

Tier 1 AHBs



Regulatory Update & Training October 2017

Cork - 18th October 2017
Limerick - 19th October 2017

Welcome

- Introductions
 - Susanna Lyons, Head of Regulation
 - Jenny Murphy, Regulation Analyst
 - Matthew Walshe, Regulation Office

Objectives and Principles

*Our mission is to protect AHB assets and safeguard the interests of their current and future tenants by regulating for a **well governed, well managed and financially viable** sector.*



Role of Regulation

- **Provide Assurance** to Tenants, Boards, Government & Potential investors & the AHB Sector
- **Demonstrate**, a stable and well-regulated Sector
- **Safeguard** tenants and public investments
- **Facilitate investment** in Social Housing by growing confidence in the Sector
- Contribute to the overall **sustainability** of the Sector

Proportionate Regulation

The Code provides for a Tier based approach defined by:

- Stock Level
- Development Plans.

Tier 1	Tier 2	Tier 3
AHBs with up to 50 Units and no development plans	AHBs with between 50 and 300 units; and/or development plans to provide more units, or AHBs in receipt of loans from HFA or private finance	AHBs with more than 300 units or with development plans that are particularly sizeable

Our work remains focused on:

- ✓ Implementing the VRC
- ✓ Assessing AHBs against the VRC
- ✓ Pending Legislation: Developing & Embedding Standards
- ✓ Establishing a Regulatory Framework
- ✓ Enhancing of Relationships with Key Stakeholders: CRA, HSE, HIQA, ICSH

Proportionate, Transparent, Risk-Based

What do we look for...

- ✓ **Good Governance**
 - Fully functioning Boards
 - Skills, expertise & diversity
 - Provides strategic direction & oversight
- ✓ **Financial Management**
 - Financial Viability - Short & Long Term
 - Strategy underpinned by Financial Planning
 - Linking of Financial & Asset Management
- ✓ **Performance Management**
 - Tenant Focus
 - Asset Management
 - Long Term sustainability of the Housing Asset

- 232 AHBs Assessed, **28,781** homes regulated
- **83% AHBs** – Reported High levels of Compliance against the VRC
- **Evidence of Strengthening & Embedding of Code**
 - Governance
 - Sinking Fund Provision
 - Risk Management
 - Financial Standard
- Larger AHBs indicate significant growth plans **c.9k units**
- **Forecasted funding predominately HFA.** However, evidence of innovative funding mechanisms under consideration by AHBs
- **Enhanced Regulatory Framework**, pending Legislation
- Organisation's **continue to develop** their Governance, Financial and Performance Management

Key Challenges – Tier 1 AHBs

- Sinking Funds
- Formal Performance Management Structures
- Board Renewal & Succession Planning
- Differentiation between Governance & Operational
- Regulatory Burden

Statutory Regulatory Framework

LEGISLATION

Statutory Regulator

Proportionate

Governance Standard

Fully Functioning Board

Transparent

Oversight, Direction & Control

Strategy/Leadership

Risk Based

Outcomes Focused

Transparency

Comply or
Explain

Skills, Expertise & Diversity

Financial Governance & Risk Management

Financial Standard

Financial viability

Assess & Monitor:

S-T Viability

- Surplus/Deficit
- Liquidity
- Cashflow

L-T Viability

- Business Planning
- Profitability
- Debt to Equity
- Sinking Fund
- Stock Condition

Performance Standard

Protect & safeguard Tenants & Housing Asset

Tenant focused Delivery

- Nominations & Allocations
- Voids
- Communication
- Repairs & Maintenance

Sinking Fund

Stock Condition Surveys

Asset Registers

Training Session:

Completing Online Annual Regulatory Return

- Online Form – same look & feel as previous versions
- Online Form
 - User Friendly
 - Reduced requirements
 - Charter of Commitment incorporated
 - Effective & Efficient – Drop down menu's
 - Consistent with other Regulatory Bodies
 - Help available for all Tier 1 AHBs to complete

Move from Manual to online.....Today is about Ease of Transition for your AHB

Oversight of Online Form

- Online Form Comprised of 8 Key Sections:
 - General Information
 - Property Information
 - Unit Type
 - Governance
 - Finance
 - Performance
 - Charter of Commitment
 - Check List

1. Where there is a ***Red Astrix**
 - You must complete all information
 - You cannot continue without completing in Full
2. The form provides ability to:
 - Type in boxes provided
 - Drop Down Menu's to choose from
 - Clicking on circle beside appropriate answer
 - Entering numbers in boxes provided
 - Upload Files

Introduction

Welcome to the web based Annual Regulatory Return for Tier 1 AHBs. The form retains the same look and feel of the original Annual Regulatory Return, however it reduces the requirement for text based answers and provides simplified options for the organisation.

The web-based solution is created so that AHBs can easily navigate through the form using the Previous/Next buttons at the bottom of each page and also exit and return to edit information.

The web-based Annual Regulatory Return is required to be completed no later than **Thursday, 30th November 2017**

The Regulation Office appreciates the time and commitment of Tier 1 AHBs in submitting the Annual Regulatory Return. Should you have any questions in relation to the return please do not hesitate to contact Graeme or Matthew on 01-656-4170 or regulation@housingagency.ie

Additional information on how to complete this form is available in the [Explanatory Note](#)

regulation@housingagency.ie
Regulation Office Telephone: 01 656 4170

Please ensure you save each page before continuing

To go to the next page of the return please do so by clicking on the **Next** button below

[Next](#)



SECTION 1: GENERAL INFORMATION

1. General Information

This section requires all key information about the AHB

- Organisational Name
- Contact Details
- Key Contacts
- Declaration
- Company Type
- Core Objective
- Staff & Volunteers

1. General Information

1.1 Organisational Name

* 1.1.1 Official Name of Approved Housing Body:

1.2 Contact Details

1.2.1 Office Address

* 1.2.2 Contact Details

Telephone Number

Email Address

Website Address (if applicable)

In this section you must enter the organisations name and contact details

*The red astrix indicates that the information must be completed in order to continue.

Simply type into the boxes provided

1.4 DECLARATION

This confirms that the Board of the AHB (or a sub-committee that the Board has delegated responsibility to) has verified that the data and information provided within the Return is an accurate and true reflection of the activities of the AHB.

- * Please provide date of the meeting when the Board approved the submission of the Annual Regulatory Return

Meeting Date

DD	MM	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

* You must provide the date of the meeting when the board approved the submission

- * Name of the person authorising this return on behalf of the Organisation

I certify for, and on behalf of, the above organisation that the information reported in this Annual Regulatory Return is accurate and is a fair representation of the organisation for 2016

Name

Position

*You must provide the name and position of the person authorising the return in order to continue.

How to Navigate through The Form

Annual Regulatory Return for Tie: X

https://www.research.net/r/annualregulatoryreturntest2

This confirms that the Board of the AHB (or a sub-committee that the Board has delegated responsibility to) has verified that the data and information provided within the Return is an accurate and true reflection of the activities of the AHB.

Please provide date of the meeting when the Board approved the submission of the Annual Regulatory Return

Meeting Date DD / MM / YYYY

Name of the person authorising this return on behalf of the Organisation

I certify for, and on behalf of, the above organisation that the information reported in this Annual Regulatory Return is accurate and is a fair representation of the organisation for 2016

Name

Position

Please ensure you save each page before continuing

*To go to the next page of the return please do so by clicking on the **Next** button below
If you wish to return to the previous page please click **Previous** button below*

To return to previous pages in the form click on the **Prev** button

To move forward through the form click on the **Next** button

1. General Information

1.5 Company Type

1.5.1 Please indicate what type of company your organisation is:

- ☐ Company Limited by Guarantee
- ☐ Charitable Trust
- ☐ Friendly Society
- ☐ Association
- ☐ Designated Activity Company
- ☐ Other (please specify)

If none of the options provided are suitable you can click Other and enter the suitable answer in the textbox.

Simply click on circle beside appropriate organisation type

1. General Information

* 1.7.1 Does the organisation employ any paid staff?

☐ Yes

☐ No

You must select Yes or No here in order to continue.

* 1.7.2 If yes, please provide the number of staff directly employed in the provision and management of housing.

*If you answered Yes to 1.7.1 please select the number of staff, **if you answered No you must enter 0 to continue***

Number of Staff

Please select number of staff



Click on the drop down box to release a number list, then select the correct amount from this list.

If Zero, ensure to select 0

1. Simply click on Yes or No
2. Select from Drop down the appropriate number of Staff

SECTION 2: PROPERTY INFORMATION

2. Property Information

This Section requires all information relating to the AHBs properties

- Type of Units: Owned, Leased or Manged
- Location (by Local Authority)
- Number of Units
- Funding Type
- Type of Units (contained, non-self contained)
- Units leased/manged to/from other AHBs
- Planned Units

2. Property Breakdown

Please select the number of units that were owned, leased and managed by the organisation as at 31st December 2016, including the Location (local authority area) and funding type.

	Location	Number of Units	Funding Type
Owned 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Owned 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Owned 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leased 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leased 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leased 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
Managed 1	<input type="text"/>	<input type="text"/>	<input type="text"/>
Managed 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
Managed 2	<input type="text"/>	<input type="text"/>	<input type="text"/>

If the organisation has any further information in relation its units please provide below

1. Ensure to identify the units that are Owned, Leased and/or Managed by Section.

2. Select Location

3. Select Number of Units (use drop down)

4. Select Funding Type

Repeat process for Owned, Leased & managed (where appropriate)

2. Property Information

CAS (Owned)
CLSS (Owned)
CAS/CLSS out of Mortgage
Funded via P&A
Non-State Funded

These are the funding options for **OWNED** units ONLY

From Local Authority (Leased)
From Private Property Owners (Leased)
From Another AHB (Leased)

These are the funding options for **LEASED** units ONLY

On behalf of Local Authority(Managed)
On behalf of Private Property Owner(Managed)
On behalf of Another AHB (Managed)

These are the funding options for **MANAGED** units ONLY

Funding Type must be aligned to Owned, Leased or Managed

2. Property Information

Ensure to input TOTAL number of Units.....

Please enter the overall total number of units that are owned, leased or managed by the organisation in 2016:

Total Number of all Owned, Leased and Managed Units should combine to equal the value for Total Number of all Units.

Please Enter Total

Fourty three units



Please enter the overall total number of units that are owned, leased or managed by the organisation in 2016:

Total Number of all Owned, Leased and Managed Units should combine to equal the value for Total Number of all Units.

Please Enter Total

43



2. Property Information

New Requirement.....

* 2.4.1 Does the organisation have plans to develop units?

☐ Yes

☐ No

2.4.2 If Yes, please state number of planned units

Planned Unit Growth (1-3 Years)

CAS

Payment and Availability

Other

Total

Key information.....growth of number of Units

SECTION 3: GOVERNANCE

3. Governance

This section requires all key information about the organisations Governance

- Board Details
- Sub-committees
- Board Policies
- Related Parties
- Relationships with other Organisations
- Risk Register

3. Governance

* 3.1.1 Please state the number of Board Members at Year End 2016

*If the organisation has no Paid Directors, **you must select 0 to continue***

Please select number of Directors for each category

Please select total number of
Non Executive (Unpaid)
Directors

Please select number total
number of **Executive (Paid)**
Directors

Click on the drop down box
and select the number of
directors.

If the organisation has no
paid directors you must select
0 to continue.

* 3.1.2 How many times did the Board meet in 2016?

*If the organisation has not met in 2016, **you must select 0 to continue***

Number of Meetings Held

Please select number of
meetings

Click on the dropdown box
and select the number of times
the board met.

If the board has not met in
2016 you must select 0 to
continue.

Same as previous....number of Astrix questions throughtout this section

3. Governance

3.2.1 Does the organisation have subcommittees in place?

☐ Yes

☐ No

Select Yes or NO

3.2.2 If Yes, please select sub-committees in place within the organisation

Please Select Yes/No

Audit and Risk

Yes

Finance

Yes

Allocations/Letting

No

Maintenance/Repairs

Yes

Policy and
Procedure/Governance

No

Don't forget to select
which sub-committees are
in place....by selecting Yes
or No for each

Questions....linked to one another

3. Governance

* 3.3.1 Are the following Board Policies in place and reviewed in the last 2 years?

The organisation must select Yes/No for each policy in place **and** Yes/No for each policy reviewed in the last 2 years in order to continue.

	Please select Yes/No for each	Reviewed in the last 2 years
Board Membership	<input type="text"/>	<input type="text"/>
Board Membership Renewal	<input type="text"/>	<input type="text"/>
Code of Conduct	<input type="text"/>	<input type="text"/>
Conflict of Interest	<input type="text"/>	<input type="text"/>
Register of Interest	<input type="text"/>	<input type="text"/>



*You must select Yes or No for each policy that is in place **AND**

Yes or No for each policy has that been reviewed in the last 2 years.

Double Answer....linked to one another (Policies)

3. Governance

* 3.4.1 Does the organisation have a **relationship** with another organisation, that is, a Parent, Subsidiary or a sister entity ?

☒ Yes

☐ No

* 3.4.2 Does the organisations Audited Financial Statements(2016) reference related parties?

☒ Yes

☐ No

Related Parties – critical info! Relationship, Common Directors, Financial Transactions, SLA's and contractual arrangements

3. Governance

New Requirement.....

3.6.1 Does the organisation have a Risk Register(specifically related to housing assets) in place?

☐ Yes

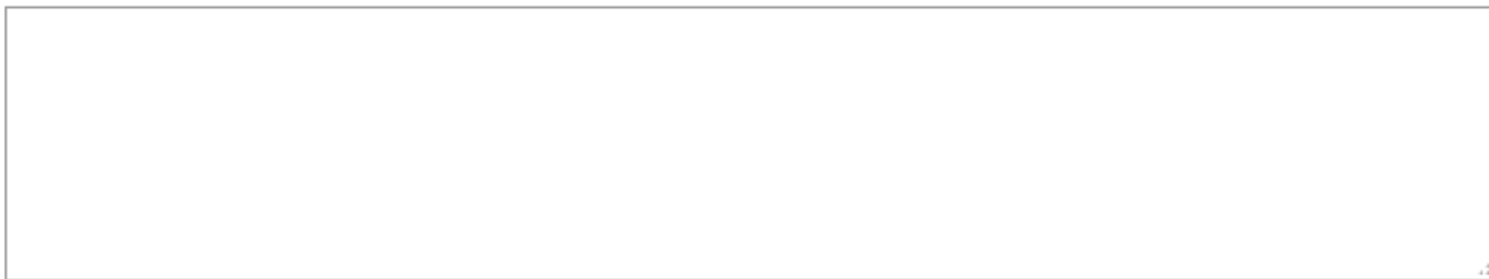
☐ No

Risk Register.....What risks do you face? Do you have a register?

3. Governance

At end of Governance Section, the AHB may add additional information which they believe is relevant to the Governance of the AHB.....

If the organisation wishes to provide additional commentary in relation to the organisations Governance, including strengthening and embedding Code requirements, it may do so here



SECTION 4: FINANCIAL & BUSINESS MANAGEMENT

4. Finance

This section requires all key information about the organisations Financial & Business Management

- Audited Financial Statements
- Tax Clearance
- Sinking Fund
- Relationships with other Organisations
- Stock Condition Survey

4. Finance

Audited Financial Statements

* 4.1.1 Does the organisation have a full set of audited financial statement for the last financial year (2016)?

☐ Yes

☐ No

Tax Compliance

4.2.1 Is the organisation tax compliant?

☐ Yes

☐ No

4. Finance

Sinking Fund

* 4.3.1 Does the organisation have a sinking fund in place?

☐ Yes

☐ No

4.3.3 If the organisation did not have a sinking fund in place, please provide an explanation

Stock Condition Survey**

4.3.4 Has the organisation completed a stock condition survey?

☐ Yes

☐ No

Sinking Funds – Key requirement

4. Finance

At end of Finance Section, the AHB may add additional information which they believe is relevant to the Finance of the AHB.....

Finance Commentary

4.4.1 If the organisation wishes to provide additional commentary in relation to the organisations Financial Management, it may do so here

SECTION 5: PERFORMANCE MANAGEMENT

5. Performance

This section requires all key information about the organisations Performance


- Tenant Service Policies
- Rent Records
- Communicating with Tenants
- Void Management
- Rent Payment and Arrears
- Repairs
- Management and Maintenance Costs
- Asset Register

5. Performance

* 5.1.1 Are the following Tenant Service Policies in place and reviewed within the last 2 years?

The organisation must select Yes/No for each policy in place **and** Yes/No for each policy reviewed in the last 24 months in order to continue.

	Please select Yes/No	Reviewed in the last 2 years
Complaints Policy	<input type="button" value="v"/>	<input type="button" value="v"/>
Allocations Policy	<input type="button" value="v"/>	<input type="button" value="v"/>
Voids Policy	<input type="button" value="v"/>	<input type="button" value="v"/>
Repairs Policy	<input type="button" value="v"/>	<input type="button" value="v"/>
Rent Arrears policy	<input type="button" value="v"/>	<input type="button" value="v"/>



*You must select Yes or No for each policy that is in place **AND**

Yes or No for each policy that has been reviewed in the last 2 years.

Double Answer....linked to one another (Policies)

5. Performance

Communicating With Tenants

5.3.1 Please advise how the organisation engages and communicates with tenants

Please select Yes/No for each method

Newsletters	<input type="checkbox"/>	Select Yes or No for each communication method
Meetings/Visits	<input type="checkbox"/>	
Tenant Surveys	<input type="checkbox"/>	
Electronic/Organisation Website	<input type="checkbox"/>	

Additional sections 5.2-5.4:

Rent Records, Pre-Tenancy Training and Tenant Handbook are all provided as Yes/No Answers

Records, Training & Handbook - key tenant management tools

5. Performance

5.4.1 Please select the total number of void properties during the 2016 year

Number of Void Properties

Please select the total number of
void properties

5.4.2 What was the average length of a void in 2016 year?

Number in Weeks

Please select the average length
of a void in weeks

5.4.3 What was the primary reason for void properties during 2016?

- ☐ Nomination Delays
- ☐ Refurbishments/Repairs
- ☐ Lack of Demand

Voids Key Performance indicator

5. Performance

Section 5.5 Rent Payments

Rent Payments, Rent Due, Rent Collected, Arrears Owed and Write Off

Section 5.6 Repairs

Emergency, Urgent and Routine

5.6.2 If the organisation does not currently collect information on repairs, or has not reported on this above, please provide explanation

Rent & Arrears – key performance indicator

5. Performance

New Requirement.....

Asset Register

5.8.1 Does the organisation maintain an asset register in respect of its housing stock?

☐ Yes

☐ No

Asset Register.....Do you have one? Requirement 2018 onwards

5. Performance

At end of Performance Section, the AHB may add additional information which they believe is relevant to the Performance of the AHB.....

Performance Commentary

If the organisation wishes to provide additional commentary in relation to the organisations Service Performance Management, it may do so here

A large, empty rectangular box with a thin black border, intended for the user to provide performance commentary. In the bottom right corner of the box, there is a small, faint icon of a house with three figures inside, similar to the one in the header.

SECTION 6: CHARTER OF COMMITMENT

Charter of Commitments Renewal

Charter of Commitment is required to be signed off on an Annual Basis. Completion of Name, provides confirmation of commitment to the Code

We confirm that we will comply with the requirements set out in the Voluntary Regulation Code, appropriate to our organisational type. We are committed to reviewing our organisational practice against the Code on an annual basis.

Name (Board Chairperson)

Email (Board Chairperson)

Name (Board Secretary)

Email (Board Secretary)

To complete the Charter of Commitments Renewal the organisation must enter the name and email for both the Chairperson and Secretary.



SECTION 7: CHECK LIST & SUBMIT

Ensuring All Relevant Documentation is Submitted

Please review to ensure all necessary documents are attached to this form as part of the Annual Regulatory Return submission:

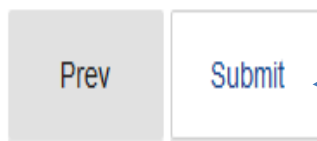
- A copy of the Modified/Qualified Audit Opinion (if applicable)
- Audit Management Letter and the organisation's response (if applicable)
- Service Level Agreement regarding related parties (if applicable)
- The detailed HAPM survey response or the Co-Operative Housing Ireland performance management response (if applicable)

Before submitting this return review the checklist

Ensure all applicable files are uploaded

Please ensure you have completed each section of this form before submitting.

Should the Regulation Office have any question we will be in contact in due course.



Prev Submit

Ensure to Submit!

To submit the return click on this Submit button.

How to:

1. Save
2. Print
3. Upload Documents



Is my information stored as I move forward?

Annual Regulatory Return for Tiel X

https://www.research.net/r/annualregulatoryreturntest2 67% Search

Name

Telephone Number

Email

1.3.2. Contact Person for Regulation Purposes (if different from above)

Name

Role in Organisation

Email

Telephone Number

1.4 DECLARATION

This confirms that the Board of the AHB (or a sub-committee that the Board has delegated responsibility to) has verified that the data and information provided within the Return is an accurate and true reflection of the activities of the AHB.

Please provide date of the meeting when the Board approved the submission of the Annual Regulatory Return

Meeting Date

/ /

Name of the person authorising this return on behalf of the Organisation

I certify for, and on behalf of, the above organisation that the information reported in this Annual Regulatory Return is accurate and is a fair representation of the organisation for 2016

Name

Position

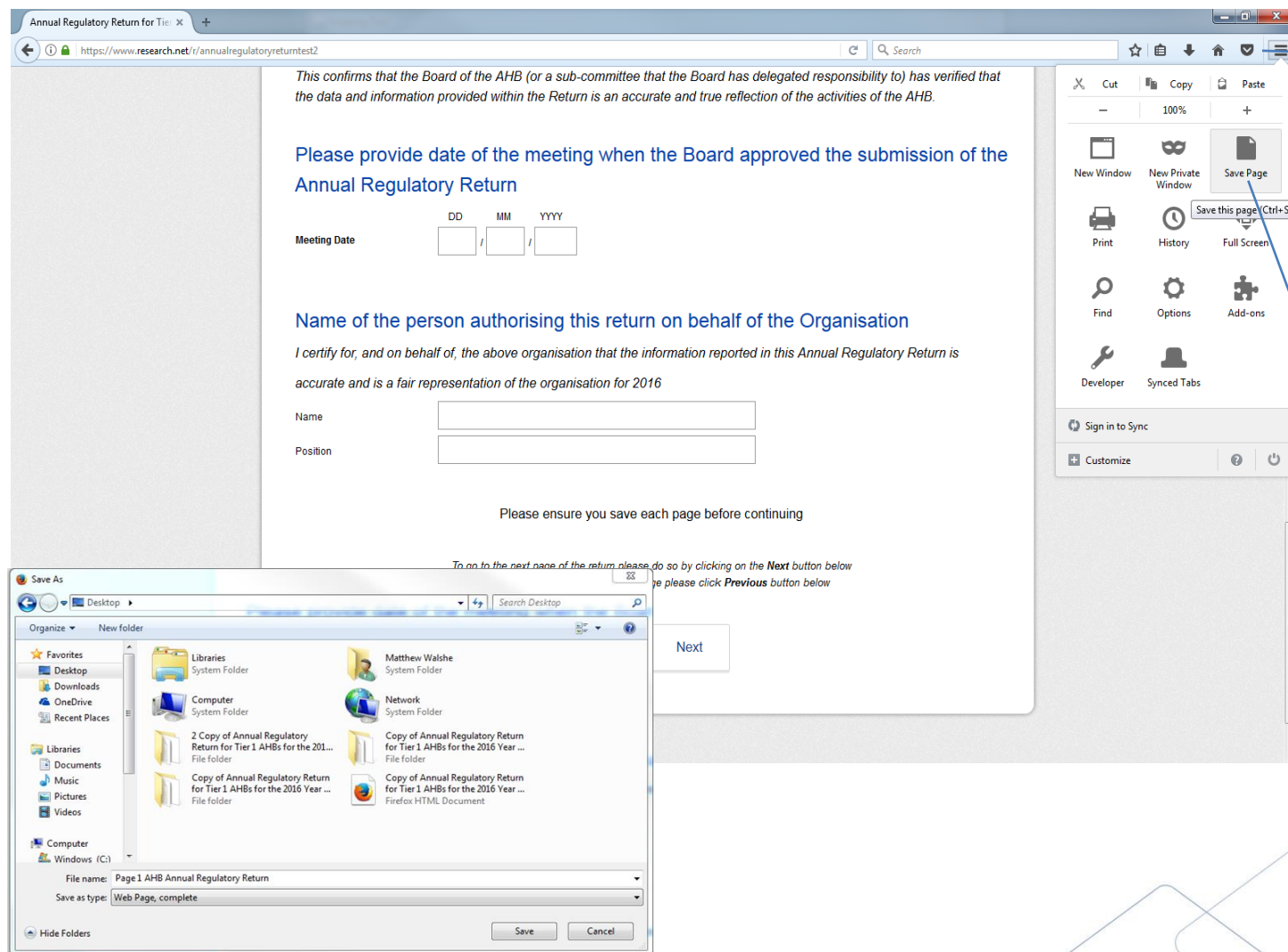
Please ensure you save each page before continuing

*To go to the next page of the return please do so by clicking on the Next button below
If you wish to return to the previous page please click Previous button below*

Prev Next

When you click on the previous and next button, all the information entered on previous pages is automatically stored.

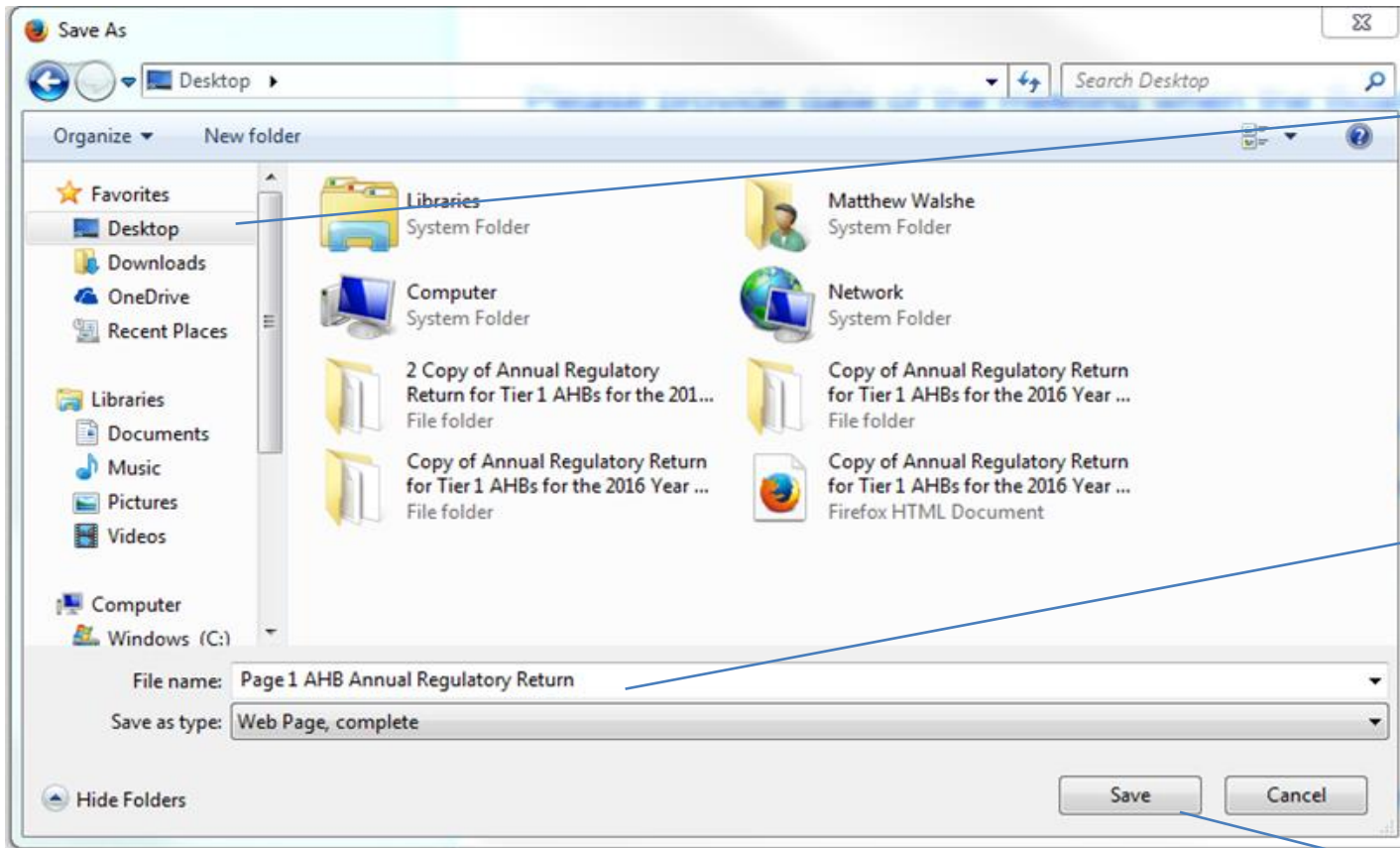
Saving Pages



1. Click on the Open Menu button on the top right corner of your screen.

2. Click on the Save Page button.

Saving Pages (please save each individual page on your computer)



3. This will pop up when you select save in 2 above. In the left column you can select the **location** on your computer you wish to save the page.

4. In the **File name bar** you can name the page you are saving.

5. Click on the save button to save the page.

Printing Pages (This will only print what is visible on your screen)

Annual Regulatory Return for Tier 1 AHBs for the 2016 Year V.2

SECTION 1 - GENERAL INFORMATION

1.1 Organisational Name

1.1.1 Official Name of Approved Housing Body:

1.2 Contact Details

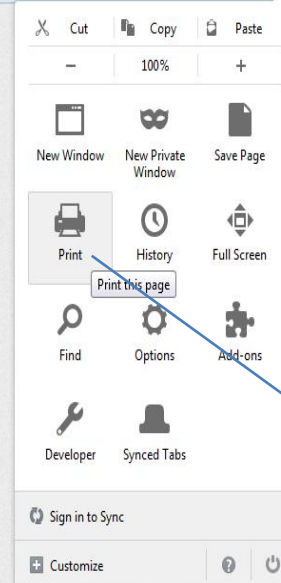
1.2.1 Office Address

1.2.2 Contact Details

Telephone Number

Email Address

Website Address (if applicable)



1. Click on the Open Menu button on the top right corner of your screen.

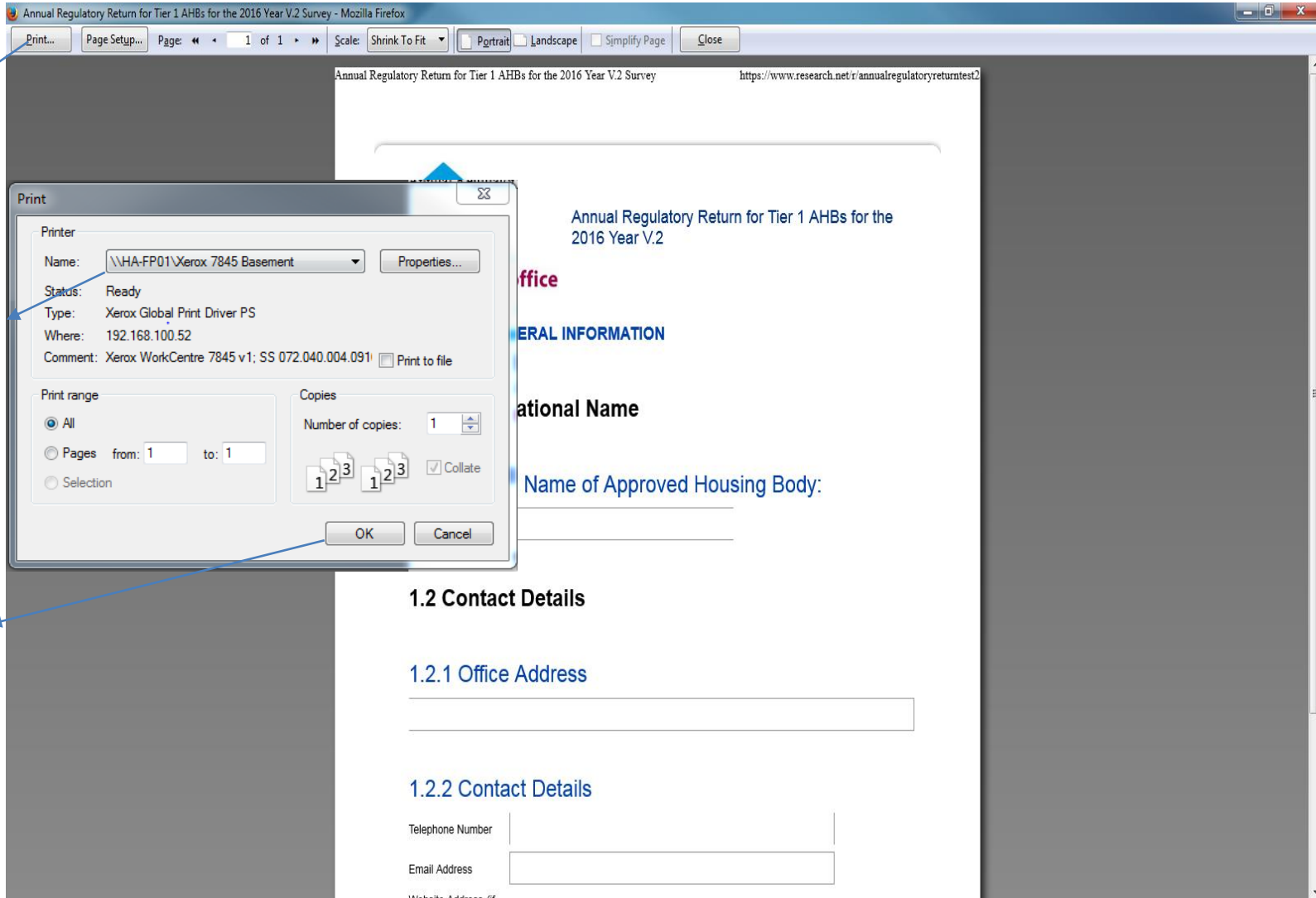
2. From the grid click on the Print button.

Printing Pages (This will only print what is visible on your screen)

3. Click on the print button.

4. Select the printer you wish to choose from.

5. Click on the print button to print the current page. (This will only print what is visible on the screen, not the full page)



Annual Regulatory Return for Tier 1 AHBs for the 2016 Year V.2 Survey - Mozilla Firefox

Print... Page Setup... Page: 1 of 1 Scale: Shrink To Fit Portrait Landscape Simplify Page Close

Annual Regulatory Return for Tier 1 AHBs for the 2016 Year V.2 Survey https://www.research.net/r/annualregulatoryreturntest2

Annual Regulatory Return for Tier 1 AHBs for the 2016 Year V.2

ffice

GENERAL INFORMATION

ational Name

Name of Approved Housing Body:

OK Cancel

1.2 Contact Details

1.2.1 Office Address

1.2.2 Contact Details

Telephone Number

Email Address

Website Address (if

Uploading Files

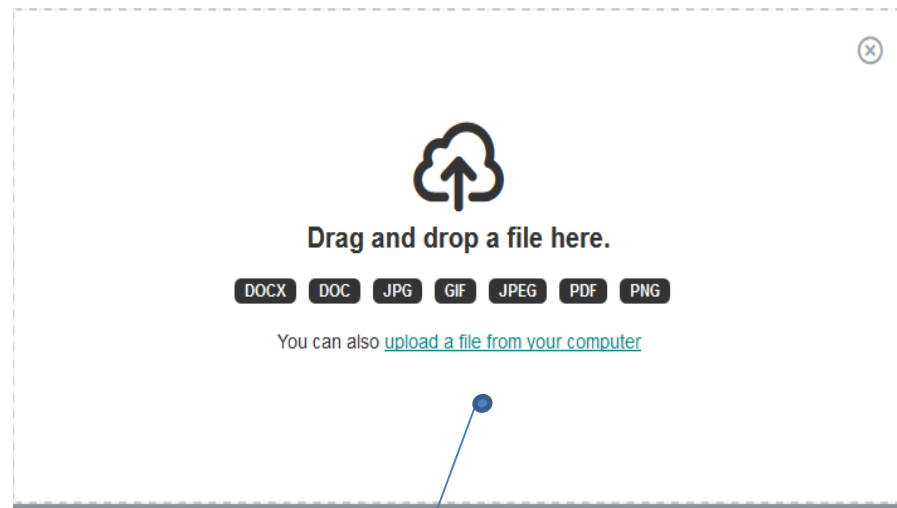
Please provide a copy of the service level agreement (SLA) (if applicable)

Option 1: Uploading a File

Please attach a copy the service level agreement here



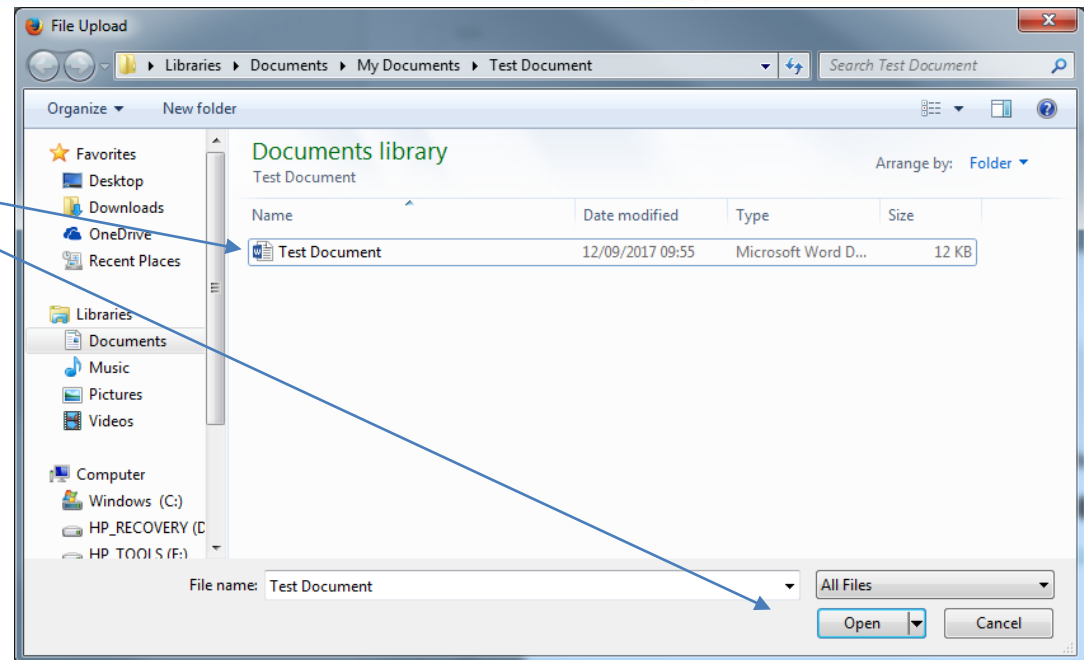
To upload a file to the return, click on the **Choose File** button, there are two options when uploading a file to your return.



You can drag a file directly from you computer and drop inside the drop box or you can also click on the upload file link.

Uploading Files

You can also click on the upload file from your computer link which will open the File Upload window, here you can select the file you wish to upload. Click on open to upload the file once selected.



Please provide a copy of the service level agreement (SLA) *(if applicable)*

Please attach a copy the service level agreement here

Replace File

✓ Test Document.docx [Remove File](#)

This process can be repeated for uploading files throughout the return.

The file name you have uploaded should be visible beside the Replace File button.

Thank you for your time...
.... Final questions.

E: regulation@housingagency.ie

Ph. 01 656-4170

www.housingagency.ie/regulation

