



Action for Warm Homes

National Energy Action Northern Ireland's response to the Utility Regulator's Care Register Review: special provisions for vulnerable customers (a Consumer Protection Strategy Project)

September 2017

Introduction

NEA is pleased with the scale of work demonstrated in this Care Register Review and commends the Utility Regulator (UR) for focusing the review on the need for promotion and awareness raising of the care register. This task will require a campaign which should clearly set out the key elements necessary to achieve this aim.

The impetus to target those most in need of the care register is to be commended. There are likely to be many householders who are reliant on essential equipment, that are not aware of the register. Through this process and collaboration with the UR and the Consumer Council Northern Ireland (CCNI), positive steps have been taken to accelerate the awareness across key stakeholders. However, the process of awareness has just begun and through strategic targeting, we are optimistic that many more customers will become aware of the register and avail of these vital services. Indeed we believe that targets should be set for the companies to demonstrate that this is being achieved.

We also believe that there are opportunities to look at other features of the electricity and water care registers. For example the Priority Services Register (PRS) in GB has wider criteria and is not determined by the need for essential electrical equipment. In GB, this register is also available for families with children under five and we therefore recommend that this is also introduced in Northern Ireland ensuring that the same protections are extended here in Northern Ireland as to those in GB. Indeed we believe that not reviewing the services provided to gain access to the critical care list is a missed opportunity. This review is long awaited and no doubt it will be some time/ years before the registers are reviewed again. **We therefore call on the UR to review the eligibility for access and services provided under the registers, to ensure they are fit for purpose. This will require consultation with medical staff and key stakeholders with access to households.**

That said the awareness campaign is also long overdue and will also assist in dispelling myths about the current critical care register. Anecdotally there can be an assumption that the register is only for people reliant on very specific equipment like home dialysis/vital signs monitoring which has the potential to cause customers to dismiss other essential equipment such as mattresses and stair-lifts. This needs addressing and as outlined above we believe this review is an ideal opportunity to examine the current services available (under the terms

of consumer protection) to those who are not reliant on equipment but equally vulnerable to a loss of supply.

The current range of services across NIE, NIW and suppliers is commendable but not uniform. There continues to be confusion between networks and suppliers and this should be addressed in the awareness campaign.

The consultation has outlined that there are no plans to amalgamate critical and vulnerable customer's registers. We would be keen to talk to the key stakeholders concerned and consider how we could overcome some of the data protection issues encountered in GB. Northern Ireland is a relatively small geographical area and, in the interests of the most vulnerable, we believe a solution should be viable.

While, in the main, the level of interruptions in Northern Ireland is comparable to GB, when an interruption occurs it can have a major impact on customers and in particular the vulnerable. Whilst we understand the importance for delegating staff resources efficiently, it is vital that there is a triage operating in place during a disruption to target those reliant on equipment. We are unclear if this is the case and how this operates in practice. We understand that NIE maintain a duty incident team equipped to deal with large or small scale incidents but more information on how this operates would be helpful.

Furthermore, Northern Ireland has a particular problem around Worst Served Customers (WSC). Is there special provision for customers who are deemed to be WSC? What if any contingency plans are provided to these customers? We believe that special consideration should be provided to them in the light of the fact that they are more likely to be off supply for longer periods for time.

The Proposals

- 1. Services offered by electricity and water companies will continue to recognise the different levels of service required by customers with various different needs;**

We understand that this is a licence requirement for network companies and therefore it should be automatic. This review is timely as it provides an opportunity for companies to review and update their own services and to be alert to the changing needs of users, for example, those with mental health and learning disabilities, when communicating with these customers.

- 2. As proposed by UKRN in GB, NIE Networks and NIW should adopt a common naming convention for their care registers and use consistent and accessible language when referring to their care registers;**

We strongly agree with, and endorse this proposal; there is widespread confusion on the differing schemes and any large scale awareness campaign requires inclusivity to enable further take-up of the registers. However, the fact that there are two separate registers i.e. critical care and vulnerable customers with no intention to merge these two registers, there may still be further need for clarity on these separate registers.

- 3. NIE Networks and NIW should work together to ensure that a customer who is eligible to join the NIE Networks care register is automatically included on the NIW care register. This will ensure that the most vulnerable customers can avail of a comprehensive service particularly during a major incident.**

This is a very sensible approach to maximise joint take-up and meeting customer's needs.

- 4. NIW needs to create a sub-set to their current care register. This sub-set is to consist of customers who are currently included on, or are eligible to be included on, the NIE Networks care register. This customer sub-set will help in targeting services during a major incident;**

As outlined in proposal seven below, we agree that streamlining the register via data sharing is the best way forward and the most efficient method to maximise impact,

provided customers are aware of this from the outset. NIW has the smaller number of customers on their care register, it makes sense therefore, for NIW's register to be the sub-set. However, it would seem that if a customer had already met the criteria to be on the NIE critical register, that it would be hard to imagine why they would not meet the test to be on the NIW care register. Would it be more sensible to find a way to merge the registers? With NIE having significantly higher numbers on their register than NIW this would surely overcome an issue with targeting. Should the UR set the companies targets through this; we would envisage improved targeting being brought about with more speed and rigour.

5. NIE Networks and NIW should work together to improve promotion and awareness of their care registers e.g. a common bi-annual vulnerable customer forum;

We agree that this will add to the overall momentum of the campaign and invigorate the industry. Like any forum, capturing the attention of those who need the service most and listening to those individuals is a key objective. Additionally, the health and third sector fora may also help as detailed below.

6. NIE Networks and NIW should work together to continue to improve relationships within community and voluntary organisations, advice giving agencies and other stakeholders who promote care registers including specifically health bodies;

We particularly recommend improved connections with health bodies that are often the vital link for vulnerable customers. The majority of those likely to be eligible for the care register are regularly in touch with GP's, social services and other health care professionals. The UR should work to engage with Health to promote the importance and need for the critical registers.

- 7. NIE Networks and NIW should proactively explore ways in which data can be shared between the two companies, within data protection regulations, and for the benefit of vulnerable customers. For example, a data sharing agreement between NIE Networks and NIW; seeking express and informed consent from customers for their information to be shared between the two companies;**

We fully support the proposal for customers on one or other list to be included on both. Much emphasis has been placed rightly on data protection and we commend the UR for this. As the review states, the Information Commissioner has provided thorough guidance on taking this further. We also recommend that plain English literature accompanies the proposal for data sharing. The Data Protection Act is complicated and many customers will be potentially concerned about how their data is used.

- 8. The UR should continue to engage with UKRN and will monitor progress;**

Continual monitoring will enable all stakeholders to consider the success and learning of any changes implemented as a result of the review. Monitoring progress should be the norm within any customer facing service provision.

- 9. UR should set up an annual industry forum for care registers; the purpose of which would be to continue to engage with industry and stakeholders in regards to the monitoring progress on promotion, awareness, data sharing, and collaboration. In particular an industry forum should report the number of customers registered by each of the companies;**

This would prove useful given the nature of the difference between network and supplier.

- 10. UR should produce and distribute a promotional leaflet (similar to that produced by UKRN) on the various services available.**

Yes, but this should also include the services provided by actual suppliers for everyday needs not just interruptions. While suppliers and networks are being dealt with separately, customers should be made aware of all services either by infrastructure companies or supply customers. All information in one place, for customers, is obviously the best practice.

Conclusion

We appreciate the logistical limitations around amalgamating the vulnerable and critical care registers at this stage due to the different datasets between suppliers and networks, however this is disappointing and missed opportunity as we have outlined above.

We suggest that there should be some consideration given to mitigating circumstances for instance families with multiple births and infants with certain health conditions in worst affected areas. We agree that continual monitoring of progress throughout the UK will assist in further decisions in the future.

We thank the UR for the opportunity to respond to this review and look forward to working with you in your endeavours to drive the work forward.

Response submitted on behalf of NEA NI by:

Lucy Cochrane
Policy & Campaigns Officer
National Energy Action NI
1 College House
Citylink Business Park
Albert Street, Belfast
BT12 4HQ