoms develop.

COVID Case - Without Symptoms

- Day 0 is the day the positive test (specimen) was taken.
- Day 1 is the first full day after the positive test was taken.

Close Contacts

- Day 0 is the day of last contact (exposure) with the infected person (COVID-19 Case).
- Day 1 is the first full day after last exposure.

Note 1. In establishments and settings with active outbreaks, quarantine and isolation may be extended for additional days by County Public Health outbreak investigators to help lower the risk of ongoing transmission at the site.

- **Note 2**. If an order to isolate, quarantine, or exclude an employee is issued by a local or state health official, the employee shall not return to work until the period of isolation or quarantine is completed or the order is lifted even if the order exceeds the specified exclusion requirements in the ETS or California DPH recommendation. If no period was specified, then the period shall be in accordance with the return to work periods listed above, as applicable.
- **Note 3**. Per Cal\OSHA, "if no violations of local or state health officer orders for isolation, quarantine, or exclusion would result, Cal/OSHA may, upon request, allow employees to return to work on the basis that the removal of an employee would create undue risk to a community's health and safety. In such cases, the employer shall develop, implement, and maintain effective control measures to prevent transmission in the workplace including providing isolation for the employee at the workplace and, if isolation is not feasible, the use of respirators in the workplace."

Note 4. Per LA County DPH, EMS Provider Agencies & Healthcare facilities should have a plan to evaluate personnel with symptoms of possible COVID-19 illness. It is recommended that symptomatic personnel be evaluated by a clinician.

12. MULTIPLE COVID-19 INFECTIONS AND COVID-19 OUTBREAKS

- 12.1 **Non-Major Outbreak.** Following an outbreak when a department is made aware that there are at least three (3) COVID-19 cases that were at the workplace during their infectious exposure period at the same worksite within a 14-day period, the department must ensure the following until there are no new COVID-19 cases detected in the exposed group for a 14-day period:
 - (a) Immediately make testing available to all employees (regardless of vaccination status) in the exposed group and exclude positive cases and close contacts from work in accordance with the *Exclusion from the Workplace Due to COVID-19 Cases or Close Contact* section; repeat the testing one week later; and
 - (b) Continue to make tests available to employees at least weekly until the workplace no longer qualifies as an outbreak.
 - (c) Departments do not need to make testing available to the following employees:
 - (i) those who were absent from the workplace during the relevant 14 day period; or
 - (ii) recently returned COVID-19 cases (employees returned to work after recovering from COVID-19 infection) and have remained free of COVID-19 symptoms. The exception for returned COVID-19 cases lasts for 90 days after the employee's original onset of symptoms or, if the recovered COVID-19 case never developed symptoms, 90 days following the first positive test.
 - (d) Perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

- (e) Implement ventilation changes to mechanical ventilation systems including increasing filtration efficiency to at least MERV-13, or the highest efficiency compatible with the ventilation system. Evaluate whether HEPA air filtration units are needed.
- (f) Provide notice to employees in the exposed group of their right to request a respirator for voluntary use.
 Note that all employees in the exposed group, regardless of vaccination status, must wear face coverings when indoors, or when outdoors and less than six (6)

feet from another person, unless an exception applies.

- 12.2 **Major Outbreak.** Following a major outbreak when a department is made aware that there are at least twenty (20) COVID-19 cases that were at the workplace during their high-risk exposure period at the same worksite within a 30-day period, the department must ensure the following until there are fewer than three COVID-19 cases detected in the exposed group for a 14-day period, after that follow requirements listed above:
 - (a) Make testing available to <u>all employees</u> in the exposed group at least twice weekly (more frequently if recommended by the local health department) until there are fewer than three (3) cases detected for a 14-day period and exclude positive cases and close contacts from work in accordance with the *Exclusion* from the Workplace Due to COVID-19 Cases or Close Contact section. Employees in the exposed group must be tested or shall be excluded starting from the date the outbreak began;
 - (b) Offer respirators to all employees, regardless of vaccination status, to use on a voluntary basis; determine the need for a respiratory protection program (non-voluntary, with fit testing and medical evaluation requirements) or changes to an existing respiratory protection program under Title 8 CCR, § 5144, Respiratory Protection to address COVID-19 hazards;
 - (c) Separate any employees in the exposed group who are not wearing respirators required by the department in compliance with Section 5144 from other persons by at least six (6) feet, except where the department can demonstrate that six (6) feet of separation is not feasible, and except for momentary exposure while employees/persons are in movement.
 - **Note.** Methods of physical distancing include: telework or other remote work arrangements; reducing the number of persons in an area at one time, including visitors; visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel; staggered arrival, departure, work, and break times; and adjusted work processes or procedures, such as reducing production speed, to allow greater distance between employees. When it is not feasible to maintain a distance of at least six (6) feet, individuals shall be as far apart as feasible.
 - (d) Separate employees in the exposed group from other persons by at least six (6) feet where feasible; at work stations where an employee in the exposed group is

assigned to work for an extended period of time, such as cash registers, desks, and production line stations, and where the physical distancing requirement cannot be maintained at all times, the department shall install cleanable solid partitions that effectively reduce transmission between the employee and other persons.

- (e) Consider halting all or part of operations to control the virus.
- (f) Perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.
- (g) Implement ventilation changes to mechanical ventilation systems including increasing filtration efficiency to at least MERV-13, or the highest efficiency compatible with the ventilation system. Evaluate whether HEPA air filtration units are needed; and
- (h) Any other control measures deemed necessary by Cal/OSHA through the Issuance of Order to Take Special Action, in accordance with Title 8 CCR, § 332.3.
- 12.3 In the event that three or more cases are identified within the workplace (employees, assigned or contracted workers or volunteers) within a span of 14 days, the department shall report the outbreak to MSD. (See *Regulatory Reporting* section.)

13. EXCLUSION PAY (COVID-19 RELATED BENEFIT)

Contact Human Resources regarding Exclusion Pay and related benefits.

14. REGULATORY REPORTING

- 14.1 **LA County DPH Outbreak Reporting.** In the event that three (3) or more cases are identified within the workplace (employees, assigned or contracted workers or volunteers) within a span of 14 calendar days, the department shall report the outbreak to MSD at (213) 473-7037 or by email at joanne.obrien@lacity.org immediately and within 48 hours. MSD will report such outbreaks to the Department of Public Health at (888) 397-3993 or (213) 240-7821, or online at www.redcap.link/covidreport.
- 14.2 **CAL/OSHA Serious Illness and Fatality Reporting.** Department are required to report any the COVID-19 related serious illness (e.g., COVID-19 illness requiring inpatient hospitalization) or death immediately (defined as soon as practically possible but not longer than 8 hours after the departments knows or with diligent inquiry would have known of the death or serious injury or illness) to the nearest Cal/OSHA district office. If the department can demonstrate that exigent circumstances exist, the time frame for the report may be extended however be made no longer than 24 hours after the Department is made aware of the employee's death, and/or inpatient hospitalization. For full details on the information to be reported, see:
 - Report a Work-Related Accident Employers,

- Cal/OSHA Enforcement Branch Regional and District Offices
- Title 8, § 342, Reporting Work-Connected Fatalities and Serious Injuries.

15. ANTI-COVID-19 DISCRIMINATION, HARASSMENT & RETALIATION

- 15.1 Employees regardless of vaccination status must be allowed to wear face coverings and request N95 type respirators without fear of retaliation.
- 15.2 The City will not retaliate against an employee for disclosing a positive COVID-19 test or diagnosis or order to quarantine or isolate.
- 15.3 The City will not discriminate, retaliate, or otherwise take any adverse action against any employee who makes COVID-19 hazard report in good faith.
- 15.4 The City will not discriminate against or harass employees or job applicants on the basis of a protected characteristic.

16. CONTRACTORS

- 16.1 Effective October 20, 2021, any new contract executed by the City shall include a clause requiring employees of the contractor and/or persons working on their behalf who interact with City employees, are assigned to work on City property, and/or come into contact with the public during the course of work on behalf of the City to be fully vaccinated. Standard contract language will include a clause that the contractor shall grant medical or religious exemptions to contractor personnel as required by law.
- 16.2 Contractors covered under City Ordinance, "COVID-19 Vaccination Requirement For All Current and Future City Employees."
- 16.3 City departments must ensure Contractors are provided with a copy of these Standards and that contractors working on-site at any building, structure, or premises belonging to or under the control of the City follow these Standards at a minimum.

17. MEMBERS OF THE PUBLIC

- 17.1 Members of the public, regardless of vaccination status, are required to follow all posted signage and safety protocols instituted by the site/facility.
- 17.2 Any visitors/guests entering City facilities should be registered in a visitor log that includes their name, phone number and email address, if feasible.

18. WRITTEN COVID-19 PREVENTION PROGRAM

18.1 All Departments must also have a written COVID-19 Prevention Program (CPP) as required by the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards,

- which shall be maintained either separately, or as part of the Department's Injury and Illness Prevention Plan (IIPP).
- 18.2 Each Department shall maintain records of the steps taken to implement the written CPP.
- 18.3 Each Department shall make the written CPP and/or IIPP available at the workplace to employees, authorized employee representatives, and to representatives of the Cal/OSHA immediately upon request.

19. TRAINING

- 19.1 Departments must ensure employees comply with any updated Citywide COVID-19 training administered by the Personnel Department on topics such as City's COVID-19 Workplace Safety Standards, efficacy of vaccines, right to request/use of/policy for providing respirators such as N95s and face coverings, non-discrimination against employees who choose to wear face coverings regardless of vaccination status, etc. Departments can supplement this updated COVID-19 training with any respective worksite-specific procedures developed for COVID-19 prevention by the department.
- 19.2 Any employee who is not fully vaccinated shall be required to complete an online COVID-19 vaccination training course administered by the Personnel Department.

20. DEFINITIONS

"City building or facility" means the Indoor Portion of any building, structure, or premises belonging to or under the control of the City.

"Employer [City] provided transportation" means any transportation of an employee, during the course and scope of employment, including transportation to and from different workplaces, job sites, delivery sites, buildings, stores, and facilities, provided, arranged for, or secured by the Department, regardless of the travel distance or duration involved.

"Close contact" means the following, unless otherwise defined by regulation or order of the California DPH, in which case the California DPH definition shall apply.

- In indoor spaces of 400,000 or fewer cubic feet per floor, a close contact is defined as sharing the same indoor airspace as a COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case's infectious period, as defined by this section, regardless of the use of face coverings.
- In indoor spaces of greater than 400,000 cubic feet per floor, a close contact is defined as being within six feet of the COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during the COVID-19 case's infectious period, as defined by this section, regardless of the use of face coverings.

Offices, suites, rooms, waiting areas, break or eating areas, bathrooms, or other spaces that are separated by floor-to-ceiling walls shall be considered distinct indoor spaces.

EXCEPTION: Employees have not had a close contact if they wore a respirator required by the employer [Department] and used in compliance with Title 8 CCR, § 5144, whenever they otherwise have had a close contact listed in bullets above.

Note. The definition of close contact depends on the size of the indoor space, the distance between the case and the contact, and the arrangement within the indoor environment. The above definition stays unless close contact is again re-defined by regulation or order of the California DPH.

"COVID-19" (Coronavirus Disease 2019) means the disease caused by SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).

"COVID-19 case" means an employee who:

- Has a positive "COVID-19 test;" or
- Has a positive COVID-19 diagnosis from a licensed healthcare provider; or

- Is subject to a COVID-19-related order to isolate issued by a local or state health official; or
- Has died due to COVID-19, in the determination of a local health department or per inclusion in the COVID-19 statistics of a county.

"COVID-19 hazard" means potentially infectious material that may contain SARS-CoV-2, the virus that causes COVID-19. Potentially infectious materials include airborne droplets, small particle aerosols, and airborne droplet nuclei, which most commonly result from a person or persons exhaling, talking or vocalizing, or coughing, or sneezing, or from procedures performed on persons which may aerosolize saliva or respiratory tract fluids.

"COVID-19 symptoms" means fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.

"COVID-19 test" means a test for SARS-CoV-2 that is:

- Cleared, approved, or authorized, including in an Emergency Use Authorization (EUA), by the United States Food and Drug Administration (FDA) to detect current infection with the SARS-CoV-2 virus (e.g., a viral test); and
- Administered in accordance with the authorized instructions (FDA approval or FDA EUA, as applicable).
- To meet the return to work criteria, self-administered and self-read over-the-counter (OTC) tests are acceptable per Cal/OSHA if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided.
- Currently FDA-authorized viral tests for SARS-CoV-2 (NAATs or antigen) can be used for both diagnostic and screening purposes. Per California DPH, Antigen tests directly detect fragments of SARS-CoV-2 viral protein (as opposed to viral RNA detected by nucleic acid amplification tests [NAAT aka PCR tests]). The main drawbacks of Antigen tests are lower sensitivity (more false negatives) and intended use limited to individuals suspected of COVID-19 within 5-12 days of symptom onset (number of days varies by manufacturer).

"Employees" means full, part-time and as-needed City employees regardless of appointment type, volunteers, interns, hiring hall, appointed officers, board members and commissioners, 120-day retired employees, elected officials and at-will appointees of elected officials.

"Exposed group" means all employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the infectious period. A common area at work includes bathrooms, walkways, hallways, aisles, break or eating areas, and waiting areas. The following exceptions apply:

- For the purpose of determining the exposed group, a place where persons momentarily pass through while everyone is wearing face coverings, without congregating, is not a work location, working area, or a common area at work.
- If the COVID-19 case was part of a distinct group of employees who are not present at the workplace at the same time as other employees, for instance a work crew or shift that does not overlap with another work crew or shift, only employees within that distinct group are part of the exposed group.
- If the COVID-19 case visited a work location, working area, or a common area at work for less than 15 minutes during the infectious period, and the COVID-19 case was wearing a face covering during the entire visit, other people at the work location, working area, or common area are not part of the exposed group. Note. An exposed group may include the employees of more than one employer. (See Labor Code § 6303 and § 6304.1.)

"Face coverings" means a well fitting medical grade mask, surgical mask, or higher level respirator-such as N95, KN95, KF94.

A face covering is a solid piece of material without slits, visible holes, or punctures, and must fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face. A well-fitted mask does not include a scarf, ski mask, balaclava, bandana, gaiter, turtleneck, collar, or single layer of fabric or any mask that has an unfiltered one-way exhaust valve. Cloth masks are not acceptable.

For medical grade masks, per LA County DPH, masks with an adjustable nose bridge that are made of at least three layers of non-woven material (melt-blown fabric and/or polypropylene) will provide increased protection and meet the requirements for a "medical mask." These masks are often sold as disposable, protective, medical, or surgical masks.

Special considerations are made for people with communication difficulties or certain disabilities. Clear masks or cloth masks with a clear plastic panel that <u>fit well</u> are an alternative type of mask for people who interact with: people who are deaf or hard of hearing, children or students learning to read, people learning a new language, and people with disabilities.

Note. Face shields are not a replacement for face coverings, although they may be worn together for additional protection. Surgical masks and medical procedure masks that meet the FDA requirements for fluid barrier protection and

particulate filtration would not be single-layered. Masks with a single layer of fabric that look like a surgical mask or medical procedure mask will likely not provide the protection intended for wearing face coverings.

"Fully vaccinated" means the employer has documented:

- A person's status two weeks after completing primary vaccination with a COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses in accordance with the approval, authorization, or listing that is:
 - Approved or authorized for emergency use by the FDA;
 - Listed for emergency use by the World Health Organization (WHO); or
 - Administered as part of a clinical trial at a U.S. site, if the recipient is documented to have primary vaccination with the active (not placebo) COVID-19 vaccine candidate, for which vaccine efficacy has been independently confirmed (e.g., by a data and safety monitoring board) or if the clinical trial participant at U.S. sites had received a COVID-19 vaccine that is neither approved nor authorized for use by FDA but is listed for emergency use by WHO;

or

A person's status two weeks after receiving the second dose of any combination of two doses of a COVID-19 vaccine that is approved or authorized by the FDA, or listed as a two-dose series by the WHO (i.e., a heterologous primary series of such vaccines, receiving doses of different COVID-19 vaccines as part of one primary series). The second dose of the series must not be received earlier than 17 days (21 days with a 4- day grace period) after the first dose.

"High-Risk in Healthcare Settings" per the LA County DPH February 25, 2022 Health Officer Order entitled, "Health Care Worker Vaccination Requirements," means "health care facilities within County of Los Angeles public health jurisdiction, including every licensed acute care hospital, skilled nursing facility (SNF), intermediate care facility, dental office, other health or direct care facility types, and emergency medical services provider agency, adult or senior care facilities or home care residential settings or individual homes where vulnerable individuals receive care or reside. Patients and residents receiving care at these facilities or in their homes are at an increased risk for severe illness and death from COVID-19 due to age, underlying health conditions, or both."

Note. The term "High-Risk Settings" is used for the purpose of vaccination requirements for health care workers (See COVID-19 Vaccination and COVID-19 Testing sections.)

"Infectious period" per California DPH, means:

- For symptomatic infected persons, [starting] 2 days before the infected person had any symptoms through Day 10 after symptoms first appeared (or through Days 5-10 if testing negative on Day 5 or later), and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved, OR
- For asymptomatic infected persons, [starting] 2 days before the positive specimen collection date through Day 10 (or through Days 5-10 if testing negative on Day 5 or later) after specimen collection date for their first positive COVID-19 test.

"Isolation" means separating those infected with a contagious disease from people who are not infected.

"Major Outbreak" means 20 or more COVID-19 cases among workers at the same worksite within a 30-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.

"Mega Events (indoor or outdoor)" include conventions, conferences, expos, concerts, shows, nightclubs, sporting events, live events and entertainment, fairs, festivals, parades, theme parks, amusement parks, water parks, large private events or gatherings, marathons or endurance races, and car shows. See the current LA County Health Officer Order to determine the attendance thresholds for Indoor Mega Events and Outdoor Mega Events. UPDATE: Per LA County DPH, beginning February 16, 2022, the attendance thresholds for Mega Events are returned to 1,000 attendees for Indoor Mega Events and to 10,000 attendees for Outdoor Mega Events. The agency recommends masking for attendees at Outdoor Mega Events.

"Outbreak (non-major outbreak)" means at least three (3) COVID-19 cases among workers at the same worksite within a 14-day period. This may include volunteers, employees of contractors, subcontractors, or other businesses or agencies.

"Partially Vaccinated" means employees who have received at least one dose of a COVID-19 vaccine, but do not meet the definition of fully vaccinated as defined herein.

"Quarantine" means to restrict the movement of persons who were exposed to COVID-19 in case they become infected.

"Returned case" means a COVID-19 case who returned to work pursuant to Cal/OSHA T8 CCR § 3205 (c)(10) and did not develop any COVID-19 symptoms after returning. A person shall only be considered a returned case for 90 days after the initial onset of COVID-19 symptoms or, if the person never developed COVID-19 symptoms, for 90 days

after the first positive test. If a period of other than 90 days is required by a CDPH regulation or order, that period shall apply.

"Respirator" means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering facepiece respirator.

"Unvaccinated" means employees who have not received any doses of COVID-19 vaccine or whose status is unknown.

"Worksite" means the building, store, facility, agricultural field, or other location where a COVID-19 case was present during the infectious period. It does not apply to buildings, floors, or other locations of the employer that a COVID-19 case did not enter, locations where the worker worked by themselves without exposure to other employees, or to a worker's personal residence or alternative work location chosen by the worker when working remotely.

Note. The term "worksite" is used for the purpose of notice requirements per Labor Code § 6409.6(a)(4), § 6409.6(a)(2) and § 6409.6(c) (See *Procedures For Addressing COVID-19 Case(s), COVID-19 Symptoms Or Close Contact In The Workplace* section.)

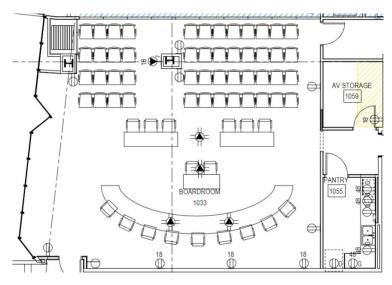
"Work Exclusion" prevents a person from working as an employee or entering a specific work facility.

"Work Restriction" prevents a person from working as an employee performing certain types of work (e.g., direct contact with clients or others), or restriction from contact with specific populations.

BOARD Meeting: 2/14/23

Item VI-A Attachment 5

LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM (LACERS) BOARD TABLE DESIGN AND LAYOUT









nefm. Duglish



REPORT TO BOARD OF ADMINISTRATION MEETING: FEBRUARY 14, 2023

From: Neil M. Guglielmo, General Manager ITEM: VII - B

SUBJECT: REVIEW OF LACERS 2021 PRINCIPLES FOR RESPONSIBLE INVESTMENT

ANNUAL TRANSPARENCY AND ASSESSMENT REPORTS

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☒

Recommendation

That the Board review the LACERS 2021 Principles for Responsible Investment (PRI) Annual Transparency and Assessment Reports.

Executive Summary

As a signatory of the PRI, LACERS has committed to incorporate environmental, social, and governance (ESG) factors into investment decisions and to report its ESG efforts by completing an annual PRI Private Responsible Investment (RI) Report, also known as the Transparency Report. The 2021 reporting year was LACERS' first year of reporting since becoming a PRI signatory in 2019. The Board's review of LACERS' 2021 Transparency Report, which reports on ESG efforts undertaken in the 2020 calendar year, and Assessment Report, which provides PRI's evaluation of the Transparency Report, provide deeper understanding of LACERS' progress towards investing within its ESG risk factor framework and affirming its signatory commitment to the six unique and distinct responsible investing principles of the PRI. The 2021 reporting cycle was a pilot reporting year under a newly released reporting framework, which presented several definitional, interpretational, and technical challenges to signatories and to PRI. As a result, LACERS' 2021 Assessment Report may have limited value in measuring progress of LACERS' ESG Program. Due to these challenges, PRI suspended the 2022 reporting cycle in order to develop and launch a new reporting framework for 2023.

Discussion

Background

As a PRI signatory, LACERS is obligated to report LACERS' ESG activities to PRI by completing and submitting an annual PRI Private RI Report, also known as the Transparency Report. On May 10, 2021, LACERS submitted its report (Attachment 1) on ESG efforts undertaken in calendar year 2020; this was LACERS' first year reporting to PRI since becoming a PRI signatory in 2019. The report was completed and submitted under PRI's newly launched pilot reporting system for 2021, comprised of a new reporting framework and assessment methodology, new data portal, and new reporting tool. PRI

created this new system based on extensive consultations with signatories to account for changes in the responsible investment market and to improve comprehensive data collection and the quality of PRI's review process.

During and subsequent to the 2021 reporting period, PRI received comments and questions on the new reporting framework tool from more than 1,700 signatories. This included comments on the structure and content of the framework as well as on users' experience with the new reporting tool. Overall, most signatories indicated that the new framework better captured responsible investment activities compared to the previous framework. However, the feedback varied between reporting modules and between asset owner and investment manager signatories. In addition, many signatories found that the new framework required an excessive amount of time and resources to complete in comparison to the previous framework. Technical issues with the new reporting tool, specifically with navigation and functionality, also affected the data quality and assessment of some signatories' submissions, including LACERS' submission.

PRI's Assessment of LACERS' 2021 Transparency Report

PRI acknowledged the issues with the 2021 reporting system and still moved forth with evaluating signatories' Tranparency Report submissions. Each signatory, including LACERS, received an Assessment Report (Attachment 2), which is intended to assist signatories with identifying possible areas of improvement within their ESG programs. The Summary Scorecard on pages four to six of Attachment 2 provides a PRI's evaluation of LACERS across various categories of responsible investment activities (modules). Scoring is presented on a star grading system ranging from one star (low score) to five stars (high score). Stars are determined by comparing a raw percentage score calculated by PRI to percentage scoring ranges assigned to each star grade as presented in the table below. PRI does not assign an overall star grade to signatories.

Star Grade	Raw Percentage Score Range		
One Star	0 to 25%		
Two Stars	>25% to 40%		
Three Stars	>40% to 65%		
Four Stars	>65% to 90%		
Five Stars	>90% to 100%		
N/A	Not Applicable		
N/R	Not Rated		

The Assessment Report shows that LACERS received two stars (39% raw score) for the Investment & Stewardship Policy category and two stars (30% raw score) for the Indirect – Listed equity – Active category. LACERS received one star, N/A, or N/R for all other categories.

It is important to highlight several factors pertaining to these scores. First, in calendar year 2020, the Board and staff were in the initial phases of planning and designing LACERS' new ESG Program and there was limited information to report to PRI for the 2021 reporting period. Second, LACERS' investments are externally managed and many of PRI's scoring categories pertain to internally managed assets, resulting in a number of N/A and N/R scores for LACERS. Third, the aforementioned

technical issues with the reporting system resulted in some of the one star, N/A, and N/R scores for LACERS. Finally, while PRI provides a universe median score (PRI Median) for each category, the PRI Median is not intended to be used as a benchmark for LACERS' scores. The universe is comprised of all signatories and reflects a wide range of ESG programs that have differing policies and goals, maturities, level of dedicated resources, and other factors.

Further, due to the various issues with the 2021 reporting framework, PRI cancelled annual reporting for 2022 in order to redesign and implement a new reporting framework for 2023 (released on January 26, 2023). PRI has advised signatories that the 2021 Transparency Report and Assessment Report should be considered stand-alone reports with limited value and should not be used to compare ESG program progress against historical or future reports.

LACERS' ESG Program Accomplishments Post-2021 PRI Reporting

Since the end of the 2021 reporting period (which reported on efforts undertaken in calendar year 2020), LACERS has continued to enhance its ESG Program. Notable accomplishments include, but are not limited to:

- 1. Annual review and Board approval of the PRI Action Plan on July 13, 2021, and on August 9, 2022;
- 2. Appointment of NEPC, LLC as LACERS' ESG Consultant in 2021;
- 3. Board approval of the LACERS' ESG Risk Framework on April 27, 2021 and annual review on August 9, 2022;
- 4. Adoption of the LACERS Responsible Investment Policy on January 11, 2022;
- Submission of the LACERS ESG Risk Framework for the PRI Awards 2022 ESG Incorporation Initiative of the Year Award on June 29, 2022. Although ESG Risk Framework did not move forward in the award contest, PRI highlighted it as a case study on the PRI website (https://www.unpri.org/asset-owner-resources/lacers-implementing-an-esg-risk-framework/10962.article);
- 6. Hosting of three successful Emerging Manager Symposiums on October 20, 2021, April 20, 2022, and November 16, 2022;
- 7. Enhancing efforts to promote LACERS' ESG Program, including participating on six ESG panels at conferences, and contributing to the <u>PRI Diversity</u>, <u>Equity</u>, <u>and Inclusion Due Diligence</u> Questionnaire for Institutional Investors.

Staff will continue to increase LACERS' ESG efforts pursuant to its ESG governing documents, including the LACERS Responsible Investment Policy, PRI Action Plan, ESG Risk Framework Action Plan, and other potential Board directives, and will report the evaluation of such efforts in subsequent annual PRI Transparency Reports.

Strategic Plan Impact Statement

LACERS' membership and adoption of the Principles for Responsible Investment and the consideration of ESG issues as risk factors align with the Strategic Plan Goals to optimize long-term risk adjusted

investment returns (Goal IV) and to uphold good governance practices which affirm transparency, accountability, and fiduciary duty (Goal V).

Prepared By: Ellen Chen, ESG Risk Officer, Investment Officer II, Investment Division

NMG/RJ/BF/EC:rm

Attachments: 1. PRI Private Responsible Investment Report (Transparency Report)

2. PRI Assessment Report



PRIVATE RI REPORT

2021 PILOT

Los Angeles City Employees' Retirement System (LACERS)

Generated 2022-08-18

About this report

The PRI Reporting Framework helps to build a common language and industry standard for reporting responsible investment activities.

This **Private RI Report** is an export of your responses to the PRI Reporting Framework during the 2021 reporting period. It shows your responses to all completed indicators, even those you chose to keep private. It is designed for your internal review or – if you wish – to share with your stakeholders. The **Private RI Report** supports dialogue within your organisation, as well as with your clients, beneficiaries and other stakeholders if you chose to share it externally.

You will also receive a **Public RI Report**, which only includes responses to mandatory indicators and responses to voluntary indicators that you agreed to make public. Unlike this **Private RI Report**, the **Public RI Report** will be publicly available on the PRI website. The information is presented exactly as it was reported. Where an indicator offered a multiple-choice response, all options that were available to select from are included for context. While presenting the information verbatim results in lengthy reports, the approach is informed by signatory feedback that signatories prefer that the PRI does not summarise the information.

Context

In consultation with signatories, between 2018 and 2020 the PRI extensively reviewed the Reporting and Assessment processes and set the ambitious objective of launching in 2021 a completely new investor Reporting Framework, together with a new reporting tool. We ran the new investor Reporting and Assessment process as a pilot in its first year, and such process included providing additional opportunities for signatories to provide feedback on the Reporting Framework, the online reporting tool and the resulting reports. The feedback from this pilot phase has been, and is continuing to be analysed, in order to identify any improvements that can be included in future reporting cycles.

PRI disclaimer

This document presents information reported directly by signatories in the 2021 reporting cycle. This information has not been audited by the PRI or any other party acting on its behalf. While this information is believed to be reliable, no representations or warranties are made as to the accuracy of the information presented.

The PRI has taken reasonable action to ensure that data submitted by signatories in the reporting tool is reflected in their official PRI reports accurately. However, it is possible that small data inaccuracies and/or gaps remain, and the PRI shall not be responsible or liable for such inaccuracies and gaps.

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Senior Leadership Statement (SLS)

Senior leadership statement

Our commitment

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SLS 1 S1	CORE	N/A	N/A	PUBLIC	Our commitment	GENERAL

- Why does your organisation engage in responsible investment?
- What is your organisation's overall approach to responsible investment?
- What are the main differences between your organisation's approach to responsible investment in its ESG practice and in other practices, across asset classes?

LACERS is committed to incorporating environmental, social, and governance (ESG) and other risk factors into its management of the pension plan in a manner consistent with the Board and Staff's fiduciary responsibilities to LACERS members, retirees, and beneficiaries and consistent with LACERS' role as a prudent, long-term, responsible investor. By considering such factors, LACERS believes that it can enhance overall portfolio risk management and generate long-term, sustainable outperformance. LACERS seeks to incorporate relevant and material ESG considerations into its investment due diligence, decision-making, and monitoring processes for all of its external managers (LACERS does not manage assets internally) and investment consultants through the development of policies, tools, metrics, and analyses to evaluate ESG-related risks. LACERS' approach to Responsible Investment (RI) in its ESG practice is applied through a Responsible Investment Policy, which is being designed to apply ESG-risk assessment consistently and evenly across all asset classes to the extent possible.

Annual overview

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SLS 1 S2	CORE	N/A	N/A	PUBLIC	Annual overview	GENERAL

- o Discuss your organisation's progress during the reporting year on the responsible investment issue you consider most relevant or material to your organisation or its assets.
- Reflect on your performance with respect to your organisation's responsible investment objectives and targets during the reporting year. This might involve e.g. outlining your single most important achievement, or describing your general progress, on topics such as the following:
 - \circ refinement of ESG analysis and incorporation
 - stewardship activities with investees and/or with policy makers
 - o collaborative engagements
 - attainment of responsible investment certifications and/or awards

On September 3, 2019, LACERS became a signatory to the Principles for Responsible Investment (PRI). Since then, LACERS has advanced its ESG initiatives through a Board-approved PRI Action Plan, which details how LACERS will accomplish each of the Six Principles of the PRI. LACERS key accomplishments during the PRI reporting year include:

- Hiring of NEPC, LLC (NEPC) as LACERS' ESG Consultant to assist with the development of LACERS' RI Program, including guidance on a new, draft RI Policy.
- Appointing an ESG Risk Officer to oversee LACERS' RI efforts.
- Reviewing and revising LACERS' Proxy Voting Policy to incorporate ESG-related proxy matters with guidance from Institutional Shareholder Services (ISS). Examples of ESG-related matters addressed in the revised policy include the lack of women representation of corporate boards; gender, race or ethnicity pay gaps; and employee diversity.
- Developing and implementing ESG risk questions for use in the investment manager procurement process and routine due diligence of existing investment managers across public and private markets asset classes.
- Attending several C40 Meetings and ESG Roundtables and Conferences to expand LACERS' ESG network among other public pension as well as private external managers.
- Continuing with LACERS' commitment to stakeholder engagement/shareholder advocacy through written communications to companies and regulatory bodies and through securities litigation.

Next steps

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SLS 1 S3	CORE	N/A	N/A	PUBLIC	Next steps	GENERAL

What specific steps has your organisation outlined to advance your commitment to responsible investment in the next two years?

LACERS' future goals in responsible investment include:

- Creating a LACERS ESG Risk Framework
- Exploring ESG-friendly and low carbon index products to invest in sustainable portfolios
- Exploring private equity investments in clean technology
- Exploring Real Estate investments that emphasize green building certifications such as LEED certification
- Improve the Emerging Manager Policy to be more inclusive to more external managers

Endorsement

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SLS 1 S4	CORE	N/A	N/A	PUBLIC	Endorsement	GENERAL

The Senior Leadership Statement has been prepared and/or reviewed by the undersigned and reflects our organisation-wide commitment and approach to responsible investment.

Name	Neil M. Guglielmo
Position	General Manager
Organisation's name	Los Angeles City Employees' Retirement System

• This endorsement is for the Senior Leadership Statement only and is not an endorsement of the information reported by Los Angeles City Employees' Retirement System (LACERS) in the various modules of the Reporting Framework. The Senior Leadership Statement is simply provided as a general overview of Los Angeles City Employees' Retirement System (LACERS)'s responsible investment approach. The Senior Leadership Statement does not constitute advice and should not be relied upon as such, and is not a substitute for the skill, judgement and experience of any third parties, their management, employees, advisors and/or clients when making investment and other business decisions.

Organisational Overview (OO)

Organisational information

Categorisation

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 1	CORE	Signatory category	Multiple, see guidance	PUBLIC	Categorisation	GENERAL

Select the type that best describes your organisation or the services you provide.

(A) Non-corporate pension or superannuation or retirement or provident fund or plan

(1) This is our only (or primary) type

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 1.1	CORE	OO 1	N/A	PUBLIC	Categorisation	GENERAL
Select which pensions you offer.						
(A) Defined benefit					(1) This is our only type	y (or primary)

Subsidiary information

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 2	CORE	N/A	OO 2.1	PUBLIC	Subsidiary information	GENERAL

Does your organisation have subsidiaries that are also PRI signatories in their own right?

o (A) Yes

⊚ (B) No

Reporting year

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 3	CORE	N/A	N/A	PUBLIC	Reporting year	GENERAL

Indicate the year-end date for your reporting year.

	Month	Day	Year
Reporting year end date:	December	31	2020

Assets under management

All asset classes

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 4	CORE	OO 4.1, OO 4.2	N/A	PUBLIC	All asset classes	GENERAL

What were your total assets under management (AUM) at the end of the indicated reporting year? Provide the amount in USD.

(A) AUM of your organisation, including subsidiaries	US\$ 20,959,422,719.00
(B) AUM of subsidiaries that are PRI signatories in their own right and excluded from this submission	US\$ 0.00
(C) AUM subject to execution, advisory, custody, or research advisory only	US\$ 0.00

Asset breakdown

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 5	CORE	Multiple, see guidance	Multiple, see guidance	PRIVATE	Asset breakdown	GENERAL

Provide a percentage breakdown of your total assets under management at the end of your indicated reporting year.

	Percentage of AUM
(A) Listed equity – internal	0.0%
(B) Listed equity – external	53.17%
(C) Fixed income – internal	0.0%
(C) Fixed income – internal	0.070

(D) Fixed income – external	26.4%
(E) Private equity – internal	0.0%
(F) Private equity – external	11.69%
(G) Real estate – internal	0.0%
(H) Real estate – external	3.77%
${\rm (I)\ Infrastructure-internal}$	0.0%
(J) Infrastructure – external	0.0%
(K) Hedge funds – internal	0.0%
(L) Hedge funds – external	0.0%
(M) Forestry – internal	0.0%
(N) Forestry – external	0.09%
(O) Farmland – internal	0.0%
(P) Farmland – external	0.0%
(Q) Other – internal, please specify:	0.0%
(R) Other – external, please specify: Commodities and Cash	4.88%
(S) Off-balance sheet – internal	0.0%
(T) Off-balance sheet – external	0.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 5.1	CORE	OO 5	Multiple, see guidance	PRIVATE	Asset breakdown	GENERAL

Provide a breakdown of your organisation's externally managed assets between segregated mandates and pooled funds or investments.

	$egin{array}{l} (1) \ ext{Listed} \ ext{equity} \end{array}$	(2) Fixed income	(3) Private equity	(4) Real estate	(7) Forestry	(9) Other
(A) Segregated mandate(s)	94.0%	79.0%	0.0%	0.0%	0.0%	100.0%
(B) Pooled fund(s) or pooled investment(s)	6.0%	21.0%	100.0%	100.0%	100.0%	0.0%

Indicator	Type of indicator	$egin{array}{c} { m Dependent} \ { m on} \end{array}$	Gateway to	Disclosure	Subsection	PRI Principle
OO 5.2 LE	CORE	OO 5, OO 5.1	Multiple, see guidance	PRIVATE	Asset breakdown	GENERAL

Provide a further breakdown of your listed equity assets.

	(B) External allocation – segregated	(C) External allocation – pooled
(1) Passive equity	65.0%	100.0%
(2) Active – quantitative	4.0%	0.0%
(3) Active – fundamental	30.0%	0.0%
(4) Investment trusts (REITs and similar publicly quoted vehicles)	1.0%	0.0%
(5) Other, please specify:	0.0%	0.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 5.2 FI	CORE	OO 5, OO 5.1	Multiple, see guidance	PRIVATE	Asset breakdown	GENERAL

Provide a further breakdown of your fixed income assets.

	(B) External allocation $-$ segregated	(C) External allocation – pooled
(1) Passive – SSA	0.0%	39.0%
(2) Passive – corporate	0.0%	32.0%
(3) Passive – securitised	0.0%	29.0%
(4) Active – SSA	41.0%	0.0%
(5) Active – corporate	40.0%	0.0%
(6) Active – securitised	16.0%	0.0%
(7) Private debt	3.0%	0.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 5.2 PE	CORE	OO 5, OO 5.1	N/A	PRIVATE	Asset breakdown	GENERAL

Provide a further breakdown of your private equity assets.

(C) External allocation - pooled

(1) Venture capital	12.6%
(2) Growth capital	13.1%
(3) (Leveraged) buyout	59.7%

(4) Distressed, turnaround or special situations	7.9%
(5) Secondaries	0.0%
(6) Other, please specify: other	6.7%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 5.2 RE	CORE	OO 5, OO 5.1	N/A	PRIVATE	Asset breakdown	GENERAL

Provide a further breakdown of your real estate assets.

	(C) External allocation – pooled
(1) Retail	16.0%
(2) Office	25.0%
(3) Industrial	26.0%
(4) Residential	19.0%
(5) Hotel	2.0%
(6) Lodging, leisure and recreation	0.0%
(7) Education	0.0%
(8) Technology/science	0.0%
(9) Healthcare	0.0%
(10) Mixed use	0.0%
(11) Other, please specify: other	12.0%

ESG strategies

Externally managed assets

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 6 SAM	CORE	OO 5.2 LE, OO 5.2 FI	OO 6.1 SAM	PRIVATE	Externally managed assets	1

Which ESG incorporation strategy and/or combination of strategies apply to your externally managed active listed equity and fixed income?

	(1) Listed equity - external	(2) Fixed income - SSA - external	(3) Fixed income – corporate - external	(4) Fixed income – securitised - external
(A) Screening alone	2.0%	0.0%	0.0%	0.0%
(B) Thematic alone	0.0%	0.0%	0.0%	0.0%
(C) Integration alone	56.0%	52.0%	68.0%	61.0%
(D) Screening and integration	16.0%	28.0%	14.0%	4.0%
(E) Thematic and integration	0.0%	0.0%	0.0%	0.0%
(F) Screening and thematic	0.0%	0.0%	0.0%	0.0%
(G) All three strategies combined	0.0%	0.0%	0.0%	0.0%
(H) None	26.0%	20.0%	18.0%	35.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 6.1 SAM	CORE	OO 6 SAM	N/A	PRIVATE	Externally managed assets	1

What type of screening is applied to your externally managed active listed equity and fixed income?

	(1) Listed equity - external	(2) Fixed income – SSA - external	(3) Fixed income – corporate - external	(4) Fixed income – securitised - external
(A) Positive/best-in-class screening only	0.0%	0.0%	0.0%	0.0%
(B) Negative screening only	74.0%	0.0%	0.0%	0.0%
(C) A combination of positive/best-in-class and negative screening	26.0%	100.0%	100.0%	100.0%

Externally managed assets

Captive relationships

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 7	CORE	OO 5	Multiple, see guidance	PUBLIC	Captive relationships	GENERAL

Does your organisation have a captive relationship with some or all of its external investment managers?

o (A) Yes

⊚ (B) No

Investment consultants

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 8	CORE	OO 5	SAM 1	PUBLIC	Investment consultants	GENERAL

Does your organisation engage investment consultants in the selection, appointment or monitoring of your external investment managers?

(A) Yes○ (B) No

Stewardship

Listed equity

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 9 LE	CORE	OO 5, OO 5.2 LE	Multiple, see guidance	PUBLIC	Listed equity	2

Does your organisation conduct stewardship activities for your listed equity assets?

	(1) Engagement on listed equity – active	(2) Engagement on listed equity – passive	(3) (Proxy) voting on listed equity – active	(4) (Proxy) voting on listed equity – passive
(A) Through service providers			Ø	
(B) Through external managers	Ø			
(C) Through internal staff				
(D) Collaboratively				
(E) We did not conduct this stewardship activity		Ø		

Fixed income

strategy/asset type

Indicator	Type of indicator	Dependent on G	Gateway to	Disclosure	Subsection	PRI Principle
OO 9 FI	CORE	OO 5, OO 5.2 FI M	Multiple, see guidance	PUBLIC	Fixed income	2
Does your org	ganisation conduct stewar	rdship activities for you	r fixed income assets?			
		(1) Passive – SSA	(2) Passive – corporate	(3) Passi securitis) Active $-$ SSA
(A) Through	service providers					
(B) Through	external managers					
(C) Through	internal staff					
(D) Collabora	atively					
	ot conduct this activity for this type	Ø	Ø	Ø		7
		(5) Active – corpor	rate (6) Active -	- securitised	(7) P	rivate debt
(A) Through	service providers]		
(B) Through	external managers		[
(C) Through	internal staff		[
(D) Collabora	atively		[
	ot conduct this activity for this	V	[7		7

Private equity, real estate and infrastructure

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 9 ALT	CORE	OO 5	Multiple, see guidance	PUBLIC	Private equity, real estate and infrastructure	2

Does your organisation conduct stewardship activities in the following asset classes?

	(1) Private equity	(2) Real estate
(A) Through service providers		
(B) Through external managers		
(C) Through internal staff		
(D) Collaboratively		
(E) We did not conduct stewardship activities for this asset class		

ESG incorporation

External manager selection

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
00 11	CORE	Multiple, see guidance	Multiple, see guidance	PUBLIC	External manager selection	1

For each externally managed asset class, select whether or not you incorporate ESG into external manager selection. Your response should refer to the selection of the external managers who managed the relevant asset classes during the reporting year, regardless of when such selection took place.

	(1) ESG incorporated into external manager selection	(2) ESG not incorporated into external manager selection
(A) Listed equity – passive	o	•
(B) Listed equity – active	•	0
(C) Fixed income – passive	O	•
(D) Fixed income – active	O	•
(E) Private equity	O	•
(F) Real estate	O	•
(I) Forestry	o	•
(K) Other [as specified]	0	•

External manager appointment

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 12	CORE	Multiple, see guidance	Multiple, see guidance	PUBLIC	External manager appointment	1

For each externally managed asset class, select whether or not you incorporate ESG into external manager appointment. Your response should refer to the appointment of the external managers who managed the relevant asset classes during the reporting year, regardless of when their appointment took place.

	(1) ESG incorporated into external manager appointment	(2) ESG not incorporated into external manager appointment
(A) Listed equity – passive	o	•
(B) Listed equity – active	•	0
(C) Fixed income – passive	o	•

(D) Fixed income – active	0	•
(K) Other [as specified]	0	

The following externally managed asset classes are reported in OO 5.1 as 100% pooled funds or pooled investments and, therefore, ESG incorporation into external manager appointment is not applicable.

(3) ESG incorporation into external manager appointment is not applicable as we only invest in pooled funds

(E) Private equity	•
(F) Real estate	•
(I) Forestry	•

External manager monitoring

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 13	CORE	Multiple, see guidance	Multiple, see guidance	PUBLIC	External manager monitoring	1

For each externally managed asset class, select whether or not you incorporated ESG into external manager monitoring during the reporting year.

	(1) ESG incorporated into external manager monitoring	(2) ESG not incorporated into external manager monitoring
(A) Listed equity – passive	0	•
(B) Listed equity – active	•	0
(C) Fixed income – passive	o	•
(D) Fixed income – active	o	•
(E) Private equity	o	•

(F) Real estate	0	
(I) Forestry	0	
(K) Other [as specified]	0	•

Voluntary reporting

Voluntary modules

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 14	CORE	Multiple, see guidance	Multiple, see guidance	PUBLIC	Voluntary modules	GENERAL

The following modules are voluntary to report on in the separate PRI asset class modules as they account for less than 10% of your total AUM and are under USD 10 billion. Please select if you wish to voluntarily report on the module.

	(1) Yes, report on the module	(2) No, opt out of reporting on the module
(A) Listed equity	0	•
S	tory to report on as they account for 10% or m Stewardship Policy) module is always applicabl	· ·
	(1) Y-2	mt on the medule
	(1) Yes, repo	rt on the module
ISP: Investment and Stewardship Policy	(1) Yes, repo	ert on the module
1	(1) Yes, repo	

Pooled funds governance: Appointment

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 15	CORE	OO 5.1	SAM 12	PUBLIC	Pooled funds governance: Appointment	GENERAL

Would you like to voluntarily report on ESG incorporation in the appointment of your external managers for pooled funds?

○ (A) Yes**○** (B) No

ESG/sustainability funds and products

Labelling and marketing

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 16	CORE	Multiple, see guidance	Multiple, see guidance	PRIVATE	Labelling and marketing	GENERAL

What percentage of your assets under management in each asset class are ESG/sustainability marketed funds or products, and/or ESG/RI certified or labelled assets? Percentage figures can be rounded to the nearest 5% and should combine internally and externally managed assets.

	Percentage
(B) Listed equity – active	0.0%

Climate investments

Asset breakdown

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 17	CORE	N/A	N/A	PRIVATE	Asset breakdown	GENERAL

What percentage of your assets under management is in targeted low-carbon or climate-resilient investments?

0.0%

Other asset breakdowns

Geographical breakdown

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 18	CORE	Multiple, see guidance	N/A	PRIVATE	Geographical breakdown	GENERAL

What is the geographical breakdown of your organisation's assets under management by investment destination (i.e. where the investments are located)?

	(1) Listed equity	(2) Fixed income - SSA	(3) Fixed income – corporate	(4) Fixed income – securitised
(A) Developed	80.0%	80.0%	92.0%	100.0%
(B) Emerging	20.0%	17.0%	8.0%	0.0%
(C) Frontier	0.0%	3.0%	0.0%	0.0%
(D) Other	0.0%	0.0%	0.0%	0.0%

	(5) Fixed income – private debt	(6) Private equity	(7) Real estate
(A) Developed	90.0%	100.0%	100.0%
(B) Emerging	10.0%	0.0%	0.0%
(C) Frontier	0.0%	0.0%	0.0%
(D) Other	0.0%	0.0%	0.0%

Management by PRI signatories

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 19	CORE	OO 5	N/A	PRIVATE	Management by PRI signatories	GENERAL

What approximate percentage (+/-5%) of your externally managed assets are managed by PRI signatories?

56.0%

Fixed income constraints

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 20	CORE	OO 5.2 FI	OO 20.1	PRIVATE	Fixed income constraints	GENERAL

What percentage of your fixed income assets are subject to constraints? The constraints may be regulatory requirements, credit quality restrictions, currency constraints or similar.

Internal and external fixed income assets subject to constraints

(A) Fixed income – SSA	100.0%
(B) Fixed income – corporate	100.0%

(C) Fixed income – securitised 100.0%

(D) Fixed income – private debt 100.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 20.1	CORE	OO 20	N/A	PRIVATE	Fixed income constraints	GENERAL

Describe the constraints to your fixed income assets.

	Fixed income constraints
(A) Fixed income – SSA	Portfolio effective duration is within a specified range of the designated benchmark. Tracking error is also within a specified range of the designated benchmark. There are prescribed minimum portfolio and individual issue credit quality ratings. There are specified authorized and prohibited investment types. There are prescribed asset type and issuer limits within the portfolio.
(B) Fixed income – corporate	Portfolio effective duration is within a specified range of the designated benchmark. Tracking error is also within a specified range of the designated benchmark. There are prescribed minimum portfolio and individual issue credit quality ratings. There are specified authorized and prohibited investment types. There are prescribed asset type and issuer limits within the portfolio.
(C) Fixed income – securitised	Portfolio effective duration is within a specified range of the designated benchmark. Tracking error is also within a specified range of the designated benchmark. There are prescribed minimum portfolio and individual issue credit quality ratings. There are specified authorized and prohibited investment types. There are prescribed asset type and issuer limits within the portfolio.
(D) Fixed income – private debt	Credit quality and liquidity are constrained to certain thresholds. There are specified authorized and prohibited investment types. There are prescribed asset type and issuer limits within the portfolio.

Context and explanation

Appointment: Pooled funds

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 33	CORE	OO 5.1	N/A	PUBLIC	Appointment: Pooled funds	GENERAL

For your externally managed pooled funds, please describe any other mechanisms in place to set expectations as part of the appointment or commitment process.

For commingled funds that hold listed equity and fixed income securities, LACESR has a Manager Monitoring Policy and hold those funds to certain expectations (return/risk); these funds are monitored quarterly. This process is incorporated in the contracting process. On the private side, LACERS negotiates custom side letters to make sure that general partners are in alignment with LACERS' policies (reporting requirements, legal requirements, disclosures, etc.). In addition, staff asks general partners for their views on ESG related practices during meetings and quarterly / annual update meetings.

ESG not incorporated

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
OO 35	CORE	Multiple, see guidance	N/A	PUBLIC	ESG not incorporated	1, 2

Describe why you currently do not incorporate ESG into your assets and/or why you currently do not conduct stewardship.

	Description
(N) Externally managed: Listed equity – passive	Passive vehicle.
(P) Externally managed: Fixed income – passive	Passive vehicle
(Q) Externally managed: Fixed income – active	LACERS is in the process of developing a Responsible Investment Policy in 2021 to incorporate ESG into investment decisions. Limited ESG integration is addressed through Geo-Political Risk Policy.

(R) Externally managed: Private equity	LACERS is in the process of developing a Responsible Investment Policy in 2021 to incorporate ESG into investment decisions. Limited ESG integration is addressed through Geo-Political Risk Policy.
(S) Externally managed: Real estate	LACERS is in the process of developing a Responsible Investment Policy in 2021 to incorporate ESG into investment decisions.Limited ESG integration is addressed through Geo-Political Risk Policy.
(V) Externally managed: Forestry	LACERS is in the process of developing a Responsible Investment Policy in 2021 to incorporate ESG into investment decisions.Limited ESG integration is addressed through Geo-Political Risk Policy.
(X) Externally managed: Other	This is a cash account. Limited ESG integration is addressed through Geo-Political Risk Policy.

Investment and Stewardship Policy (ISP)

Responsible investment policy & governance

Responsible investment policy

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 1	CORE	N/A	ISP 1.1, ISP 1.2	PUBLIC	Responsible investment policy	1

Does your organisation have a formal policy or policies covering your approach to responsible investment? Your approach to responsible investment may be set out in a standalone guideline, covered in multiple standalone guidelines or be part of a broader investment policy. Your policy may cover various responsible investment elements such as stewardship, ESG guidelines, sustainability outcomes, specific climate-related guidelines, RI governance and similar.

- (A) Yes, we do have a policy covering our approach to responsible investment
- o (B) No, we do not have a policy covering our approach to responsible investment

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 1.1	CORE	ISP 1	Multiple, see guidance	PUBLIC	Responsible investment policy	1

What elements does your responsible investment policy cover? The responsible investment elements may be set out in one or multiple standalone guidelines, or they may be part of a broader investment policy.

√	(A)	Overall	approach	to	responsible	investment

- ☑ (B) Guidelines on environmental factors
- (C) Guidelines on social factors
- (D) Guidelines on governance factors
- ☑ (E) Approach to stewardship
- \Box (F) Approach to sustainability outcomes
- ☐ (G) Approach to exclusions
- □ (H) Asset class-specific guidelines that describe how ESG incorporation is implemented
- □ (I) Definition of responsible investment and how it relates to our fiduciary duty
- □ (J) Definition of responsible investment and how it relates to our investment objectives
- (K) Responsible investment governance structure
- \square (L) Internal reporting and verification related to responsible investment
- □ (M) External reporting related to responsible investment
- □ (N) Managing conflicts of interest related to responsible investment
- \square (O) Other responsible investment aspects not listed here, please specify:

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 2	CORE	ISP 1.1	N/A	PUBLIC	Responsible investment policy	6

Indicate which of your responsible investment policy elements are publicly available and provide links.

- ☑ (A) Overall approach to responsible investment. Add link(s):
- https://www.lacers.org/sites/main/files/file-attachments/lacers board manual.pdf?1606259949
- ☑ (B) Guidelines on environmental factors. Add link(s):
- $https://www.lacers.org/sites/main/files/file-attachments/lacers_board_manual.pdf?1606259949$
- ☑ (C) Guidelines on social factors. Add link(s):
- $https://www.lacers.org/sites/main/files/file-attachments/lacers_board_manual.pdf?1606259949$
- ☑ (D) Guidelines on governance factors. Add link(s):

☑ (E) Approach to stewardship. Add link(s):

https://www.lacers.org/sites/main/files/file-attachments/lacers board manual.pdf?1606259949

☑ (K) Responsible investment governance structure. Add link(s):

https://www.lacers.org/sites/main/files/file-attachments/lacers board manual.pdf?1606259949

 \square (P) Our responsible investment policy elements are not publicly available

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 3	CORE	ISP 1.1	N/A	PUBLIC	Responsible investment policy	1

What percentage of your total assets under management are covered by your policy elements on overall approach to responsible investment and/or guidelines on environmental, social and governance factors?

- o (A) Overall approach to responsible investment
- o (B) Guidelines on environmental factors
- o (C) Guidelines on social factors
- o (D) Guidelines on governance factors

AUM coverage of all policy elements in total:

100.0%

Governance

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 6	CORE	N/A	ISP 8	PUBLIC	Governance	1

Do your organisation's board, chief-level staff, investment committee and/or head of department have formal oversight and accountability for responsible investment?

- $\ \square$ (A) Board and/or trustees
- ☑ (B) Chief-level staff (e.g. Chief Executive Officer (CEO), Chief Investment Officer (CIO) or Chief Operating Officer (COO))
- ☐ (C) Investment committee
- \square (D) Other chief-level staff, please specify:
- \square (E) Head of department, please specify department:
- \square (F) None of the above roles have oversight and accountability for responsible investment

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 7	CORE	N/A	ISP 8	PUBLIC	Governance	1

In your organisation, which internal or external roles have responsibility for implementing responsible investment?

☑ (,	A) I	3oard	and.	or/	trustees
-------------	------	-------	------	-----	----------

- ☑ (B) Chief-level staff (e.g. Chief Executive Officer (CEO), Chief Investment Officer (CIO) or Chief Operating Officer (COO))
- ☑ (C) Investment committee
- ☐ (D) Other chief-level staff [as specified]
- ☐ (E) Head of department [as specified]
- ☑ (F) Portfolio managers
- ☑ (G) Investment analysts
- ☑ (H) Dedicated responsible investment staff
- \square (I) Investor relations
- ☑ (J) External managers or service providers
- \square (K) Other role, please specify:
- \square (L) Other role, please specify:
- \square (M) We do not have roles with responsibility for implementing responsible investment.

People and capabilities

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 8	CORE	ISP 6, ISP 7	ISP 8.1, ISP 8.2	PUBLIC	People and capabilities	General

What formal objectives for responsible investment do the roles in your organisation have?

	$\begin{array}{c} \text{(1) Board} \\ \text{and/or trustees} \end{array}$	(2) Chief-level staff	(3) Investment committee	(6) Portfolio managers
(A) Objective for ESG incorporation in investment activities	Ø			
(B) Objective for contributing to the development of the organisation's ESG incorporation approach	Ø	Ø	Ø	

(C) Objective for contributing to the organisation's stewardship activities (e.g. through sharing findings from continuous ESG research or investment decisions)		Ø		
(D) Objective for ESG performance		Ø		
(E) Other objective related to responsible investment [as specified]				
(F) Other objective related to responsible investment [as specified]				
(G) No formal objectives for responsible investment exist for this role				V
	(7) Investment analysts	responsible	edicated e investment taff	(10) External managers or service providers
(A) Objective for ESG incorporation in investment activities				
(B) Objective for contributing to the development of the organisation's ESG incorporation approach			v	☑
(C) Objective for contributing to the organisation's stewardship activities (e.g. through sharing findings from continuous ESG research or investment decisions)			v	
(D) Objective for ESG performance			V	Ø
(E) Other objective related to responsible investment [as specified]				

	ective related to estment [as specified]					
(G) No formal responsible invoice	objectives for estment exist for this	Ø				
Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 8.2	CORE	ISP 8	N/A	PUBLIC	People and capabilities	General
Which respons	ible investment objectiv	ves are linked to va	riable compensa	tion for roles i	n your organisation?	
					jectives linked to variable on your organisation:	compensation for
(1) Board and	or trustees					
(A) Objective i	for ESG incorporation is	n investment activ	ities			
(B) Objective f ESG incorpora	for contributing to the o	development of the	e organisation's			
(2) Chief-level	staff (e.g. Chief Executi	ive Officer (CEO),	Chief Investmen	t Officer (CIO	or Chief Operating Office	er (COO))
(B) Objective f ESG incorpora	for contributing to the ction approach	development of the	e organisation's			
	for contributing to the charing findings from consisions)			es 🗆		
(D) Objective i	for ESG performance					
(3) Investment	committee					
(B) Objective f ESG incorpora	for contributing to the c	development of the	e organisation's			

(8) Dedicated	l responsible investment s	staff				
	e for contributing to the cation approach	development of the	e organisation's			
	e for contributing to the sharing findings from coecisions)			es 🗆		
(D) Objective	e for ESG performance					
(10) External	managers or service prov	viders				
()	e for contributing to the cation approach	development of the	e organisation's			
(D) Objective	e for ESG performance					
(G) We have	not linked any RI objecti	ves to variable cor	npensation	Ø		
Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 9	CORE	N/A	N/A	PUBLIC	People and capabilities	General

How frequently does your organisation assess the responsible investment capabilities and training needs among your investment professionals?

- (A) Quarterly or more frequently
- o (B) Bi-annually
- o (C) Annually
- (D) Less frequently than annually
- (E) On an ad hoc basis
- \circ (F) We do not have a process for assessing the responsible investment capabilities and training needs among our investment professionals

Strategic asset allocation

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 10	CORE	N/A	ISP 10.1	PUBLIC	Strategic asset allocation	1

Does your organisation incorporate ESG factors into your strategic asset allocation?

- \square (A) We incorporate ESG factors into calculations for expected risks and returns of asset classes
- \square (B) We specifically incorporate physical, transition and regulatory changes related to climate change into calculations for expected risks and returns of asset classes
- (C) No, we do not incorporate ESG considerations into our strategic asset allocation
- \square (D) Not applicable, we do not have a strategic asset allocation process

Stewardship

Stewardship policy

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 11	CORE	Multiple, see guidance	N/A	PRIVATE	Stewardship policy	2

What percentage of your assets under management does your stewardship policy cover?

(A) Listed equity 100.0%

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 12	CORE	ISP 1.1	ISP 12.1	PUBLIC	Stewardship policy	2

Which elements does your organisation's stewardship policy cover? The policy may be a standalone guideline or part of a wider RI policy.

- ☑ (A) Key stewardship objectives
- □ (B) Prioritisation approach of ESG factors and their link to engagement issues and targets
- □ (C) Prioritisation approach depending on entity (e.g. company or government)
- □ (D) Specific approach to climate-related risks and opportunities

☐ (E) Stewardship tool usage across the organisation, including which, if any, tools are out of scope and when and how differen
tools are used and by whom (e.g. specialist teams, investment teams, service providers, external investment managers or similar)
□ (F) Stewardship tool usage for specific internal teams (e.g. specialist teams, investment teams or similar)
□ (G) Stewardship tool usage for specific external teams (e.g. service providers, external investment managers or similar)
□ (H) Approach to collaboration on stewardship
□ (I) Escalation strategies
\square (J) Conflicts of interest
□ (K) Details on how the stewardship policy is implemented and which elements are mandatory, including how and when the
policy can be overruled
□ (L) How stewardship efforts and results should be communicated across the organisation to feed into investment decision-
making and vice versa
(M) None of the above elements are captured in our stewardship policy

Stewardship policy implementation

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 13	CORE	ISP 1.1	N/A	PUBLIC	Stewardship policy implementation	2

How is your stewardship policy primarily applied?

- \circ (A) It requires our organisation to take certain actions
- (B) It describes default actions that can be overridden (e.g. by investment teams for certain portfolios)
- o (C) It creates permission for taking certain measures that are otherwise exceptional
- o (D) We have not developed a uniform approach to applying our stewardship policy

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 14	PLUS	Multiple, see guidance	N/A	PUBLIC	Stewardship policy implementation	2

How does your organisation ensure that its stewardship policy is implemented by external service providers? Please provide examples of the measures your organisation takes when selecting external providers, when designing engagement mandates and when monitoring the activities of external service providers.

	Provide examples below:
(A) Measures taken when selecting external providers:	Investment managers are to bring to LACERS attention any policy provisions that they may be unable to comply with during the early phases of the investment manager selection process.

(B) Measures taken when designing engagement mandates for external providers:	Policy compliance and enforcement discussions take place during due diligence but are not a part of how a mandate is designed.
(C) Measures taken to monitor external providers' alignment with our organisation's stewardship policy:	Staff conducts quarterly meetings with active externally managed investment managers to monitor compliance with stewardship policies. Policies are also enforced through separately managed account contract provisions.

Stewardship objectives

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 15	CORE	Multiple, see guidance	N/A	PUBLIC	Stewardship objectives	2

For the majority of assets within each asset class, which of the following best describes your primary stewardship objective?

	(1) Listed equity	
(A) Maximise the risk–return profile of individual investments	•	
(B) Maximise overall returns across the portfolio	0	
(C) Maximise overall value to beneficiaries/clients	0	
(D) Contribute to shaping specific sustainability outcomes (i.e. deliver impact)	0	

Stewardship prioritisation

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 16	CORE	Multiple, see guidance	N/A	PUBLIC	Stewardship prioritisation	2

What key criteria does your organisation use to prioritise your engagement targets? For asset classes such as real estate, private equity and infrastructure, you may consider this as key criteria to prioritise actions taken on ESG factors for assets, portfolio companies and/or properties in your portfolio. Select up to 3 options per asset class from the list.

	(1) Listed equity
(A) The size of our holdings in the entity or the size of the asset, portfolio company and/or property	
(B) The materiality of ESG factors on financial and/or operational performance	
(C) Specific ESG factors with systemic influence (e.g. climate or human rights)	
(D) The ESG rating of the entity	
(E) The adequacy of public disclosure on ESG factors/performance	
(F) Specific ESG factors based on input from clients	
(G) Specific ESG factors based on input from beneficiaries	
(H) Other criteria to prioritise engagement targets, please specify:	

(I) We do not prioritise our	
engagement targets	

Stewardship methods

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 17	PLUS	Multiple, see guidance	N/A	PUBLIC	Stewardship methods	2

Please rank the methods that are most important for your organisation in achieving its stewardship objectives. Ranking options: 1 = most important, 5 = least important.

(A) Internal resources (e.g. stewardship team, investment team, ESG team or staff)	2
(B) External investment managers, third-party operators and/or external property managers (if applicable)	1
(C) External paid services or initiatives other than investment managers, third-party operators and/or external property managers (paid beyond a membership fee)	3
(D) Informal or unstructured collaborations with peers	4
(E) Formal collaborative engagements (e.g. PRI-coordinated collaborative engagements, Climate Action 100+, the Initiative Climat International (iCI) or similar)	5

Collaborative stewardship

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 18	CORE	Multiple, see guidance	ISP 18.1	PUBLIC	Collaborative stewardship	2

Which of the following best describes your organisation's default position, or the position of the service providers/external managers acting on your behalf, with regards to collaborative stewardship efforts such as collaborative engagements?

- \circ (A) We recognise that stewardship suffers from a collective action problem, and, as a result, we actively prefer collaborative efforts
- \circ (B) We collaborate when our individual stewardship efforts have been unsuccessful or are likely to be unsuccessful, i.e. as an escalation tool
- o (C) We collaborate in situations where doing so would minimise resource cost to our organisation
- (D) We do not have a default position but collaborate on a case-by-case basis
- (E) We generally do not join collaborative stewardship efforts

Escalation strategies

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 19	PLUS	Multiple, see guidance	N/A	PUBLIC	Escalation strategies	2

Which of these measures did your organisation, or the service providers/external managers acting on your behalf, use most frequently when escalating initial stewardship approaches that were deemed unsuccessful?

	(1) Listed equity	
(A) Collaboratively engaging the entity with other investors		
(B) Filing/co-filing/submitting a shareholder resolution or proposal		
(C) Publicly engaging the entity (e.g. open letter)		
(D) Voting against the re-election of one or more board directors	☑	

(E) Voting ag board of direct	gainst the chair of the ctors					
(F) Voting ag	gainst the annual					
(G) Divesting exit strategy	g or implementing an					
	ot use any escalation ing the reporting year. In why below					
Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 20	CORE	Multiple, see guidance	N/A	PUBLIC	Escalation strategies	2
	ardship approaches we					
(A) Collabora	tions of your organisation				cting on your beh	
(A) Collabora entity with o	ions of your organisation			nal managers a	cting on your beh	
(A) Collabora entity with or (B) Filing/coshareholder r	atively engaging the ther investors -filing/submitting a esolution or proposal			nal managers a	cting on your beh	
(A) Collabora entity with or (B) Filing/coshareholder r (C) Publicly (e.g. open letter)	atively engaging the ther investors -filing/submitting a esolution or proposal	on or those of the servi		nal managers a	cting on your beh	
(A) Collabora entity with or entity with or (B) Filing/co-shareholder r (C) Publicly (e.g. open letter) (D) Voting agone or more be	atively engaging the ther investors -filing/submitting a esolution or proposal engaging the entity ter) gainst the re-election of poard directors gainst the chair of the	on or those of the servi		nal managers a	cting on your beh	

(G) Divesting or implementing an exit strategy	
(H) We do not have any restrictions on the escalation measures we can use	

Alignment and effectiveness

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 21	PLUS	Multiple, see guidance	N/A	PUBLIC	Alignment and effectiveness	2

Describe how you coordinate stewardship across your organisation to ensure that stewardship progress and results feed into investment decision-making and vice versa.

The Chief Investment Officer is kept apprised of issues related to ESG, and those matters are raised to the Board of Administration either through a written report or verbally as part of that officer's report of activities. It is a decision of the Board whether to escalate action or to take no action. In some instances, the Board is made aware of ESG issues, and the Board President directs the Chief Investment Officer to explore the issue and possibly return with recommendations on engagement or other action.

Stewardship examples

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 22	PLUS	Multiple, see guidance	N/A	PUBLIC	Stewardship examples	2

Describe stewardship activities that you participated in during the reporting year that led to desired changes in the entity you interacted with. Include what ESG factor(s) you engaged on and whether your stewardship activities were primarily focused on managing ESG risks and opportunities or delivering sustainability outcomes.

(A) Example 1	(1) Engagement type b) Collaborative	(2) Primary goal of stewardship activity a) Managing ESG risks/opportunities
(A) Example 1	(3) The ESG factors you focused on	(4) Description of stewardship activity
	in the stewardship activity	and the desired change(s) you achieved

(A) Example 1

Governance Factor

SEC ruling on proxy voting to not be considered a proxy voting solicitation under 17CFR Part 240

Engaging policymakers

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 23	CORE	N/A	Multiple, see guidance	PUBLIC	Engaging policymakers	2

How does your organisation, or the external investment managers or service providers acting on your behalf, engage with policymakers for a more sustainable financial system?

- ☑ (A) We engage with policymakers directly
- ☑ (B) We provide financial support, are members of and/or are in another way affiliated with third-party organisations, including trade associations and non-profit organisations, that engage with policymakers
- \square (C) We do not engage with policymakers directly or indirectly

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 23.1	CORE	ISP 23	N/A	PUBLIC	Engaging policymakers	2

What methods do you, or the external investment managers or service providers acting on your behalf, use to engage with policymakers for a more sustainable financial system?

 \square (F) Other methods used to engage with policymakers. Describe:

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 23.2	CORE	ISP 23	N/A	PUBLIC	Engaging policymakers	2

Do you have governance processes in place (e.g. board accountability and oversight, regular monitoring and review of relationships) that ensure your policy activities, including those through third parties, are aligned with your position on sustainable finance and your commitment to the 6 Principles of the PRI?

- (A) Yes, we have governance processes in place to ensure that our policy activities are aligned with our position on sustainable finance and our commitment to the 6 Principles of the PRI. Describe your governance processes:
- $\ \, oldsymbol{ \bullet}$ (B) No, we do not have these governance processes in place. Please explain why not:
 - We are in the process of drafting a Responsible Investment Policy in 2021.

Engaging policymakers – Policies

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 24	CORE	ISP 23	ISP 24.1	PUBLIC	Engaging policymakers – Policies	2

Do you have policies in place that ensure that your political influence as an organisation is aligned with your position on sustainable finance and your commitment to the 6 Principles of the PRI?

- o (A) Yes, we have a policy(ies) in place. Describe your policy(ies):
- (B) No, we do not a policy(ies) in place. Please explain why not:
 - We are drafting a Responsible Investment Policy in 2021.

Engaging policymakers – Transparency

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 25	CORE	ISP 23	N/A	PUBLIC	Engaging policymakers – Transparency	2

During the reporting year, did your organisation publicly disclose your policy engagement activities or those conducted on your behalf by external investment managers/service providers?

\checkmark	(A)	We publicly	disclosed	details	of	our	policy	${\bf engagement}$	activities.	Add	link(s):

www.lacers.org

- \square (B) We publicly disclosed a list of our third-party memberships in or support for trade associations, think-tanks or similar that conduct policy engagement activities with our support or endorsement. Add link(s):
- □ (C) No, we did not publicly disclose our policy engagements activities during the reporting year. Explain why:
- \square (D) Not applicable, we did not conduct policy engagement activities

Climate change

Public support

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 26	CORE	N/A	N/A	PUBLIC	Public support	General

Does your organisation publicly support the Paris Agreement?

- \circ (A) Yes, we publicly support the Paris Agreement Add link(s) to webpage or other public document/text expressing support for the Paris Agreement:
- (B) No, we currently do not publicly support the Paris Agreement

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 27	CORE	N/A	N/A	PUBLIC	Public support	General

Does your organisation publicly support the Task Force on Climate-Related Financial Disclosures (TCFD)?

- \circ (A) Yes, we publicly support the TCFD Add link(s) to we bpage or other public document/text expressing support for the TCFD:
- (B) No, we currently do not publicly support the TCFD

Governance

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 28	CORE	N/A	N/A	PUBLIC	Governance	General

How does the board or the equivalent function exercise oversight over climate-related risks and opportunities?

(A) By establishing inter	nal processes through	which the boar	d or the equivalent	function are info	ormed about cli	mate-related
risks and opportunities. Spe	ecify:					

Investment Staff	will inform	the	Board al	out cli	nate rela	ted risks	that	have	potential	to	affect	portfolio

- □ (B) By articulating internal/external roles and responsibilities related to climate. Specify:
- \square (C) By engaging with beneficiaries to understand how their preferences are evolving with regard to climate change. Specify:
- \square (D) By incorporating climate change into investment beliefs and policies. Specify:
- \square (E) By monitoring progress on climate-related metrics and targets. Specify:
- □ (F) By defining the link between fiduciary duty and climate risks and opportunities. Specify:
- \square (G) Other measures to exercise oversight, please specify:
- □ (H) The board or the equivalent function does not exercise oversight over climate-related risks and opportunities

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 29	CORE	N/A	N/A	PUBLIC	Governance	General

What is the role of management in assessing and managing climate-related risks and opportunities?

\checkmark	(A)	Managemen	t is responsibl	e for	identifying	climate-related	risks	opportunities/	and	reporting	them	back t	o the	e board	or t	the
equ	uival	lent function	. Specify:													

Investment staff and management will report to the Board for any climate related risk that can affect portfolio.

- \square (B) Management implements the agreed-upon risk management measures. Specify:
- □ (C) Management monitors and reports on climate-related risks and opportunities. Specify:
- □ (D) Management ensures adequate resources, including staff, training and budget, are available to assess, implement and monitor climate-related risks/opportunities and measures. Specify:
- □ (E) Other roles management takes on to assess and manage climate-related risks/opportunities, please specify:
- □ (F) Our management does not have responsibility for assessing and managing climate-related risks and opportunities

Strategy

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 30	CORE	N/A	Multiple, see guidance	PUBLIC	Strategy	General

Which climate-	related risks and opportu	inities has your organ	nisation identified w	rithin its inves	tment time hori	zon(s)?				
	financial risks in different sectors and/or assets that									
☑ (C) Assets with exposure to direct physical climate risk. Specify: Fossil fuels and carbon-emission producing assets .										
□ (D) Assets with exposure to indirect physical climate risk. Specify: □ (E) Specific sectors and/or assets that are likely to benefit under a range of climate scenarios. Specify: □ (F) Specific sectors and/or assets that contribute significantly to achieving our climate goals. Specify: □ (G) Other climate-related risks and opportunities identified. Specify: □ (H) We have not identified specific climate-related risks and opportunities within our organisation's investment time horizon										
ndicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle				
SP 30.1	CORE	ISP 30	N/A	PUBLIC	Strategy	General				
For each of the identified.	identified climate-related	l risks and opportuni	ities, indicate within	which investr	nent time-horizo	on they were				
		(1) 3–5 months	(2) 6 months t 2 years	o (3) 2	-4 years	(4) 5–10 years				
	B) Specific sectors and/or assets that are at risk of being stranded [as									
· ,	n exposure to direct e risk [as specified]					Ø				

General

		(5) 11–20 years	s (6) 21–30 years	(7) > 30 years
	ectors and/or assets sk of being stranded			
	ith exposure to direct ate risk [as specified]			
Indicator	Type of indicator	Dependent on	Gateway to Disclosure	Subsection PRI Principle

N/A

PUBLIC

Strategy

Which climate-related risks and opportunities has your organisation identified beyond its investment time horizon(s)?

 \square (A) Specific financial risks in different asset classes. Specify:

CORE

□ (B) Specific sectors and/or assets that are at risk of being stranded. Specify:

N/A

- \square (C) Assets with exposure to direct physical climate risk. Specify:
- \square (D) Assets with exposure to indirect physical climate risk. Specify:
- □ (E) Specific sectors and/or assets that are likely to benefit under a range of climate scenarios. Specify:
- □ (F) Specific sectors and/or assets that contribute significantly to achieving our climate goals. Specify:
- \square (G) Other climate-related risks and opportunities identified, please specify:
- 🗹 (H) We have not identified specific climate-related risks and opportunities beyond our organisation's investment time horizon

Strategy: Scenario analysis

ISP 31

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 33	CORE	N/A	ISP 33.1	PUBLIC	Strategy: Scenario analysis	General

Does your organisation use scenario analysis to assess climate-related investment risks and opportunities? Select the range of scenarios used.

- ☐ (A) An orderly transition to a 2°C or lower scenario
- □ (B) An abrupt transition consistent with the Inevitable Policy Response
- ☐ (C) A failure to transition, based on a 4°C or higher scenario
- \square (D) Other climate scenario, specify:
- \square (E) We do not use scenario analysis to assess climate-related investment risks and opportunities

Risk management

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 34	PLUS	ISP 30	N/A	PUBLIC	Risk management	General

Which risk management processes do you have in place to identify and assess climate-related risks?

- \square (A) Internal carbon pricing. Describe:
- \square (B) Hot spot analysis. Describe:
- ☐ (C) Sensitivity analysis. Describe:
- □ (D) TCFD reporting requirements on external investment managers where we have externally managed assets. Describe:
- \square (E) TCFD reporting requirements on companies. Describe:
- \square (F) Other risk management processes in place, please describe:
- (G) We do not have any risk management processes in place to identify and assess climate-related risks

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 35	PLUS	Multiple, see guidance	N/A	PUBLIC	Risk management	General

In which investment processes do you track and manage climate-related risks?

\square (A) In our	engagements	with	investee	entities,	and/or	in	engagements	conducted	on	our	behalf	by s	service	provider	s and	/or
exterr	al mana	agers. Describe	e:														

- □ (B) In (proxy) voting conducted by us, and/or on our behalf by service providers and/or external managers. Describe:
- \square (C) In our external investment manager selection process. Describe:
- \square (D) In our external investment manager monitoring process. Describe:
- \square (E) In the asset class benchmark selection process. Describe:
- \square (F) In our financial analysis process. Describe:
- \square (G) Other investment process(es). Describe:
- (H) We are not tracking and managing climate-related risks in specific investment processes

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 36	PLUS	N/A	N/A	PUBLIC	Risk management	General

How are the processes for identifying, assessing and managing climate-related risks incorporated into your organisation's overall risk management?

- \square (A) The risk committee or the equivalent function is formally responsible for identifying, assessing and managing climate risks. Describe:
- ☑ (B) Climate risks are incorporated into traditional risks (e.g. credit risk, market risk, liquidity risk or operational risk). Describe:

Currently, climate risks are assessed by external investment managers who are PRI signatories and many other investment managers who are not themselves PRI signatories.

- \square (C) Climate risks are prioritised based on their relative materiality, as defined by our organisation's materiality analysis. Describe:
- \square (D) Executive remuneration is linked to climate-related KPIs. Describe:
- \square (E) Management remuneration is linked to climate-related KPIs. Describe:
- \Box (F) Climate risks are included in the enterprise risk management system. Describe:
- \square (G) Other methods for incorporating climate risks into overall risk management, please describe:
- ☐ (H) Processes for identifying, assessing and managing climate-related risks are not integrated into our overall risk management

Metrics and targets

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 37	PLUS	N/A	ISP 37.1	PUBLIC	Metrics and targets	General

Have you set any organisation-wide targets on climate change?

Γ	\neg	(A)	Red	ncing	carbon	intensi	ty of	portfolios

- \square (B) Reducing exposure to assets with significant climate transition risks
- □ (C) Investing in low-carbon, energy-efficient climate adaptation opportunities in different asset classes
- \Box (D) Aligning entire group-wide portfolio with net zero
- \square (E) Other target, please specify:
- (F) No, we have not set any climate-related targets

Metrics and targets: Transition risk

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 38	PLUS	N/A	ISP 38.1	PUBLIC	Metrics and targets: Transition risk	General

What	climate_related	metric(e)	has wour	organication	identified for	transition	risk monitoring	and manac	romont?
₩шаь	CIIIIate-related	. medicisi	nas voui	OLEANISACION	raemimea ioi	or amsimon	TISK IHOHHOHHE		дешень:

\Box (A)	Total	carbon	emissions
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- □ (B) Carbon footprint
- □ (C) Carbon intensity
- □ (D) Weighted average carbon intensity
- ☐ (E) Implied temperature warming
- ☐ (F) Percentage of assets aligned with the EU Taxonomy (or similar taxonomy)
- ☐ (G) Avoided emissions metrics (real assets)
- \square (H) Other metrics, please specify:
- (I) No, we have not identified any climate-related metrics for transition risk monitoring

Metrics and targets: Physical risk

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 39	PLUS	N/A	ISP 39.1	PUBLIC	Metrics and targets: Physical risk	General

What climate-related metric(s) has your organisation identified for physical risk monitoring and management?

(A) Weather-related	donorational	locees for rea	laccate ar	the incurance	huginger 111	o it

- (B) Proportion of our property, infrastructure or other alternative asset portfolios in an area subject to flooding, heat stress or water stress
- \square (C) Other metrics, please specify:
- \square (D) Other metrics, please specify:
- (E) We have not identified any metrics for physical risk monitoring

Sustainability outcomes

Identify sustainability outcomes

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 43	CORE	N/A	Multiple, see guidance	PUBLIC	Identify sustainability outcomes	1

Has your organisation identified the intended and unintended sustainability outcomes from any of its activities?

- (A) No, we have not identified the sustainability outcomes from our activities
- o (B) Yes, we have identified one or more sustainability outcomes from some or all of our activities

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 43.1	PLUS	ISP 43	N/A	PUBLIC	Identify sustainability outcomes	1

If you have not identified the intended and unintended sustainability outcomes for any of your activities, please explain why.

LACERS is developing a Responsible Investment Policy in 2021, after the submission of the PRI Reporting in May 2021.

Transparency & Confidence-Building Measures

Information disclosed – All assets

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 49	CORE	N/A	N/A	PUBLIC	Information disclosed – All assets	6

For the majority of your total assets under management, what information about your ESG approach do you (or the external managers/service providers acting on your behalf) include in material shared with clients, beneficiaries and/or the public? The material may be marketing material, information targeted towards existing or prospective clients or information for beneficiaries.

☑ (A) A commitment to responsible investment (e.g. that we are a PRI signatory)
□ (B) Industry-specific and asset class–specific standards that we align with (e.g. TCFD, or GRESB for property and
infrastructure)
\square (C) Our responsible investment policy (at minimum a summary of our high-level approach)
\square (D) A description of our investment process and how ESG is considered
\square (E) ESG objectives of individual funds
\square (F) Information about the ESG benchmark(s) that we use to measure fund performance
\square (G) Our stewardship approach
□ (H) A description of the ESG criteria applied (e.g. sectors, products, activities, ratings and similar)
\square (I) The thresholds for the ESG criteria applied in our investment decisions or universe construction
\square (J) A list of our main investments and holdings
\square (K) ESG case study/example from existing fund(s)
\square (L) We do not include our approach to ESG in material shared with clients/beneficiaries/the public for the majority of our
assets under management

Confidence-building measures

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 52	CORE	OO 16.1	Multiple, see guidance	PUBLIC	Confidence-building measures	6

What verification has your organisation had regarding the information you have provided in your PRI Transparency Report this year?

- \square (A) We received third-party independent assurance of selected processes and/or data related to our responsible investment processes, which resulted in a formal assurance conclusion
- \square (B) We conducted a third-party readiness review and are making changes to our internal controls/governance or processes to be able to conduct an external assurance next year
- \square (C) The internal audit function team performed an independent audit of selected processes/and or data related to our responsible investment processes reported in this PRI report
- ☑ (D) Our board, CEO, other C-level equivalent and/or investment committee has signed off on our PRI report
- \square (F) We conducted an external ESG audit of our ESG/sustainability marketed funds or products (excluding ESG/RI certified or labelled assets)
- \square (G) We conducted an external ESG audit of our holdings to check that our funds comply with our RI policy (e.g. exclusion list or investee companies in portfolio above certain ESG rating)
- \square (H) We conducted an external ESG audit of our holdings as part of risk management, engagement identification or investment decision-making
- \square (I) Responses related to our RI practices documented in this report have been internally reviewed before submission to the PRI
- \square (J) None of the above

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
ISP 58	CORE	ISP 52	N/A	PUBLIC	Confidence-building measures	6

Who has reviewed/verified the entirety of or selected data from your PRI report?

(A) Board and/or trustees	(4) report not reviewed
(B) Chief-level staff (e.g. Chief Executive Officer (CEO), Chief Investment Officer (CIO) or Chief Operating Officer (COO))	(1) the entire report
(C) Investment committee	(4) report not reviewed

(D) Other chief-level staff, please specify:	(4) report not reviewed
(E) Head of department, please specify: ${\rm N/A}$	(4) report not reviewed
(F) Compliance/risk management team	(4) report not reviewed
(G) Legal team	(4) report not reviewed
(H) RI/ ESG team	(1) the entire report
(I) Investment teams	(3) parts of the report

Manager Selection, Appointment and Monitoring (SAM)

Investment consultants

Investment consultant selection

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 1	CORE	OO 8	N/A	PUBLIC	Investment consultant selection	4

During the reporting year, what responsible investment requirements did you include in all of your selections of investment consultants? (If you did not select any investment consultants during the reporting year, refer to the last reporting year in which you did select investment consultants.)

WILLOID	you are become without constitution,
\square (A)	We required evidence that they incorporated responsible investment criteria in their advisory services
\square (B)	We required them to be able to accommodate our responsible investment priorities
\square (C)	We required evidence that their staff had adequate responsible investment expertise
\square (D)	We required them to have access to ESG data and quantitative ESG analytical tools to support their recommendations
\square (E)	We required evidence that the consultants working directly with us would receive additional ESG training where needed
\square (F)	We required them to analyse the external managers' impact on sustainability outcomes
\square (G)	Other, please specify:

(H) We did not include responsible investment requirements in our selection(s) of investment consultants

Selection

Responsible investment policy

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 2	CORE	OO 11	SAM 2.1	PUBLIC	Responsible investment policy	1, 4

During the reporting year, did your organisation include compliance with your responsible investment policy as a pre-requisite when selecting external managers? (If you did not select any external managers during the reporting year, refer to the last reporting year in which you did select external managers.)

	(1) Yes, only when selecting external managers of ESG/sustainability funds	(2) Yes, when selecting external managers of ESG/sustainability funds and mainstream funds (This option also applies to signatories who may not hold ESG/sustainability funds)	(3) We did not include compliance with our responsible investment policy as a pre-requisite when selecting external managers
(A) Listed equity (active)	0	0	•

Research and screening

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 3	CORE	OO 11	N/A	PUBLIC	Research and screening	1

When selecting external managers, which aspects of their organisation do you, or the investment consultant acting on your behalf, assess against responsible investment criteria? (Per asset class, indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

((1)	Listed	equity	(active)
	/	LIBUCU	cquit,	(acuive)

(A) Firm culture	(1) for all of our externally managed AUM
(B) Investment approach, objectives and philosophy	(1) for all of our externally managed AUM
(C) Investment policy or guidelines	(1) for all of our externally managed AUM
(D) Governance structure and management oversight, including diversity	(1) for all of our externally managed AUM
(E) Investment strategy and fund structure	(1) for all of our externally managed AUM
(F) Investment team competencies	(1) for all of our externally managed AUM
(G) Other, please specify:	N/A (1) for all of our externally managed AUM

Investment practices

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 4	CORE	OO 11	N/A	PUBLIC	Investment practices	1

Which responsible investment practices does your organisation, or the investment consultants acting on your behalf, require as part of your external manager selection criteria? (Per asset class, indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.) As part of the selection criteria, we require that external managers:

(1) Listed equity (active)

(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM

(I) Are willing to work in partnership with our organisation to develop their responsible investment approach		
(J) Track the positive and negative sustainability outcomes of their activities	(4) for none of our externally managed AUM	
(K) Other, please specify:	\mathbb{N}/A (4) for none of our externally managed AUM	

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 5	PLUS	OO 11	N/A	PUBLIC	Investment practices	1

Does your organisation, or the investment consultants acting on your behalf, expressly assess the following practices regarding derivatives and short positions as part of your manager selection process? (Indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

(A) We assess whether they apply ESG incorporation into derivatives, insurance instruments (such as CDS) and other synthetic exposures or positions	(5) for none of our externally managed AUM	
(B) We assess how they apply their exclusion policies to short and derivative exposures	(5) for none of our externally managed AUM	
(C) We assess whether their use of leverage is aligned with their responsible investment policy	(5) for none of our externally managed AUM	

Stewardship

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 6	CORE	00	N/A	PUBLIC	Stewardship	2

How does your organisation, or the investment consultants acting on your behalf, assess the stewardship policies of investment managers during the selection process? (Per asset class, indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

(1) Listed equity (active) (A) We assess the (3) for a minority of our externally managed AUM degree to which their stewardship policy aligns with ours (B) We require that (4) for none of our externally managed AUM their stewardship policy prioritises systemic issues (C) We require that (4) for none of our externally managed AUM their stewardship policy prioritises ESG factors beyond corporate governance (D) We require that (4) for none of our externally managed AUM their stewardship policy allows for and encourages the use of a variety of stewardship tools (E) We require that (4) for none of our externally managed AUM their stewardship policy allows for and encourages participation in collaborative initiatives

(F) We require that their stewardship policy includes adequate escalation strategies for instances where initial efforts are unsuccessful (4) for none of our externally managed AUM

(G) Other, please specify:

N/A

(4) for none of our externally managed AUM

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 7	CORE	00	N/A	PUBLIC	Stewardship	2

How does your organisation, or the investment consultants acting on your behalf, assess the stewardship practices of external managers as part of the selection process? (Per asset class, indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

(1) Listed equity (active)

- (A) We assess whether they allocate sufficient resources to stewardship overall
- (1) for all of our externally managed AUM
- (B) We assess whether they allocate sufficient resources for systemic stewardship
- (4) for none of our externally managed AUM
- (C) We assess the degree of implementation of their stewardship policy
- (4) for none of our externally managed AUM

(D) We assess whether their investment team is involved in stewardship activities	(1) for all of our externally managed AUM
(E) We assess whether stewardship actions and results are fed back into the investment process and decisions	(1) for all of our externally managed AUM
(F) We assess whether they make full use of a variety of tools to advance their stewardship priorities	(1) for all of our externally managed AUM
(G) We assess whether they deploy their escalation process to advance their stewardship priorities where initial efforts are unsuccessful	(4) for none of our externally managed AUM
(H) We assess whether they participate in collaborative stewardship initiatives	(1) for all of our externally managed AUM
(I) We assess whether they take an active role in their participation in collaborative stewardship initiatives	(1) for all of our externally managed AUM
(J) Other, please specify:	N/A (4) for none of our externally managed AUM

Sustainability outcomes

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 10	PLUS	OO 11	N/A	PUBLIC	Sustainability outcomes	1

How does your organisation, or the investment consultant acting on your behalf, assess external managers' approaches to their sustainability outcomes as part of your selection process? (Indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM

Documentation and track record

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 11	CORE	00 11	N/A	PUBLIC	Documentation and track record	1

As part of your selection process, which documents does your organisation, or the investment consultants acting on your behalf, review to gain confidence in external managers' responsible investment practices? (Indicate the proportion of your AUM to which each of these selection practices applies, regardless of when you selected your different external managers.)

(A) Standard client reporting, responsible investment reports or impact reports	(3) for a minority of our externally managed AUM
(B) Responsible investment methodology and its influence on past investment decisions	(3) for a minority of our externally managed AUM
(C) Historical voting and engagement activities with investees	(4) for none of our externally managed AUM
(D) Historical engagement activities with policymakers	(4) for none of our externally managed AUM
(E) Compliance manuals and portfolios to ensure universal construction rules are applied (e.g. exclusions, thematic, best-in-class definitions and thresholds)	(1) for all of our externally managed AUM
(F) Controversies and incidence reports	(4) for none of our externally managed AUM
(G) Code of conduct or codes of ethics	(1) for all of our externally managed AUM
(H) Other, please specify: N/A	(4) for none of our externally managed AUM

Appointment

Pooled funds

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 12	CORE	OO 12, OO 5.1, OO 15	N/A	PUBLIC	Pooled funds	4

How did your organisation, or the investment consultants acting on your behalf, include responsible investment requirements for pooled funds in your current contracts with external managers? (Indicate the proportion of your AUM invested in pooled funds to which each of these requirements applies, regardless of when you appointed your different external managers.)

- (A) We amended or instituted side letters or equivalent legal documentation to include responsible investment requirements
- (4) for none of our AUM invested in pooled funds
- (B) We encouraged the external manager to include responsible investment requirements into the investment mandate, the investment management agreement or equivalent legal documentation
- (4) for none of our AUM invested in pooled funds

Segregated mandates

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 13	CORE	OO 12, OO 5.1	N/A	PUBLIC	Segregated mandates	4

When setting up segregated mandates with external managers, which responsible investment clauses did your organisation, or the investment consultants acting on your behalf, include in your current contractual agreements? (Indicate the proportion of your AUM invested in segregated funds to which each of these requirements applies, regardless of when you appointed your different external managers.)

(A) The manager's commitment to follow our responsible investment strategy in the management of our assets

(B) The manager's commitment to incorporate material ESG factors into its investment and stewardship activities

(C) Exclusion list(s)

(4) for none of our AUM invested in segregated mandates

(4) for none of our AUM invested in segregated mandates

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Monitoring

Investment practices

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 14	CORE	OO 13	N/A	PUBLIC	Investment practices	1

During the reporting year, which aspects of your external manager's responsible investment practices did you, or your investment consultant acting on your behalf, monitor?

	(1) Listed equity (active)
(A) We monitored their alignment with our organisation's responsible investment strategy	(2) for the majority of our externally managed AUM
(B) We monitored any changes in their responsible investment–related policies, resourcing, oversight and responsibilities or investment processes	(2) for the majority of our externally managed AUM
(C) We monitored their use of ESG data, benchmarks, tools and certifications	(2) for the majority of our externally managed AUM
(D) We monitored how ESG incorporation affected investment decisions	(2) for the majority of our externally managed AUM
(E) We monitored how ESG incorporation affected the fund's financial and ESG performance	(2) for the majority of our externally managed AUM

(F) We monitored any changes in ESG risk management processes	(2) for the majority of our externally managed AUM
(G) We monitored their response to material ESG incidents	(2) for the majority of our externally managed AUM
(H) Other, please specify:	\mathbb{N}/A (4) for none of our externally managed AUM

${\bf Stewardship}$

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 17	CORE	Multiple, see guidance	N/A	PUBLIC	Stewardship	1, 2

During the reporting year, how did your organisation, or the investment consultants acting on your behalf, monitor your external managers' stewardship activities?

	(1) Listed equity (active)
(A) We monitored any changes in stewardship policies and processes	(2) for the majority of our externally managed AUM
(B) We monitored the degree of implementation of their stewardship policy	(4) for none of our externally managed AUM
(C) We monitored their prioritisation of systemic issues	(4) for none of our externally managed AUM
(D) We monitored their prioritisation of ESG factors beyond corporate governance	(4) for none of our externally managed AUM

(E) We monitored their investment team's level of involvement in stewardship activities	(4) for none of our externally managed AUM
(F) We monitored whether stewardship actions and results were fed back into the investment process and investment decisions	(4) for none of our externally managed AUM
(G) We monitored whether they had made full use of a variety of stewardship tools to advance their stewardship priorities	(4) for none of our externally managed AUM
(H) We monitored the deployment of their escalation process in cases where initial stewardship efforts were unsuccessful	(4) for none of our externally managed AUM
(I) We monitored whether they had participated in collaborative stewardship initiatives	(4) for none of our externally managed AUM
(J) We monitored the degree to which they had taken an active role in their participation in collaborative stewardship initiatives	(4) for none of our externally managed AUM
(K) Other, please specify:	\mathbb{N}/A (4) for none of our externally managed AUM

Sustainability outcomes

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 19	PLUS	OO 13	N/A	PUBLIC	Sustainability outcomes	1

During the reporting year, how did your organisation, or the investment consultants acting on your behalf, monitor your external managers' progress on sustainability outcomes?

- □ (A) We reviewed progress on the sustainability outcomes of their activities
- \square (B) We reviewed how they used asset allocation individually or in partnership with others to make progress on sustainability outcomes
- \square (C) We reviewed how they used individual or collaborative investee engagement, including voting, to make progress on sustainability outcomes
- \square (D) We reviewed how they used individual or collaborative systemic stewardship, including policy engagement, to make progress on sustainability outcomes
- \square (E) We reviewed how they contributed to public goods (such as research) or public discourse (such as media) or collaborated with other actors to track and communicate progress against global sustainability goals
- \square (F) Other, please specify:
- (G) We did not review their progress on sustainability outcomes

Review

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 20	CORE	OO 13	N/A	PUBLIC	Review	1

During the reporting year, how often did your organisation, or the investment consultants acting on your behalf, require your external managers to report to you on their responsible investment practices?

(1) Listed equity (active)

(A) Quarterly or more often	(4) for none of our externally managed AUM
(B) Every six months	(4) for none of our externally managed AUM
(C) Annually	(4) for none of our externally managed AUM
(D) Less than once a year	(4) for none of our externally managed AUM

(E) On an ad hoc basis (e.g. whenever significant changes, incidents or ESGlinked events occur) (4) for none of our externally managed AUM

Verification

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 21	PLUS	OO 13	N/A	PUBLIC	Verification	1

During the reporting year, how did your organisation, or the investment consultants acting on your behalf, verify the information reported by external managers on their responsible investment practices?

(1) Listed equity (active)
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
(4) for none of our externally managed AUM
N/A (4) for none of our externally managed AUM

Engagement and escalation

Indicator	Type of indicator	Dependent on	Gateway to	Disclosure	Subsection	PRI Principle
SAM 22	CORE	OO 13	N/A	PUBLIC	Engagement and escalation	1

Which actions does your organisation, or the investment consultants acting on your behalf, include in its formal escalation process to address concerns raised during monitoring?

	(1) Listed equity (active)	
(A) We notify the external manager about their placement on a watch list		
(B) We engage the external manager's board or investment committee		
(C) We reduce exposure with the external manager until any non-conformances have been rectified		
(D) We terminate the contract with the external manager if failings persist over a (notified) period of time and explain the reasons for the termination		
(E) Other, please specify	☑	
(F) Our organisation does not have a formal escalation process to address concerns raised by monitoring		

Please specify for "(E) Other" above.

LACERS staff may recommend to the LACERS Board a number of escalation options but no specific action is required; it's handled on a case-by-case basis.



ASSESSMENT REPORT

2021 PILOT

Los Angeles City Employees' Retirement System (LACERS)

Generated 2022-11-21

ABOUT THIS REPORT

The assessment report is designed to provide feedback to signatories and support ongoing learning and development. The high-level assessment methodology can be found here and question-level assessment criteria can be found after each indicator in the Investor Reporting Framework, here. Note that the 2021 scoring methodology has changed to reflect the new Reporting Framework, and is incomparable with scores from previous PRI years.

Assessment Reports are confidential and only accessible to the reporting signatory on the Data Portal.

A dataset of medians based on all signatories' scores can be referenced here.

PUBLICATION GUIDELINES

In the 2021 Reporting Framework, the PRI introduced accountability measures around the accurate representation of PRI Assessment Reports externally. This came as a result of an increasing level of disclosure of PRI Assessment Results externally. Alongside the higher level of disclosure, came an increasing amount of misrepresentation. As such, the publication guidelines were developed to ensure consistent and accurate representation of PRI reporting outputs. The guidelines state that signatories should not:

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- disclose scores that from selected parts of modules only (e.g., disclosing above-average performance in parts of a module without disclosing the median score for the module), and
- present any scores/grades/classification generated internally or by a third party, for a module of the overall Assessment Report, as being from the PRI (e.g., recalculating, or recompiling PRI scores).

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- Assessment Report
- Transparency Report

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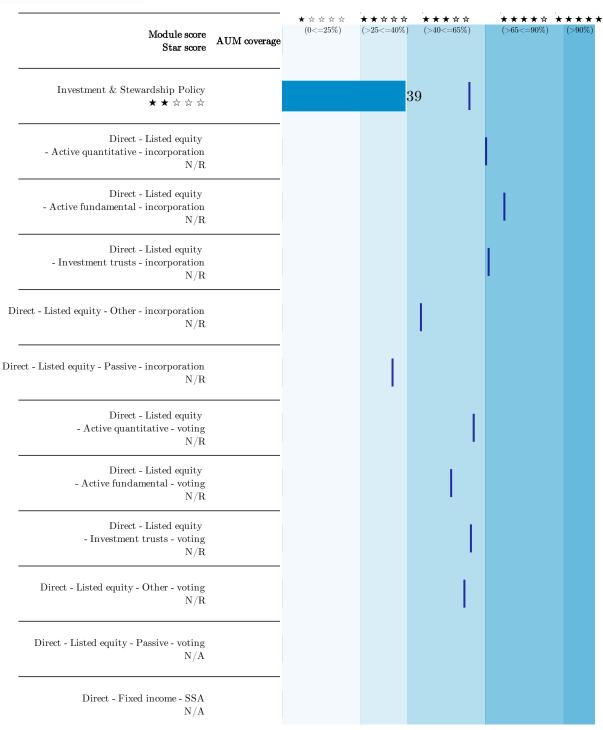
This document presents information reported directly by signatories in the 2021 reporting cycle. This information has not been audited by the PRI or any other party acting on its behalf. While this information is believed to be reliable, no representations or warranties are made as to the accuracy of the information presented. The PRI has taken reasonable action to ensure that data submitted by signatories in the reporting tool is reflected in their official PRI reports accurately. However, it is possible that small data inaccuracies and/or gaps remain, and the PRI shall not be responsible or liable for such inaccuracies and gaps.

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Summary Scorecard



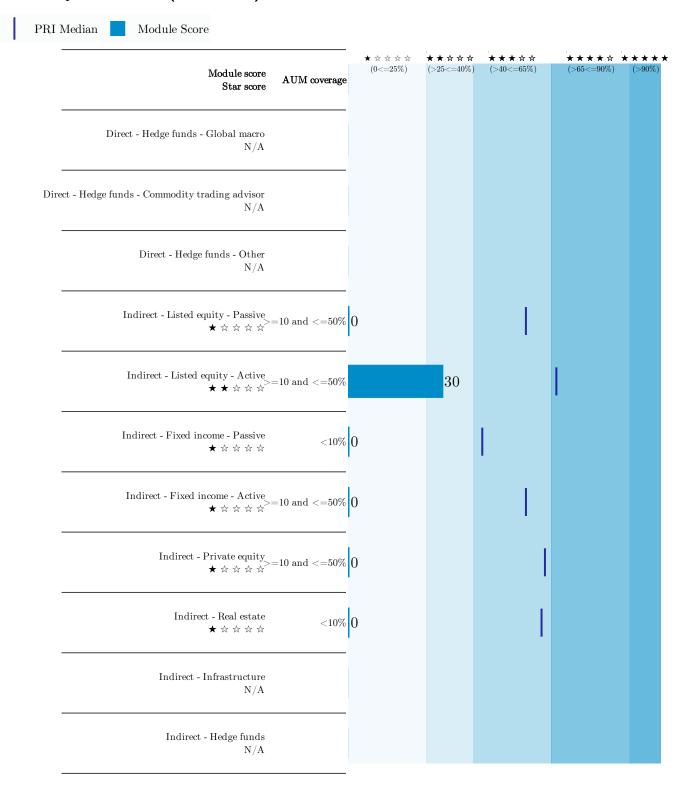


Summary Scorecard (continued)

PRI Median Module Score

		* * * * * *	****	****	★★★★☆	* * * * *
Module score Star score	AUM coverage	(0<=25%)	(>25<=40%)	(>40<=65%)	(>65<=90%)	(>90%)
Direct - Fixed income - Corporate $${\rm N/A}$$						
Direct - Fixed income - Securitised $$\mathrm{N}/\mathrm{A}$$						
Direct - Fixed income - Private debt $${\rm N/A}$$						
Direct - Private equity ${ m N/A}$						
Direct - Real estate ${ m N/A}$						
Direct - Infrastructure ${ m N/A}$						
Direct - Hedge funds - Multi-strategy ${ m N/A}$						
Direct - Hedge funds - Long/short equity - incorporation $\rm N/A$						
Direct - Hedge funds - Long/short equity - voting $${\rm N/A}$$						
Direct - Hedge funds - Long/short credit $${\rm N/A}$$						
$\label{eq:Direct-Hedge funds-Distressed} Direct - Hedge funds - Distressed, special situations, and event-driven fundamental N/A$						
Direct - Hedge funds - Structured credit $${\rm N/A}$$						

Summary Scorecard (continued)



Indicator Level Scores For Investment & Stewardship Policy

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Responsible investment policy & governance	Responsible investment policy	Signatories responsible investment policy	ISP 1	200/200	200/200	2791
Responsible investment policy & governance	Responsible investment policy	Signatories with elements of responsible investment policy	ISP 1.1	80/200	160/200	2791
Responsible investment policy & governance	Responsible investment policy	Signatories with public responsible policy elements	ISP 2	200/200	200/200	2791
Responsible investment policy & governance	Responsible investment policy	Coverage of responsible policy elements	ISP 3	200/200	200/200	2791
Responsible investment policy & governance	Governance	Roles with formal oversight and accountability for responsible investment	ISP 6	150/150	150/150	2791
Responsible investment policy & governance	Governance	Roles with implementation responsibilities for responsible investment	ISP 7	100/100	100/100	2791
Responsible investment policy & governance	People and capabilities	Staff objectives for responsible investment practices	ISP 8	150/150	150/150	2791
Responsible investment policy & governance	People and capabilities	Bonuses for responsible investment practices	ISP 8.2	0/100	32/100	2789
Responsible investment policy & governance	People and capabilities	Frequency at which staff training for responsible investment is reassessed	ISP 9	32/100	64/100	2791
Responsible investment policy & governance	Strategic asset allocation	Signatories incorporating ESG factors in strategic asset allocation	ISP 10.1	0/150	56/150	1755
Stewardship	Stewardship policy	Coverage of stewardship policy	ISP 11	50/200	200/200	2223
Stewardship	Stewardship policy	Elements of stewardship policy	ISP 12	0/150	90/150	1987
Stewardship	Stewardship policy implementation	Primary mechanism of stewardship policy	ISP 13	75/150	150/150	1987
Stewardship	Stewardship objectives	Primary objective of stewardship policy	ISP 15	12/200	100/200	2223

Scorecard continues on next page 7

Indicator Level Scores For Investment & Stewardship Policy (continued)

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Stewardship	Stewardship prioritisation	Criteria for prioritising engagement targets	ISP 16	25/100	100/100	2180
Stewardship	Collaborative stewardship	Positions on collaborative engagement	ISP 18	75/150	75/150	1314
Stewardship	Escalation strategies	Escalation strategies not used in stewardship	ISP 20	75/150	150/150	1721
Stewardship	Engaging policymakers	Signatories who engage with public policy makers	ISP 23	200/200	100/200	1927
Stewardship	Engaging policymakers	Methods used to engage with public policy makers	ISP 23.1	200/200	150/200	1927
Stewardship	Engaging policymakers	Signatories with governance processes to ensure alignment of political activity with stance on responsible investment	ISP 23.2	0/200	200/200	1927
Stewardship	Engaging policymakers – Policies	Signatories with policies to ensure alignment of political activity with stance on responsible investment	ISP 24	0/200	0/200	1927
Stewardship	Engaging policymakers – Policies	Public disclosure of political influence policies	ISP 24.1	0/150	0/150	1927
Stewardship	Engaging policymakers – Transparency	Disclosure of political influence activities	ISP 25	128/200	64/200	1744
Climate change	Public support	Signatories publicly supporting the Paris Agreement	ISP 26	0/150	0/150	2791
Climate change	Public support	Signatories publicly supporting the TCFD	ISP 27	0/150	0/150	2791
Climate change	Governance	Board oversight for climate-related risks and opportunities [TCFD Governance A]	ISP 28	50/200	100/200	2791
Climate change	Governance	Management responsibility for climate-related risks and opportunities [TCFD Governance B]	ISP 29	50/200	100/200	2791
Climate change	Strategy	Time horizon for climate risks and opportunities [TCFD Strategy A]	ISP 30.1	100/200	100/200	2791

Scorecard continues on next page 8

Indicator Level Scores For Investment & Stewardship Policy (continued)

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Climate change	Strategy	Climate risks and opportunities identified beyond investment horizon [TCFD Strategy A]	ISP 31	0/200	0/200	2791
Climate change	Strategy: Scenario analysis	Use of climate scenario analysis	ISP 33	0/200	0/200	2791
Sustainability outcomes	Identify sustainability outcomes	Tools and frameworks used to identify and map activities onto sustainability outcomes	ISP 44	0/200	64/200	2791
Sustainability outcomes	Identify sustainability outcomes	Levels at which sustainability outcomes are identified and mapped	ISP 44.1	0/150	150/150	2790
Sustainability outcomes	Identify sustainability outcomes	Processes for identifying most salient sustainability outcomes	ISP 45	0/200	200/200	2791
Transparency & Confidence-Building Measures	Information disclosed – All assets	Information shared	ISP 49	0/150	150/150	2791
Transparency & Confidence-Building Measures	Confidence- building measures	Confidence building measures	ISP 52	128/200	128/200	2791
Transparency & Confidence-Building Measures	Confidence- building measures	Internal review: coverage	ISP 58	88/100	100/100	2392

Indicator Level Scores For Indirect - Listed equity - Passive

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/200	48/200	252
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage $$	SAM 2.1	0/150	123/150	465
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	0/150	150/150	465
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	133/200	465
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	0/200	33/200	382
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	0/200	61/200	382
Selection	Stewardship	Manager selection criteria: voting	SAM 8	0/150	0/150	313
Selection	Documentation and track record	Review of information in manager selection	SAM 11	0/200	138/200	466
Appointment	Pooled funds	Manager appointment for pooled funds	SAM 12	0/200	0/200	174
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	70/200	270
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	0/150	91/150	477
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	0/150	38/150	394
Monitoring	Stewardship	Manager monitoring: voting	SAM 18	0/150	0/150	322
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/100	100/100	477
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	0/150	60/150	477

Indicator Level Scores For Indirect - Listed equity - Active

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/150	96/150	276
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage	SAM 2.1	0/150	150/150	634
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	150/150	150/150	634
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	153/200	634
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	8/200	125/200	501
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	150/200	143/200	501
Selection	Documentation and track record	Review of information in manager selection	SAM 11	106/200	146/200	634
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	82/200	435
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	112/150	107/150	654
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	5/150	94/150	521
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/100	100/100	654
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	60/150	90/150	652

Indicator Level Scores For Indirect - Fixed income - Passive

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/150	48/150	185
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage	SAM 2.1	0/150	112/150	317
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	0/150	135/150	317
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	102/200	317
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	0/200	0/200	286
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	0/200	0/200	286
Selection	Stewardship	Manager selection criteria: fixed income stewardship	SAM 9	0/150	0/150	286
Selection	Documentation and track record	Review of information in manager selection	SAM 11	0/200	131/200	317
Appointment	Pooled funds	Manager appointment for pooled funds	SAM 12	0/200	0/200	141
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	0/200	163
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	0/150	64/150	327
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	0/150	0/150	276
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/200	82/200	327
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	0/150	60/150	327

Indicator Level Scores For Indirect - Fixed income - Active

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/150	48/150	278
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage	SAM 2.1	0/150	150/150	597
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	0/150	150/150	597
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	150/200	597
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	0/200	33/200	535
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	0/200	68/200	535
Selection	Stewardship	Manager selection criteria: fixed income stewardship	SAM 9	0/150	0/150	535
Selection	Documentation and track record	Review of information in manager selection	SAM 11	0/200	138/200	597
Appointment	Pooled funds	Manager appointment for pooled funds	SAM 12	0/200	89/200	241
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	82/200	314
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	0/150	102/150	620
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	0/150	42/150	552
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/100	100/100	620
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	0/150	60/150	617

Indicator Level Scores For Indirect - Private equity

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/150	48/150	161
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage	SAM 2.1	0/150	123/150	369
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	0/150	150/150	369
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	153/200	369
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	0/200	33/200	302
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	0/200	75/200	302
Selection	Documentation and track record	Review of information in manager selection	SAM 11	0/200	147/200	369
Appointment	Pooled funds	Manager appointment for pooled funds	SAM 12	0/200	0/200	131
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	3/200	152
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	0/150	102/150	377
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	0/150	38/150	313
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/100	82/100	377
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	0/150	60/150	377

Indicator Level Scores For Indirect - Real estate

Section	Sub-section	Topic	Indicator	Your Score	PRI Median Score	Median Sample Size
Investment consultants	Investment consultant selection	Criteria for selecting investment consultants	SAM 1	0/150	48/150	150
Selection	Responsible investment policy	Compliance with responsible investment policy - coverage	SAM 2.1	0/150	150/150	265
Selection	Research and screening	Manager selection criteria: conduct and capabilities	SAM 3	0/150	150/150	265
Selection	Investment practices	Manager selection criteria: investment practices	SAM 4	0/200	152/200	265
Selection	Stewardship	Manager selection criteria: stewardship policy	SAM 6	0/200	33/200	219
Selection	Stewardship	Manager selection criteria: stewardship practices	SAM 7	0/200	57/200	219
Selection	Documentation and track record	Review of information in manager selection	SAM 11	0/200	135/200	265
Appointment	Pooled funds	Manager appointment for pooled funds	SAM 12	0/200	0/200	119
Appointment	Segregated mandates	Contractual requirements in manager appointment for segregated funds	SAM 13	0/200	57/200	148
Monitoring	Investment practices	Manager monitoring: investment practices	SAM 14	0/150	102/150	273
Monitoring	Stewardship	Manager monitoring: stewardship	SAM 17	0/150	43/150	227
Monitoring	Review	Manager monitoring: reporting	SAM 20	0/100	100/100	273
Monitoring	Engagement and escalation	Manager monitoring: formal grievance processes	SAM 22	0/150	60/150	273





FEBRUARY 14, 2023

REPORT TO BOARD OF ADMINISTRATION MEETING:

From: Neil M. Guglielmo, General Manager ITEM: VII - C

SUBJECT: NOTIFICATION OF COMMITMENT OF UP TO \$40 MILLION IN NB PARTNERS FUND

IV, LP

nefm. Daylika

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☒

Recommendation

That the Board receive and file this notice of the commitment of up to \$40 million in NB Partners Fund IV, LP.

Discussion

On January 10, 2023, the Board, in closed session pursuant to Government Code Section 54956.81, approved a commitment of up to \$40 million in the following private real estate fund: NB Partners Fund IV, LP. The investment closed on February 2, 2023. Board vote: Ayes 7 (Commissioners Annie Chao, Thuy Huynh, Michael Wilkinson, Sung Won Sohn, Janna Sidley, Vice President Elizabeth Lee, and President Nilza Serrano), Recusal 0, and Nays 0.

Strategic Plan Impact Statement

The commitment to NB Partners Fund IV, LP aligns with the Strategic Plan Goal to optimize long-term risk adjusted investment returns (Goal IV).

Prepared By: Eduardo Park, Investment Officer II, Investment Division

NMG/RJ/BF/WL/EP:rm