RSL Name and Registration No HENDRE LIMI Registered Office: St. Hilary Cou

HENDRE LIMITED (L132) St. Hilary Court, Copthorne Way, Cardiff, CF5 6ES

Pursuant to the Regulatory Framework for Housing Associations registered in Wales 2017 this annual Statement of Compliance confirms the Association has met the Performance Standards as set by the Welsh Ministers in accordance with Section 33A of the Housing Act 1996.

Where full compliance with any of the Performance Standards cannot be evidenced, the explanation is set out and a summary of actions (including timetable) to be taken to improve the compliance position is provided. The explanation and improvement actions are subject to discussion/agreement with the Regulator.

Ref No	Performance Standard	nt with a	Evidence of Compliance	Improvement actions
PS 1.0	Effective Board and executive management		a clear and ambitious vision for the RSL	Partially compliant
PS1.1	Sets a clear vision and values for the organisation which deliver and progress the core purpose of the business	Y	Company values developed following significant colleague engagement exercise. Company values are embedded in corporate literature and included in the new colleague handbook introduced in April 2019. Development of the strategic plan commenced at a Board Strategic Day in October 2017 (facilitated by external; consultants Rambutan) and was refined throughout 2018. A Draft Strategic Plan was discussed and reviewed at the Board Meeting on 25.06.18 agenda item 10.7. The Board continued to work with the Executive leading to the approval of the Strategic Plan which was approved at the Board Meeting 17 December 2018 Minute 11.1. This clearly sets our vision "Making Liver Better" and our strategic priorities for the period 2019-2024. The Strategic Plan was communicated internally by a	Business Planning Away Day to review strategic plan scheduled 09.12.19 Corporate Business Plan scheduled for Board meeting on 02.03.20

			 series of 26 roadshows across 15 venues and reported back to Hendre Board on 25.02.19 Agenda Item 38/19. It was also distributed to key stakeholders. Each individual Board Member has a lead portfolio responsibility in respect of the 8 strategic priorities. They are supported by members of the Executive Board with plans and actions monitored by the detailed implementation plan. A review of our Strategic Priorities carried out with Abi Robson from Central Consultancy on 7 October 2019 to feed into the Business Planning Away Day with the Board on 9 December 2019. 	
PS 1.2	Governance arrangements establish and maintain clear roles, responsibilities and accountabilities for the board, chair and chief executive and ensure appropriate probity arrangements are in place	Y	In-line with good practice the suite of governance documents are reviewed on an annual basis post AGM. - Matters reserved for the Board - Standing Orders - Financial Regulations - Terms of Reference - Board Role Descriptors (including Chair and Vice Chair) - Code of Conduct - Membership Policy - Procurement Strategy Transforming Governance Improvement Plan undertook a full review of the governance framework signed off by the Board on 15 July 2019. These suite of documents form published for all board members and senior management to develop governance literacy in the organisation. The new documents were developed using the expertise of the Director of Assurance and Central Consultancy and reflect best practice to ensure that the business it is directing and stewarding is sound,	Review Governance Toolkit July 2020.

			efficient, effective and legally compliant.	
			The revised role descriptor for Board members clearly set out the roles, responsibilities and behaviours required of Board Members these documents were approved by the Hendre Board. At the Board Away Day 10 September 2019 a further discussion on role and values led to the development of Board Charter which is scheduled for final review and approval on the 16 September 2019. Recent governance training undertaken to improve governance literacy in-line with CHC Code of Governance and the Housing Regulation Board "The Right Stuff" and address knowledge of governing documents. Training commenced in October 2018 and further sessions were held in January and February 2019. Individual Board Appraisals performed by Chair and Independent Consultant during April and May 2019. As a result there are individual and collective development plans in place.	Implementation of individual and collective Board Development Plan throughout 2019/2020. Knowledge sessions commenced in September 2019 with a programme to improve awareness and understanding "About Care", "About Finance" "About Support" "About Health and Safety". This also includes Board service visits, building on the Connecting Together programme which was introduced in 2018.
PS1.3	Complies with governing documents including adopting, and complying with, an appropriate code of governance	Y	A thorough review has been carried out to ensure that the Group complies with governing instruments (Rules, Standing Orders and constitution documents).	
		N	The Hendre Board agreed to adopt the Code of Governance (CHC) in January 2019. Subsequently a GAP Analysis has been carried out to identify what we need to do to comply with all elements of the CHC Code. This was presented to the Board on the 15 July 2019 and an action plan to address any outstanding actions was discussed and approved.	Deliver any outstanding actions identified in the Gap Analysis

PS1.4	Adheres to all relevant law		During 2010 we corrido out on extensive review of	
	Adheres to all relevant law	Y	During 2019 we carried out an extensive review of adherence to all relevant legislation and regulatory requirements. This forms part of the Board Assurance Framework.	We have commissioned an external review of the Group's health and safety function.
			Members of the Board, together with Committee Members, participated in a Board Assurance Workshop, as a result a 9 box matrix was adopted which includes a specific focus on legislative compliance and the Welsh Governments Performance Standards.	
			Board Assurance Framework	
			The objective of having a robust Board Assurance Framework (BAF) is to give comfort to the Board that the organisation is achieving the objectives as intended, with controls that are working and that risks are being managed to levels acceptable to the Board. The framework is designed to provide the Board with assurance on the following:	A template of the Business Assurance Framework to be placed on the wall at every Board and Audit committee as a point of reference for members in their decision making. October 2019
			 That each specific risk identified in the strategic risk register is being appropriately managed and mitigated where possible; 	In-depth analysis programmed to be presented to Audit and Risk
			 b) That the Group complies with legislation/regulations applicable to its business operations; 	Committee 18 November 2019 for Health & Safety, Landlord Compliance and Income.
			 c) That it complies with each of the Welsh Government's performance standards; 	On going In-depth review for every meeting of Audit and Risk Committee.
			 d) That it makes all decisions in accordance with its constitution, rules and standing orders. 	
			 e) Learnings from the CCHA Lessons Learnt Report 	

Regular inspections from CSSIW (CIW), Environmental Health, Health Boards and Local Authorities etc. are
made on both announced and unannounced bases.
In August 2019 the Board approved the appointment of Hafod's Care Operations Director to the Hafod Housing Association Board in order to comply with RISCA legislation.
Commencing the Autumn 2018 Hendre Board and executive and senior managers have attended Schedule 1 training sessions.
The Association has recently introduced a mandatory Schedule 1 e-learning module for all colleagues. To date 617 colleagues have completed Schedule 1 training.
Policy Framework was developed and approved by the Hendre Board on 15 July 2019, setting out the roles and responsibilities in relation to policy change in- line with legislation and regulation to comply with new regulation.
A Policy Group has been established to oversee the implementation of the Policy Framework.
As directed by the Audit and Risk Committee a programme of In-depth analysis, aligned to the Strategic Risk Register, has been introduced.
Transforming Governance Improvement Plan in place.

PS2.0	Effective and appropriate tenant involver	ent and high quality and improving services	Fully compliant
PS2.1	Demonstrates how service users are effectively involved in strategic decision making and shaping services in ways appropriate for service users and the organisation	Y Following a consultation with our customers we transformed the traditional model of housing management engagement to a relational model. This process was undertaken in 2018. We have a developed a refreshed and enhanced approach to customer engagement, leading to a framework which incorporates a variety of methods to ensure that our customer voices are heard and able to influence services received. Examples include: Rent affordability	Assessment of the Charter's success will be through services evaluations including the use of our Neighbourhood Coaches. Contractor for external stakeholder mapping exercise (Patrick Harkness Consulting) appointed through invitation to quote process carried out in September 2019. Stakeholders for inclusion in the
		Procurement of repairs Service charge review We launched our new Customer Charter and Scrutiny Panel in November 2018 which underpins our strategic priority of "placing customers at the heart of everything we do".	study mapped and refreshed. Work continues to ensure that we have a diverse representation reflecting all the communities we serve
		The Charter was developed by engaging across all of Hafod's services including housing, support, care and colleagues. The level of engagement resulting in 700 respondents. The Charter provides a commitment of how we will engage with tenants, residents and colleagues across our services.	
		The Charter was recognised at the TPAS Awards "Tenant at the Heart" category. In September 2019 to deliver our Charter commitments we have introduced a community newspaper. The purpose is to share ideas and experiences that are	

			happening in our communities and across our neighbourhoods.	
			The Scrutiny Panel comprises of tenants/residents and the inclusion of an independent advocate to bring insight from the Care perspective. A Board Member attends the Scrutiny Panel and reports progress at each Board Meeting.	
			The tenant app was introduced in 2018 with a view to improving reporting repairs and making rent payments. Current take-up is by 1400 residents. The process involved tenants in the final design of the product. To measure feedback tenants are encouraged to comment on the service through the app. There is a high level of satisfaction.	
			The App 24/7 enables tenants to access these services (repairs reporting and rent payments) at a time that suits them.	
			At the TPAS Awards the app was recognised in the "Digital Technology" category.	
PS2.2	Meets all applicable statutory requirements providing for the health and safety of the occupants in the home	Y	Gas safety: annual service and safety check carried out in all properties with gas appliances and each time property is vacant. Records held centrally, scrutinised internally and audited annually.	Processes: program of work underway to strengthen all existing compliance related processes to reduce possibility of risk and improve organisational efficiency.
			Asbestos: program of asbestos surveys for properties constructed pre 2000. Where survey not completed, assumed asbestos is present. Asbestos information stored against property information where applicable and available on site in staffed facilities e.g. Care Homes.	Compliance management system: investment in existing technology aimed to achieve increased automation, allowing more internal resource is spent
			Electric: electrical safety inspection completed every 10	scrutinising records for added

years or every time property becomes void. Moving toward 5 yearly inspections as per best practice and in anticipation of future legislation, expected to complete transition by end of this financial year. Records held centrally and audited annually. Fire: program of fire risk assessments for applicable	assurance. Performance reporting: continue to develop additional reporting measures relating to compliance as well as increased ability for
schemes, frequency based on assessed risk. Delivered through partnership with an external fire safety consultant.	management to review and scrutinise at will.
Legionella: risk assessments conducted in staffed facilities e.g. Care Homes and housing estates where there is a perceived risk. Management actions completed by on scheme staff and/or Service Contracts Team, records kept in facility (where applicable) and centrally.	Asbestos: develop a program of annual visual inspections of identified components with asbestos in individual homes and development of asbestos portal allowing contractors increased access to asbestos records.
Site inspections: program of periodic site inspections (monthly/quarterly depending on scheme) conducted by Surveyors and Estates Officer, identified risks mitigated via reactive works and/or amending planned works schedule	
Internal audits: quarterly audits and monthly compliance checks completed by internal Quality and Compliance function for staffed facilities (e.g. Care Homes). Annual H&S audits conducted by internal H&S team for staffed facilities. Trends and common themes analysed.	
Lessons learnt: we have reviewed the findings of the CCHA lessons learnt report and incorporated in the processes above which has led to the development of a strengthened internal lessons learnt process. Our learning has been informed by cross industry best practice.	

PS3.0		Comprehensive assessment of the business impacts of current and emerging risks, including new business and development opportunities, with robust risk management arrangements				
PS3.1	Safeguards taxpayers interests and the reputation of the sector and protects social housing assets.	Y	 A risk management framework was developed through a series of workshops and approved by the Hendre Board on 28 May 2019. This included an updated strategic risk which identified the Board's risk appetite. Hendre is focused on delivering effective housing management, maintenance and care services to our customers. During 2018/2019 we have undertaken a number of independently commissioned systematic reviews of key service areas together with key back office functions, e.g. ICT, procurement and asset management. As a diverse organisation with a large care portfolio the Board receives regular financial and non-financial performance information that distinguishes the social and non-social activities of the Group, which allows the Board to make informed decisions to protect its social housing assets. 	Board assurance framework will capture emerging risks that will inform the audit and risk committee's programme of in-depth analysis.		
PS3.2	Assessment of capacity to take on new business and development opportunities is robust.	Y	The Hendre Board sets business parameters which inform the annual business planning process for the Group. This plan ensures that the Group has the capacity to meet its strategic priorities. The Board reviewed the Group's legal structure, which concluded with the amalgamation of Hafod Housing and Hafod Care in August 2019. This realised both financial and non-financial capacity enabling the Group to increase its supply of housing properties and facilitating the integration of housing, health, social care and support. All new business activities are appraised for financial	The Board is committed to exploring alternative ways to support Welsh Government affordable housing targets including the leveraging of innovative strategic partnerships. This also includes a strong commitment to the decarbonisation programme.		

			 and non-financial risks and are presented to the Board for consideration and approval. The Board approved the new Treasury Management Policy on 15 July 2019. The policy identifies treasury risks and outlines the monitoring and reporting requirements. An assessment of resource capacity has been undertaken which has led to an investment in our colleagues to improve attraction and retention. Programme of work is varied and has included a review of terms and conditions, the launch of Academi Hafod and investment in leadership development and the transformation of the recruitment function. 	People Strategy and annual plan presented to Hendre Board 28 October 2019.
PS3.3	Carries out detailed and robust stress testing of financial plans against a range of scenarios, identifying appropriate mitigation strategies.	Y	Sensitivity Analysis is performed as part of the 30 year business planning cycle. The Board approved (25 February 2019) a range of scenarios to be applied to the base plan; these scenarios were based on the risk identified in the strategic risk register. The Board also considered the mitigating actions available should a risk materialise. External assurance was provided by the Group's treasury advisors on the economic assumptions applied to the business plan.	The Audit and risk Committee on the 27 August 2019 recommended that the internal auditors carry out an assurance audit as part of the 2019/2020 Internal Audit Programme.
PS3.4	Before taking on any new liabilities, ensures obligations are fully understood and demonstrates consideration of how the likely impact on current and future business and regulatory compliance will be managed.	Y	Any new, or amendments to, arrangements which would or could result in significant new liabilities to the organisation are reviewed by the Executive Team prior to Board scrutiny. Examples include pension liabilities, treasury arrangements, leases and new contracts for the provision of services. Where relevant, external professional advice is also sought.	

			Scheme appraisals undertaken to ensure projects meet viability parameters. All schemes outside viability parameters must be approved by Board.	
PS4.0	Clearly evidenced self evaluation and stat	ement o	of compliance	Fully compliant
PS4.0	Clearly evidenced self evaluation and statement of compliance	Y	Our self Evaluation and statement of compliance has been carried out received Board sign off on 16 September 2019.	
PS5.0	A track record of achieving positive outco performance issues	omes, re	sponding appropriately to new challenges and	Fully compliant
P\$5.1	Demonstrates how the board assures itself of current performance and drives continuous improvement	Y	The Hendre Board has set a schedule for receiving key performance reports. These reports contain current performance against a suite of KPI's which the Board has set; this is supported by dashboards which allows the Board to focus on areas for improvement. To support its implementation the Board approved the establishment of a dedicated quality and performance team. As well as monitoring compliance, this team is central to the decision making process including improvement to services, systems and processes. In addition to Board oversight the Executive Team has delegated responsibility to ensure performance targets are met. Proactive partnership working with key stakeholders ensures that we are able to meet contractual obligations.	Adoption of appropriate ISO Quality Management System planned for 2020.

PS5.2	Demonstrates how lettings make the best use of available housing, compatible with the core purpose of the Registered Social Landlord	Y	All our properties are let in conjunction with 7 local authorities' lettings policies helping them to discharge statutory responsibilities. In addition to the 4,000 properties within our housing stock. In the last 12 months we have directly met the housing needs of over 294 new customers. This low turnover reflects our commitment to house people in the most suitable accommodation enabling us to build sustainable communities in which people wish to remain. In line with our commitment to help people maintain their independent living and remain in their communities last year for example we invested £260,000 on physical adaptations to help 58 households. We place a premium on the question of affordability when allocating our properties, offering the services of our SMART money team and ongoing support from our Neighbourhood coaches. We invest significant time in developing close working relationship with Local Authority partners and our low void turnaround times ensures best use of common waiting lists. We work in conjunction with the Local Authority to ensure that housing supply meets demands. Lettings reports scrutinised by officers and Board. We subscribe to Homeswaper enabling out tenants to mutually exchange to properties to meet their ever changing needs. Property occupancy data/tenant profiling reviewed.	
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PS6.0	Delivering value for money in all areas of	Fully compliant	
PS6.1	Demonstrates a strategic approach to and delivery of value for money across the business	 Y Value for Money Policy in place. Value for Money Indicators as used in CHC Global accounts were reported to the Board with a comparison to other organisations (Hendre Board 25.02.19 Agenda Item 33/19). In February 2019 the Executive commissioned an external health check into the Group's procurement activity. Subsequently the Board approved a new procurement strategy and policy with supporting guidance. This ensured that value for money and community benefits are a core part of the procurement process. In addition to the direct benefits our customers receive through our services, we strive to maximise value for all of our activities. This includes seeking opportunities to invest in the local economy through the provision of work experience and specifying local labour employment through our development activity where appropriate. 	Value for Money Policy due for renewal/updated October 2019. Internal audit assurance report on procurement in 2019/2020 Internal Audit Programme.

PS7.0	Compliance with regulatory and statutory	Fully compliant		
PS7.1	Communicates in a timely manner with the regulator on material issues that relate to non-compliance and adheres to all regulatory requirements.	Y	We have worked closely with our regulator in a Co- regulation capacity with regular reporting and meetings. We have kept the Regulator up to date with all key events. The Group CEO /Executive Director of Assurance, Governance leads on communications with the Regulation Team in relation to the Voluntary Undertaking.	
PS8.0	A financial plan which delivers and suppo performance	rts the	business plan and effective monitoring of financial	Fully compliant
PS8.1	Ensures that the organisation is financially sound	Y	The Board sets business parameters which ensure the Group is financially sound. The Board receives timely and accurate financial performance information. The Executive Board and Operational Managers also receive monthly financial reports with monthly meetings held with the Finance Team.	Organisations key priorities to be reviewed December 2019 as part of the Draft Strategic Plan. A 5 year business plan is scheduled to be presented to the Board 2 March 2020 Board awareness training in October 2019 – 'About Finance'
PS8.2	Effective systems and controls are in place to monitor and accurately report delivery of the Registered Social Landlords plans	Y	 There are established systems and controls in place which monitor and report the delivery of our financial plans. These include: 30 Year Financial projections in place which are updated annually and compared with actual performance. Management Accounts prepared monthly and scrutinised by the Executive Board. Hendre Board scrutiny over financial information. 	

			 Refreshed Treasury Management Policy approved by Hendre Board on 15 July 2019. Independent compliance monitoring through Internal Audit of financial areas on an annual basis. 	
			 Robust budget setting, approval and monitoring processes. 	
			 Scheme appraisals for new developments carried out and scrutinised. Cross sector comparisons of financial performances undertaken. 	
			 Positive relationship with lenders developed and maintained. 	
			 Clean external audit opinion on Financial Statements. 	
			 Internal audit assurance received on key financial controls on an annual basis. 	
PS8.3	Monitors, reports on and complies with all covenants	Y	The Hendre Board through the approval of the new Treasury Management Policy identified covenant compliance as one of the treasury risks. Consequently the Board receives quarterly and annual treasury reports which include performance in relation to covenant compliance.	
			The treasury team monitors covenant compliance on a monthly basis with internal compliance limits set by the Board to act as early warning indicators	

			"Soft" covenants are monitored on an ongoing basis and reported to the Board in-line with the treasury management policy.	
PS9.0	Effective management of treasury operations ensuring sufficient liquidity at all times			Fully compliant
PS9.1	Ensures sufficient funding is available to deliver the business plan	Y	The treasury management policy is the mechanism by which the Board sets boundaries for financial risks and delegates treasury decisions for managing those risks in a controlled manner. The policy, has been developed in conjunction with JCRA alongside contributions from a number of Board Members In late 2018, the Hendre Board identified liquidity as a potential risk in the short term. Therefore it sought new external funding from MORhomes of £10m in February 2019. This ensured funding was in place to deliver our growth ambitions. The Board continues to monitor short, medium and long term liquidity in its quality treasury management report.	In October 2019 the Board will receive a briefing paper delivered by our external treasury advisors on the short term funding strategy.
P\$9.2	Ensures financial forecasts are based on appropriate and reasonable assumptions	Y	At the meeting of the Board on 25 February 2019, Members approved a range of economic assumptions to be used in the financial projections. These assumptions have been reviewed in line with Office for Budget Responsibility's Economic and Fiscal Outlook (March 2019). Furthermore, Officers have received additional advice from our treasury consultants (JCRA) which reaffirmed that the assumptions used were reasonable and in-line with market conditions at that time.	

PS10.0	A clear understanding of liabilities and as	Fully compliant	
PS10.1	Maintains a thorough, accurate and up to date record of assets and liabilities including all liabilities which have recourse to social housing assets	 Y Assets and Liabilities Register presented to Finance Risk and Audit Committee on 13 May 2019 Agenda Item FR 12/19. The register signposts to source data for all major assets and liabilities of the Group and contains key corporate information. The register is reviewed and updated on a periodic basis in line with the recommendations of Internal Audit. The Register was the subject of an Internal Audit report which was also presented to the Finance, Risk and Audit Committee on 13 May 2019 Agenda Item FR 13/19. All recommendations made in the audit report have been incorporated in the register. 	
PS10.2	Data on the financial and social performance of assets is accurate and used to inform investment decisions	 Y All new development opportunities are assessed at an early stage to determine their financial viability and sustainability and to ensure that Hafod offer the most appropriate mix of tenures, property types and locations to meet demand for social housing. Hafod liaises with local authorities and other commissioners to determine current and future demand. Hafod undertakes an annual assessment to determine if any of its estates display high and continuing levels of non-occupancy which would trigger consideration of an impairment adjustment in the financial statements. Individual assessments of the economic and social benefits of retaining individual properties are considered when they become vacant, particularly where considerable investment is required to put the property into a re-lettable state and where there is uncertainty of demand for that locality and/or type of property. In these situations the Board is presented with options appraisals including disposal options. 	The Group is currently refreshing its Asset Management Strategy.

PS10.3	Ensures data on the condition of their assets is up to date and is able to demonstrate consideration of the short and long term costs of maintenance, repair and renewal	Y	Within the organisation we have a Component accounting system which holds information on our assets in terms of condition, renewal period etc. We also hold on our QL system details of our stock condition and aim to undertake stock condition surveys on 20% on our estate assets annually. We have a 5 year planned maintenance programme in place which is reviewed annually.	Savills commissioned to complete a stock condition validation exercise As part of our Treasury Management strategy we will be engaging property consultants to undertake an exercise to validate our stock data. A revised asset management strategy will be presented to the Board for consideration in early 2020.
PS10.4	Ensures that publicly funded homes meet the standards set out in the Welsh Housing Quality Standard.	Y	We report to WG annually with our position statement.	

This statement of compliance was approved by the Hendre Board on 16 September 2019. Resolution No HB 48/20

Signed :Group Chief Executive

Signed: Chair