

PUBLIC HEALTH AGENCY RESPONSE

The UR has actively listened to and engaged with industry and consumer representatives during this project as well as other key stakeholders such as ICO. The UR has considered all of this information and we want to focus on a number of measures that we consider appropriate for, and reflective of, the Northern Ireland context. Therefore, we want to consult on the proposals outlined below:

The Public Health Agency (PHA) was established in April 2009 as part of the reforms to Health and Social Care (HSC) in Northern Ireland. We are the major regional organisation for health protection and health and social wellbeing improvement. Our role also commits us to addressing the causes and associated inequalities of preventable ill-health and lack of wellbeing. We are a multi-disciplinary, multi-professional body with a strong regional and local presence.

In fulfilling our mandate to protect public health, improve public health and social wellbeing, and reduce inequalities in health and social wellbeing, the PHA works within an operational framework of three areas: Public Health, Nursing and Allied Health Professionals, and Operations. Our corporate and business plans reflect these arrangements and our purpose as an organisation.

The response below reflects a number of Public Health/Health Improvement considerations relating to the Care Register Review provisions for vulnerable customers. However as this consultation primarily relates to the 'Critical Care Register' and its impacts on the provision of life critical utility (electricity and/or water) provision for clients broader HSC input should also be proactively sought. Especially from organisations such as HSC Trusts who will support and engage with the consultation's key client group/focus – customers who rely on a utility (water and/or electricity) supply 'to operate life supporting medical equipment'.

From a Public Health perspective the PHA fully support the Utility Regulators recommendations relating to the need for further promotion and awareness raising to support the uptake of special provisions for vulnerable clients.

1. Services offered by electricity and water companies will continue to recognise the different levels of service required by customers with various different needs; The PHA endorses this approach particularly for client's dependant on life critical utilities and potentially for other target groups whose health and wellbeing could be negatively impacted by a lack of sustained utility provision.
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; The PHA endorses this approach and suggests that this would support any associated promotion and awareness raising and could potentially improve uptake of the Critical Care 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. The PHA endorses this approach and suggests that this would provide a more streamlined and all-encompassing approach for vulnerable clients and/or those responsible for their care.
4. NIW need 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 above - The PHA

endorses this approach and suggests that this would provide a more streamlined and all-encompassing approach for vulnerable clients and/or those responsible for their care.

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; As above - The PHA endorses this and suggests that this would provide a more streamlined and all-encompassing approach for vulnerable clients and/or those responsible for their care. Additionally, this could potentially support future service improvement.

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; As above - The PHA endorses this and suggests that this would provide a more streamlined and all-encompassing approach for vulnerable clients and/or those responsible for their care. Additionally, this could potentially further support service improvement and uptake. As mentioned in the introduction broad HSC engagement should be sought especially from HSC Trusts who will be the key organisations supporting clients who are reliant on life supporting medical equipment. This is likely to include but may not be limited to the HSC Trust Community Care Teams and Recovery Service (previously Community Rehabilitation Service).

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; The PHA endorses this and suggests that this would provide a more streamlined and all-encompassing approach for vulnerable clients and/or those responsible for their care.

8. The UR should continue to engage with UKRN and will monitor progress; The PHA endorses this and believes that if available learning/best practice from other regions could support a NI approach.

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; and The PHA endorses this but is unsure how this would operate/function – does point 6 link or support this?

10. UR should produce and distribute a promotional leaflet (similar to that produced by UKRN) on the various services available. The PHA fully endorses this and suggests that the leaflet should be available in a range of formats to support vulnerable clients and specific target groups whose first language is not written English.