Compliance plan for Simply Energy Reconciliation Participant Audit 2022

Relevant information			
Non-compliance	С	Description	
Audit Ref: 2.1	Some inaccurate data is recorded and	l was not updated	l as soon as practicable.
With: Clause 11.2 & 15.2	Some submission data was inaccurat opportunity.	e and was not co	prrected at the next available
	Some corrections identified in the last	t audit have not b	een corrected.
	Potential impact: Medium		
	Actual impact: Medium		
From: 1-Mar-21	Audit history: Multiple times		
To: 1-Dec-21	Controls: Moderate		
	Breach risk rating: 4		
Audit risk rating	Rationale	for audit risk rati	ng
Medium	period but there is still room for impr	ols are rated as moderate as the controls have been improved during the audit d but there is still room for improvement. In a same of the impact on submission accuracy.	
Actions ta	ken to resolve the issue	Completion date	Remedial action status
we are currently work possible.	this Audit have been logged and ing to resolve these where Reconciliation washups were put 1.	8/03/2022	Identified
Preventative actions to	aken to ensure no further issues will occur	Completion date	
-	ded the most recent one, will have ntify all actions to be resolved.	8/03/2022	

Retailer responsibility for electricity conveyed - participant obligations			
Non-compliance	С	Description	
Audit Ref: 2.5 With: Clause 10.4 From: 1-Oct-21 To: 28-Feb-22	The Brightr terms and conditions of participants. Potential impact: Low Actual impact: Low Audit history: None Controls: Weak Breach risk rating: 3	do not include c	consent for access for other
Audit risk rating	Rationale	for audit risk rati	ng
Low	The controls are recorded as weak because the requirement has not been met for customers serviced by Brightr. The impact is low because all Brightr customers are transferring to other traders. This is expected to be completed by March 2022.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
We are currently workin electricity market.	g with Brightr for their exit of the	31/03/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	

Retailer responsibility for electricity conveyed - access to metering installations			
Non-compliance	С	Description	
Audit Ref: 2.6 With: Clause 10.7 From: 1-Oct-21 To: 28-Feb-22	The Brightr terms and conditions of participants. Potential impact: Low Actual impact: Low Audit history: None Controls: Weak Breach risk rating: 3	do not include c	consent for access for other
Audit risk rating	Rationale	for audit risk rati	ng
Low	The controls are recorded as weak because the requirement has not been met for customers serviced by Brightr. The impact is low because all Brightr customers are transferring to other traders. This is expected to be completed by March 2022.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
We are currently working electricity market.	ng with Brightr for their exit of the	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	

Trader contracts to permit assignment by the Authority			
Non-compliance	С	escription	
Audit Ref: 2.8 With: Clause 11.15B From: 1-Oct-21 To: 28-Feb-22	The Brightr terms and conditions of Authority in the event of retailer defat Potential impact: Low Actual impact: Low Audit history: None Controls: Weak Breach risk rating: 3		ssignment by the Electricity
Audit risk rating	Rationale	for audit risk rati	ng
Low	The controls are recorded as weak because the requirement has not been met for customers serviced by Brightr. The impact is low because all Brightr customers are transferring to other traders. This is expected to be completed by March 2022.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
We are currently working electricity market.	ng with Brightr for their exit of the	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	

Electrical Connection of	Point of Connection		
Non-compliance		Description	
Audit Ref: 2.11 With: Clause 10.33A From: 01-Apr-21 To: 03-Dec-21 Audit risk rating	One new connection was not certified within five business days of the initial electrical connection date. Two reconnections were not certified within five business days. Potential impact: Low Actual impact: Low Audit history: Multiple times Controls: Moderate Breach risk rating: 2 Rationale for audit risk rating		
Low	Controls are rated as moderate as t	hey will mitigate risk	to an acceptable level.
	The audit risk is low as only three IC	Ps were affected dur	ing the audit period.
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of peotins resulted in long distribution between April and August which was significant in staffing from mid August 2015.	s were switched out between in put a lot of pressure on the pple within the Operations Team. elays in registry status updates gust. Data quality during this y low however since an increase ugust, this has reduced the es. The Operations Team Lead is ontrol.	31/03/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
to monitor all field ser EDA file so we have vis - this is used to provid	d for the Operations Team Lead vices jobs. We also import the sibility with late registry updates e ongoing coaching to abers and refine processes.	Ongoing	

Provision of information	Provision of information on dispute resolution scheme		
Non-compliance	С	escription	
Audit Ref: 2.19 With: Clause 11.30A	Smart Energy (now Brightr) does not website or when responding to queric Potential impact: Low		•
From: 01-Oct-21	Actual impact: Low Audit history: Once Controls: Weak		
To: 28-Feb-22	Breach risk rating: 3		
Audit risk rating	Rationale	for audit risk rati	ng
Low	The controls are rated as weak as there is not a consistent approach.		ent approach.
	The audit risk rating is low because al Brightr customers are transferring to completed by March 2022.		·
Actions tak	ken to resolve the issue	Completion date	Remedial action status
We are currently work the electricity market.	ing with Brightr for their exit of	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	

Provision of information	Provision of information on electricity plan comparison site		
Non-compliance	0	escription	
Audit Ref: 2.20 With: Clause 11.30B	website its invoices or in outhound communications regarding price changes or		
	Potential impact: Low		
	Actual impact: Low		
From: 01-Oct-21	Audit history: Once		
To: 28-Feb-22	Controls: Strong		
	Breach risk rating: 1		
Audit risk rating	Rationale	for audit risk rati	ng
Low	The controls are rated as strong overa other parties are compliant. The audit risk rating is low because all customers are transferring to other March 2022.	brands achieved	partial compliance and Brightr
Actions tak	en to resolve the issue	Completion date	Remedial action status
We are currently working the electricity market.	ng with Brightr for their exit of	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	

Changes to registry info	anges to registry information		
Non-compliance		Description	
Audit Ref: 3.3 With: Clause 10 Schedule 11.1	• two late updates to active status, and • nine late updates to inactive status. SELS • 16 late updates to active status for reconnections, • 19 late updates to inactive status, • 46 late trader updates, and • 20 late ANZSIC code updates, at least one of which was not genuine and related to correction of other attributes. SELX • one late trader update. Potential impact: Low Actual impact: Low Audit history: Multiple times Controls: Moderate		
To: 19-Nov-21	Breach risk rating: 2		
Audit risk rating	-	le for audit risk ratin	g
Low	The controls are rated as moderate acceptable level. The audit risk rating is assessed to be was small.		-
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of peo This resulted in long do between April and Aug period was significantl in staffing from mid Aug	were switched out between a put a lot of pressure on the ple within the Operations Team. elays in registry status updates gust. Data quality during this y low however since an increase agust, this has reduced the s. The Operations Team Lead is ontrol.	31/03/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
to monitor all field ser EDA file so we have vis - this is used to provide	d for the Operatons Team Lead vices jobs. We also import the sibility with late registry updates e ongoing coaching to bers and refine processes.	Ongoing	

Provision of information	to the registry manager		
Non-compliance		Description	
Audit Ref: 3.5 With: Clause 9 Schedule 11.1	 Ten late updates for new of SELS 118 late updates for new of ICP 0000163525CKB50 has 09/10/21. ICP 0120110020PNA29 has 15/03/21. 	onnections. a status date of 28/1	
	Potential impact: Low		
	Actual impact: Low		
From: 01-Apr-21	Audit history: Multiple times		
To: 29-Nov-21	Controls: Moderate		
	Breach risk rating: 2		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are rated as moderate, acceptable level. The audit risk rating is low as the comade active as soon as possible and mismatches are being corrected as reconciliation is minimal.	ntrols in place are en I discrepancy reporti	isuring that ICPs are being ng is ensuring any
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of people This resulted in long dispersion was significant in staffing from mid-A	s were switched out between th put a lot of pressure on the ople within the Operations Team. elays in registry status updates gust. Data quality during this ly low however since an increase ugust, this has reduced the es. The Operations Team Lead is control.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
to monitor all field ser EDA file so we have vis - this is used to provid	ed for the Operations Team Lead vices jobs. We also import the sibility with late registry updates e ongoing coaching to obers and refine processes.	Ongoing	

ANZSIC codes			
Non-compliance		Description	
Audit Ref: 3.6	SELS		
With: Clause 9 (1(k)) of	Eight ICPs had incorrect ANZSIC cod	es assigned. All were	e corrected during the audit.
Schedule 11.1	Potential impact: Low		
	Actual impact: Low		
	Audit history: Multiple times		
	Controls: Moderate		
From: 01-May-21	Breach risk rating: 2		
To: 11-Feb-22			
Audit risk rating	Rationa	le for audit risk ratin	g
Low	Controls are rated as moderate as t customers are signed up. This is be		n place when white label
	The audit risk rating is low because a low impact on the Electricity Auth	•	
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of peo This resulted in long do with our customer bet quality during this per however since an incre us to increase product of following up on ANZ	s were switched out between in put a lot of pressure on the ple within the Operations Team. elays in proactively following up ween April and August. Data iod was significantly low ease in staffing, this has allowed ivity and proactiveness in terms ZSIC code responses. The	28/02/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
to monitor all 'Unknow the customer in order A monthly process has ICPs with a residential and where the custom suggests that the ANZS contact the customer is	d for the Operations Team Lead vn' ANZIC codes – we contact to correct the ANZIC code. been established to identify all ANZSIC code (as per the LIS file) er name or metering category SIC code is not appropriate - to in order to correct the ANZSIC be expanded to include checks over time	Ongoing	

Management of "active"	' status		
Non-compliance		Description	
Audit Ref: 3.8 With: Clause 17	SELS Two SELS ICPs have more than	one active customer	
Schedule 11.1	 Two ICPs made active for the in (18 new connection late update date discrepancies, ten late rec ICPs with expired certification). Potential impact: Low 	correct date of the ses, 15 new connection onnection active upo	ample of 45 ICPs sampled ns with potential first active
	Actual impact: Low		
From: 04-Apr-21	Audit history: Three times previousl	v	
To: 03-Dec-21	Controls: Moderate	у	
10.03 500 21	Breach risk rating: 2		
Audit risk rating		le for audit risk ratin	σ
Addit Hak lating			
Low	The controls have improved during occurring to check status dates are rated as moderate, as the processes	applied correctly bein	_
	The audit risk rating is low as the vo small in comparison to the sample of		correct active status dates is
Actions tak	en to resolve the issue	Completion date	Remedial action status
Customer Networks ar required new commer this has been made sir to be able to change the	an 1 active customer are and to change billing structures cial arrangements. Progress on ace the last audit and we hope the billing structure to be the by the end of April 2022.	30/4/2022	Identified
April and August which limited number of peo This resulted in long do between April and August which was significantly in staffing from mid August which was significantly in staffing from mid August was significantly in staffing from mid August which was significantly and significantly was significantly in staffing from mid August which was significantly and significantly was significantly was significantly and significantly was significantly and significantly was significantly was significantly and significantly was	s were switched out between in put a lot of pressure on the ple within the Operations Team. elays in registry status updates gust. Data quality during this y low however since an increase ugust, this has reduced the is. The Operations Team Lead is ontrol.	31/03/2022	
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
All new customer netw	vorks will be set up to be	Ongoing	

Salesforce view created for the Operatons Team Lead
to monitor all field services jobs. We also import the
EDA file so we have visibility with late registry updates
- this is used to provide ongoing coaching to
Operations team members and refine processes.

Management of "inactive" status			
Non-compliance		Description	
Audit Ref: 3.9	SIMP		
With: Clause 19	One incorrect inactive status update applied.		
Schedule 11.1	SELS		
	Three of the five ICPs set to the inactive vacant status were corrections to the first active date. The status events should have been reversed and taken straight to active.		
	Potential impact: Low		
	Actual impact: Low		
	Audit history: Once previously		
From: 04-Apr-21	Controls: Moderate		
To: 03-Dec-21	Breach risk rating: 2		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls have improved during the audit period with regular monitoring occurring to check status dates are applied correctly being reinstated. Controls are rated as moderate, as the processes are manual. The audit risk rating is low as the volume of ICPs with incorrect inactive statuses applied was small and had no impact on reconciliation.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of peot This resulted in long dibetween April and Augueriod was significantly in staffing from mid-Augueriod was significantly was signific	s were switched out between in put a lot of pressure on the ople within the Operations Team. elays in registry status updates gust. Data quality during this y low however since an increase ugust, this has reduced the es. The Operations Team Lead is control.	31/03/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
to monitor all field ser EDA file so we have vis - this is used to provid	ed for the Operations Team Lead vices jobs. We also import the sibility with late registry updates e ongoing coaching to obers and refine processes.	Ongoing	

Losing trader must provide final information - standard switch			
Non-compliance	Description		
Audit Ref: 4.3 With: Clause 5 Schedule 11.3	 one transfer CS file contained incorrect last actual read date, and one transfer CS file contained the incorrect average daily kWh figure and the incorrect last read date. SELS two E2 breaches, one transfer CS file contained a negative average daily consumption figure, one transfer CS files contained an incorrect average daily kWh of the sample of five ICPs with a greater than 200kWh average daily consumption, two ICPs of the three transfer CS files checked were sent with the incorrect final read resulting in consumption being pushed to the gaining trader. SELX two ICPs of a sample of 13 transferred ICPs with the incorrect last read type of "E" 		
	Potential impact: Medium		
	Actual impact: Low		
From: 01-Mar-21 To: 03-Dec-21	Audit history: Multiple times Controls: Moderate Breach risk rating: 2		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are assessed to be moderate. The manual processing of CS files will always have the possibility of human error. Staff levels have been increased and controls are in place to mitigate to an acceptable level. The impact is assessed to be low based on the number of exceptions identified in the population examined and samples checked.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
A large number of ICPs were switched out between April and August which put a lot of pressure on the limited number of people within the Operations Team. Data quality during this period was significantly low however since an increase in staffing from mid August, this has reduced the number of late updates. The Operations Team Lead is also acting as quality control.		31/03/2022	Identified
Preventative actions tal	ken to ensure no further issues will occur	Completion date	
Automation of the CS file generation process is scoped for development in 2022 and will go through the material change audit process. In the meantime additional resource was added to the operational team between June 2021 - October 2021. And the team have developed a spreadsheet to use		Ongoing	

for bulk-switch outs which calculates the Estimated	
Daily Consumption & Last Actual Read Type for the	
users. Additional quality checks have also been added	
to the switching processes since the period in	
question.	

Retailers must use same reading - standard switch			
Non-compliance		Description	
Audit Ref: 4.4	SELS		
With: Clause 9	One AC breach.		
Schedule 11.3	Potential impact: Low		
	Actual impact: Low		
	Audit history: Once previously		
From: 09-Aug-21	Controls: Strong		
To: 09-Aug-21	Breach risk rating: 1		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are rated as strong as t	these are monitored	closely.
	The impact is low as there was only confirmed as compliant.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of people Data quality during the however since an increase this has reduced the new part of the second	s were switched out between th put a lot of pressure on the ople within the Operations Team. is period was significantly low ease in staffing from mid August, number of late updates. The d is also acting as quality control.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
In the meantime addit operational team between the material change at the material change at the material change at the meantime addit operational team between team have developed switch outs which calculated to the consumption & Last A Additional quality chemical change at the material change at	/AC file generation process is ent in 2022 and will go through udit process. cional resource was added to the ween Aug/Sept 2021. And the a spreadsheet to use for bulk-culates the Estimated Daily actual Read Type for the users. cks have also been added to the nce the period in question.	Ongoing	

Gaining trader informs registry of switch request - switch move			
Non-compliance	Description		
Audit Ref: 4.7 With: Clause 9	SELS One NT file was issued more than two business days after pre-conditions were		
Schedule 11.3	cleared of the 21 NT files sampled.		
	Potential impact: Low		
	Actual impact: Low		
	Audit history: Three times previous	У	
From: 19-Jul-21	Controls: Strong		
To: 20-Sep-21	Breach risk rating: 1		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are rated as strong as the sending of NT files is monitored throughout the business day to ensure that these are sent to the registry within the required timeframe.		
	The impact is low as only one incide 21 NT files sampled	ent of a late NT file w	as identified of the total of
Actions ta	Actions taken to resolve the issue Completion date Remedial action state		
A large number of ICI	Ps were switched out between		Identified
April and August which	ch put a lot of pressure on the		
limited number of pe	ople within the Operations Team.		
, ,	nis period was significantly low	31/03/2022	
	rease in staffing from mid August,		
	number of late updates. The dis also acting as quality control.		
Preventative actions to	aken to ensure no further issues will occur	Completion date	
as well as daily check breach report to be of Automation of the N	people across the switching area ins and monitoring of Registry ompliant in this area. If file generation process is due 022 and will go through the t process.	Ongoing	

Losing trader provides information - switch move			
Non-compliance		Description	
Audit Ref: 4.8	SELS		
With: Clause 10(1) Five T2 breaches.			
Schedule 11.3	Potential impact: Low		
	Actual impact: Low		
	Audit history: Twice		
From: 21-Jun-21	Controls: Strong		
To: 13-Jul-21	Breach risk rating: 1		
Audit risk rating	Rational	le for audit risk ratin	g
Low	The controls are rated as strong. The	iese files are monitor	red as part of BAU daily.
	The audit risk rating is low as the fiv		
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of people Data quality during the however since an increase this has reduced the n	s were switched out between in put a lot of pressure on the ple within the Operations Team. It is period was significantly low ease in staffing from mid August, umber of late updates. The it is also acting as quality control.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
for development in 20 material change audit In the meantime addit operational team betwithe team have developed bulk-switch outs which consumption & Last A incl Multipliers. Addit	file generation process is scoped 22 and will go through the process. cional resource was added to the veen August/Sept 2021. And ped a spreadsheet to use for a calculates the Estimated Daily ctual Read Type for the users ional quality checks have also tching processes since the	Ongoing	

Losing trader must provide final information - switch move				
Non-compliance	Description			
Audit Ref: 4.10 With: Clause 11 Schedule 11.3	 two of a sample of five ICPs checked with an average daily kWh value of greater than 200 kWh had an incorrect average daily consumption, five of a possible 14 switch move CS files contained the incorrect read type of "E", two switch move CS files contained the incorrect read type of "A", and one of a typical sample of three CS files checked found one with the incorrect average daily kWh figure. SELS three of a sample of 13 ICPs checked had an incorrect average daily consumption, and five of a possible 17 switch move CS files contained the incorrect read type 			
	 SELX one of a sample of five ICPs consumption, five of a possible 22 switch of "E", and one switch move CS file con 	of "E". SELX one of a sample of five ICPs checked had an incorrect average daily consumption, five of a possible 22 switch move CS files contained the incorrect read type		
	·	Potential impact: Low		
	Actual impact: Low			
	Audit history: Multiple times			
From: 01-Mar-21	Controls: Moderate			
To: 03-Dec-21	Breach risk rating: 2			
Audit risk rating	Rationa	le for audit risk ratin	g	
Low	The controls are assessed to be modalways have the possibility of huma controls are in place to mitigate to a	n error. Staff levels h	-	
	The impact is assessed to be low ba the population examined and samp		f exceptions identified in	
Actions ta	ken to resolve the issue	Completion date	Remedial action status	
A large number of ICPs were switched out between April and August which put a lot of pressure on the limited number of people within the Operations Team. Data quality during this period was significantly low however since an increase in staffing from mid Aug/Sept 2021, this has reduced the number of late updates. The Operations Team Lead is also acting as quality control.		31/03/2022	Identified	

Preventative actions taken to ensure no further issues will occur	Completion date
Automation of the CS file generation process is scoped for development in 2022 and will go through the material change audit process.	
In the meantime additional resource was added to the operational team between August/Sept 2021. And the team have developed a spreadsheet to use for bulk-switch outs which calculates the Estimated Daily Consumption & Last Actual Read Type for the users. Additional quality checks have also been added to the switching processes since the period in question.	Ongoing

Gaining trader changes to switch meter reading - switch move			
Non-compliance	Description		
Audit Ref: 4.11 With: Clause 6(1) and 6A Schedule 11.3 From: 09-Aug-21	 SELS eight RR breaches, and ICP 0003727038WF438 has the incorrect read type of "A" instead of "E" in Datahub and Madras. Potential impact: Low Actual impact: Low Audit history: Multiple times Controls: Moderate 		
To: 23-Nov-21	Breach risk rating: 2		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are rated as moderate as BAU processes are bedded in and there is sufficient resource to manage switching. The impact is low as there was only one late AC file recorded and data accuracy was confirmed as compliant.		
Actions tak	Actions taken to resolve the issue Completion date Remedial action st		
April and August which limited number of people Data quality during the however since an increase this has reduced the number of people and the people of th	s were switched out between h put a lot of pressure on the ople within the Operations Team. is period was significantly low ease in staffing from mid August, umber of late updates. The dis also acting as quality control.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
for development in 20 material change audit In the meantime addit operational team betwithe team have develop bulk-switch outs which Consumption & Last A incl Multipliers. Addit	file generation process is scoped 22 and will go through the process. cional resource was added to the veen August/Sept 2021. And ped a spreadsheet to use for a calculates the Estimated Daily ctual Read Type for the users ional quality checks have also itching processes since the	Ongoing	

Withdrawal of switch requests			
Non-compliance	Description		
Audit Ref: 4.15	SIMP		
With: Clauses 17 and	Three incorrect NW withdrawal reason codes.		
18 Schedule 11.3	SELS		
	Six NA breaches.		
	Two AW breaches.		
	Two incorrect NW withdrawal reason codes.		
	SELX		
	One SR breach.		
	One NW request issued in error.		
	Four incorrect NW withdrawal reason	on codes.	
	Potential impact: Low		
	Actual impact: Low		
From: 01-Mar-21	Audit history: Multiple times		
To: 03-Dec-21	Controls: Strong		
	Breach risk rating: 1		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are rated as strong as BAU processes are bedded in and there is sufficient resource to manage switching.		
	The impact is assessed to be low be late, or with incorrect codes.	cause a small propor	tion of NWs were issued
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August 2021 the limited number of Team. Data quality du impacted however sin 2021, we now have a	s were switched out between which put a lot of pressure on staff within the Operations ring this period was negatively ce increase in staffing from Sept dedicated staff member working ne Operations Team Lead as back.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
different codes and wi following the recent a learnt recently that N	have been updated around the hen they should be applied udit, including what we have WDF must only be used for CE to be used instead - all teams	Ongoing	

are across the different NW codes and when they	
must be applied. Automation of the NW file	
generation process is scoped for development in 2022	
and will go through the material change audit process.	

Metering information			
Non-compliance	Description		
Audit Ref: 4.16	SIMP		
With: Clause 21 Schedule 11.3	All five ICPs sampled of a possible 14 for the date before the switch event "E".		
	Two switch move ICPs with the inco error.	rrect read type of "A	" applied due to human
	SELS		
	All five ICPs sampled of a possible 2: the date before the switch event da		
	All five ICPs sampled of a possible 1 for the date before the switch eventure."		
	Two CS files of a sample of six check resulting in 79 kWh being pushed to period.		
	SELX		
	Two ICPs of a sample of 13 transferred ICPs with the incorrect last read type of "E"		
	All five ICPs sampled of a possible 22 for the date before the switch eventue."		
	One switch move ICP with the incor error.	rect read type of "A"	applied due to human
	Potential impact: Low		
From: 01-Mar-21	Actual impact: Low		
To: 03-Dec-21	Audit history: Once previously		
	Controls: Moderate		
	Breach risk rating: 2		
Audit risk rating	Rational	e for audit risk ratin	g
Low	The controls are assessed to be mod always have the possibility of huma controls are in place to mitigate to a	n error. Staff levels h	_
	The impact is assessed to be low, the difference between the applied and correct readings was small.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
A large number of ICPs were switched out between April and August which put a lot of pressure on the limited number of people within the Operations Team. Data quality during this period was significantly low however since an increase in staffing from mid August,		31/03/2022	Identified

this has reduced the number of late updates. The Operations Team Lead is also acting as quality control.	
Preventative actions taken to ensure no further issues will occur	Completion date
Automation of the CS file generation process is scoped for development in 2022 and will go through the material change audit process.	
In the meantime additional resource was added to the operational team between August/Sept 2021. And the team have developed a spreadsheet to use for bulk-switch outs which calculates the Estimated Daily Consumption & Last Actual Read Type for the users incl Multipliers. Additional quality checks have also been added to the switching processes since the period in question.	Ongoing

NHH meter reading appl	ication		
Non-compliance		Description	
Audit Ref: 6.7 With: Clause 6 Schedule 15.2	five switch event readings classified as estimates when two MI switches with an inclassified as actuals when the second sec	en they were actuals, acorrectly classified so they were estimates. of a possible 23 TR so they were actuals, of a possible 17 MI so they were actuals, after CS files checked were actuals.	and witch event reading witches were incorrectly witches were incorrectly and were sent with the incorrect
From: 01-Mar-21 To: 03-Dec-21	they were actuals,	of a possible 22 MI sen they were actuals,	and
	Actual impact: Low Audit history: Twice Controls: Moderate Breach risk rating: 2		
Audit risk rating	Rationa	le for audit risk ratin	g
Low	The controls are recorded as model The impact on settlement and parti is low.		·
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of peo Data quality during thi however since an increthis has reduced the n	s were switched out between in put a lot of pressure on the ple within the Operations Team. Is period was significantly low ease in staffing from mid August, umber of late updates. The is also acting as quality control.	31/03/2022	Identified
Preventative actions tak	cen to ensure no further issues will occur	Completion date	
	file generation process is scoped 22 and will go through the	Ongoing	

material change audit process.	
In the meantime additional resource was added to the operational team between August/Sept 2021. And the team have developed a spreadsheet to use for bulk-switch outs which calculates the Estimated Daily Consumption & Last Actual Read Type for the users incl Multipliers. Additional quality checks have also been added to the switching processes since the period in question.	

Interrogate meters once			
Non-compliance		Description	
Audit Ref: 6.8	SIMP		
With: Clause 7(1) and (2) Schedule 15.2	One ICP unread during the period of supply, the best endeavours requirements were not met, and exceptional circumstances did not exist.		
	SELS		
	For 12 ICPs unread during the period of supply, the best endeavours requirements were not met, and exceptional circumstances did not exist.		
	Potential impact: Low		
	Actual impact: Low		
From: 01-Mar-21	Audit history: Multiple times		
To: 01-Dec-21	Controls: Moderate		
.0.02 200 22	Breach risk rating: 2		
Audit risk rating	Rationale for audit risk rating		
Low	The controls are rated as moderate. There is a process in place, but compliance is not consistently achieved if the period of supply is short, or actual reads fail validation because they are lower than previous estimates.		
	The impact on settlement from an estimate for a short period is minor, therefore the audit risk rating is low.		
Actions take	ken to resolve the issue Completion Remedial action status date		
We are now receiving a	n automated report at the start		Identified
_	ows us to easily identify unread	5/03/2022	
sites.			
Preventative actions tak	en to ensure no further issues will	Completion	
	occur	date	

Actions taken to resolve the issue	date	Remedial action status
We are now receiving an automated report at the start of each month which allows us to easily identify unread sites.	5/03/2022	Identified
Preventative actions taken to ensure no further issues will occur	Completion date	
Analysis is performed each month and any unread meters and the no read reasons are sent to the White Label customers for investigation and to provide further information to aid with gaining a successful read ongoing. Any updated information regarding the meter location or access instructions is updated and sent through to Wells.	5/03/2022	

Identification of reading	gs.		
Non-compliance		Description	
Audit Ref: 9.1 With: Clause 3(3) Schedule 15.2 From: 01-Mar-21 To: 03-Dec-21	 SIMP five switch event readings of a possible 14 MI switches were incorrectly classified as estimates when they were actuals. two switch event readings of a possible 14 MI switches were incorrectly classified as actuals when they were estimates. SELS five switch event readings of a possible 23 TR switches were incorrectly classified as estimates when they were actuals, and five switch event readings of a possible 17 MI switches were incorrectly classified as estimates when they were actuals. SELX two TR switch event readings were incorrectly classified as estimates when they were actuals, and five switch event readings of a possible 22 MI switches were incorrectly classified as estimates when they were actuals. Potential impact: Low Actual impact: Low Audit history: Multiple times Controls: Moderate Breach risk rating: 2 		
Audit risk rating	-	le for audit risk ratin	g
Low	The controls are recorded as moderate overall but there is room for improvement. The impact on settlement and participants is minor; therefore, the audit risk rating is low.		
Actions tak	en to resolve the issue	Completion date	Remedial action status
April and August which limited number of people Data quality during the however since an increthis has reduced the new people and the people of the people o	s were switched out between h put a lot of pressure on the ople within the Operations Team. is period was significantly low ease in staffing from mid August, number of late updates. The d is also acting as quality control.	31/03/2022	Identified
Preventative actions ta	ken to ensure no further issues will occur	Completion date	
for development in 20 material change audit	file generation process is scoped 122 and will go through the process.	Ongoing	

operational team between August/Sept 2021. And	
the team have developed a spreadsheet to use for	
bulk-switch outs which calculates the Estimated Daily	
Consumption & Last Actual Read Type for the users	
incl Multipliers. Additional quality checks have also	
been added to the switching processes since the	
period in question.	

Half hour estimates			
Non-compliance		Description	
Audit Ref: 9.4	SELS		
With: Clause 3(5) of schedule 15.2	HHR estimate was not reasonable a patterns for ICP 0000014504EACAF which has since been corrected.		•
	Estimates not replaced with actuals register read.	if the replacement f	ile does not contain a
	Potential impact: Medium		
	Actual impact: Medium		
	Audit history: Once		
From: 01-Jun-20	Controls: Moderate		
To: 01-Dec-21	Breach risk rating: 4		
Audit risk rating	Rationa	le for audit risk ratin	g
Medium	The controls are rated as moderate improvement.	and will mitigate risl	k but there is room for
	The audit risk rating is rated as med direct impact on submission accura		stimation process have a
Actions ta	ken to resolve the issue	Completion date	Remedial action status
estimated HHR volume to a user error where incorrectly and this version. Issue 2 was due to a vulnerability - a user a data stream twice; in time for the revision development change other users can do the streams were identified.	es in the calculation of mes for this ICP. Issue 1 was due a reading was entered was corrected in time for the user error and a system incorrectly assigned volumes to this had to be corrected by Axos on and Axos also implemented as at the same time to ensure no his in future. 38 other data fied as having been impacted by and all were corrected as part	31/08/2021	Identified

Preventative actions taken to ensure no further issues will occur	Completion date
An additional check will be implemented in the Axos Datahub system to ensure that readings which fail validation are not used in HHR estimate creation. Other system vulnerability was addressed in August 2021.	30/09/2022

Electronic meter readings and estimated readings				
Non-compliance	C	escription		
Audit Ref: 9.6	SELS			
With: Clause 17	AMI event logs are not routinely revie	ewed.		
Schedule 15.2	Potential impact: Low			
	Actual impact: Low			
From: 01-Mar-21	Audit history: Three times previously			
To: 01-Dec-21	Controls: Moderate			
	Breach risk rating: 2	Breach risk rating: 2		
Audit risk rating	Rationale	for audit risk rati	ng	
Low	The controls are recorded as moderate because they mitigate risk most of the time but there is room for improvement.			
	The impact on settlement and particilis low.	pants is minor; th	erefore, the audit risk rating	
Actions ta	ken to resolve the issue	Completion date	Remedial action status	
			Investigating	
Preventative actions taken to ensure no further issues will occur		Completion date		
warehouse solution v	king to implement a data which will automatically pull and in tandem with Half Hour ta management system to flag investigation.	30/09/2022		

Calculation of ICP days				
Non-compliance	С	escription		
Audit Ref: 11.2	SELS			
With: Clause 15.6	ICP days were not reported correctly	one NSP.		
	SELX			
	ICP days were not reported correctly one NSP.			
	Potential impact: Low			
	Actual impact: Low			
	Audit history: Twice previously			
From: 01-Mar-21	Controls: Moderate			
To: 01-Dec-21	Breach risk rating: 2			
Audit risk rating	Rationale	for audit risk rati	ng	
Low	The controls are rated as moderate. Resource constraints have been addressed and the BAU checks are being carried out but due to the manual processes in place there is still the risk of human error.			
	The impact is assessed to be low beca	The impact is assessed to be low because corrected data will be washed up.		
Actions tal	ken to resolve the issue Completion Remedial action status date			
All ICP Days discrepand	cies are investigated at each		Identified	
· · · · · · · · · · · · · · · · · · ·	and since August 2021 all	8/03/2022		
· ·	npted to be resolved in that	0/03/2022		
revision period				
Preventative actions ta	ken to ensure no further issues will occur	Completion date		

Accuracy of submission			
Non-compliance	C	escription	
Audit Ref: 12.7 With: Clause 15.12	Invalid permanent estimate readings a code change made by AXOS resul inaccuracies will be washed up throug	ting in an +/-1%	submission variance. These
	Some submission data was inaccurat opportunity.	e and was not co	orrected at the next available
	EMS acting as an agent of Simply En days for consumption months July shouldn't have been volumes submitt NHH customers since May 2021.	2021 (R3) and S	September 2021 (R1). There
	Potential impact: Medium		
	Actual impact: Medium		
	Audit history: Multiple times		
From: 20-Oct-21	Controls: Moderate		
To: 01-Dec-21	Breach risk rating: 4		
Audit risk rating	Rationale	for audit risk rati	ng
Medium	Controls are rated as moderate as the period but there is still room for impro		en improved during the audit
	The impact is assessed to be medium	based on the imp	act on submission accuracy.
Actions ta	ken to resolve the issue	Completion date	Remedial action status
The permanent estima	ate readings were cleared from our /9/2021.	14/09/2021	Investigating
Incorrect data was ren Manager.	noved by the Reconciliation	15/10/2021	
Preventative actions to	aken to ensure no further issues will occur	Completion date	
			1

2. A review of processes has been done and we are working on removing the need for manual intervention, allowing more time before submission is due and allowing additional time for final checks by all parties.

Permanence of meter readings for reconciliation						
Non-compliance	Description					
Audit Ref: 12.8 With: Clause 4 Schedule 15.2	SIMP, SELX and SELS Some estimates are not replaced at R14. Permanent estimates not calculated correctly resulting in inaccurate apportionment in volumes.					
From: 01-Mar-21 To: 03-Dec-21	Potential impact: Medium Actual impact: Medium Audit history: Multiple times Controls: Moderate Breach risk rating: 4					
Audit risk rating	Rationale for audit risk rating					
Medium	The controls are considered moderate. The processes have been strengthened during the audit period but there is still room for improvement. The impact is assessed to medium due to the impact on submission accuracy.					
Actions taken to resolve the issue		Completion date	Remedial action status			
The permanent estimate readings were cleared from our NHH DA system on 14/9/2021.		14/09/2021	Investigating			
Preventative actions taken to ensure no further issues will occur		Completion date				
A safeguard was included in this code change to the logic used to send readings from the Datahub system to the NHH DA system which means any new read types will be automatically ignored by this process and a user will have to apply for another code change to include new read types in future. Controls in place managing this process will ensure a Material Change Audit is completed where required before any code changes are developed.						

Historical estimates and forward estimates					
Non-compliance	Description				
Audit Ref: 12.10 With: Clause 3 Schedule 15.3	Where SASV profiles are not available labelled as forward estimate. Potential impact: Medium Actual impact: Medium	le, consumption bas	ed on validated readings is		
From: 01-Jun-20	Audit history: Multiple times				
To: 01-Dec-21	Controls: Moderate				
	Breach risk rating: 4				
Audit risk rating	Rationale for audit risk rating				
Medium	The controls are recorded as moderate because historic and forward estimate is correctly identified most of the time. There is a medium impact on settlement because shape files are not used for the SFI and SBL profiles.				
Actions taken to resolve the issue		Completion date	Remedial action status		
Profile shapes for UML and PV1 are now imported to Madras, this will in time label these as Historical Estimates.		30/11/2021	Identified		
Preventative actions taken to ensure no further issues will occur		Completion date			
A material change audit is planned around unmetered load which will report all NHH Volumes as 100% HE.		30/04/2022			

Historical estimate reporting to RM					
Non-compliance	Description				
Audit Ref: 13.3 With: Clause 10 of schedule 15.3 From: 01-May-20 To: 30-Jun-21	SIMP, SELX and SELS Historic estimate targets were not repotential impact: Medium Actual impact: Low Audit history: Multiple times Controls: Moderate Breach risk rating: 2	net for all months an	d revisions.		
Audit risk rating	Rationale for audit risk rating				
Low	 The controls are considered moderate because: meter reading read attainment is high, and most of the forward estimate checked was historic estimate, which was mislabelled as forward estimate because shape files were unavailable for the ICP's profile. The impact of the non-compliance is dependent on the accuracy of the estimates applied. There are sound estimation processes, therefore I have recorded the audit risk rating as low. 				
Actions tak	en to resolve the issue	Completion date	Remedial action status		
Monthly reporting of ICPs with no read events has started which will ultimately reduce the number of ICPs using forward estimates.		31/01/2022	Identified		
Preventative actions taken to ensure no further issues will occur		Completion date			
Continuous work on no read events to reduce the number of ICPs not read at 12 months to nil.		9/03/2022			