

GDN Collaborative Vulnerability & Carbon Monoxide Allowance (VCMA)

Project Eligibility Assessment (PEA)

Marie Curie – Energy safeguarding and tackling fuel poverty for terminally ill people

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04/08/2022

Gas Network Vulnerability & Carbon Monoxide Allowance (VCMA) Governance Document - Project Eligibility Criteria

Sectio repair	n 1 - Eligibility criteria for company specific projects (other than condemned essential g and replacement)	as appliance
In orde	er to qualify as a VCMA project, a project must:	
VCMA	Eligibility Criteria	Criteria Satisfied (Yes/No)
a)	Have a positive, or forecasted positive Social Return on Investment (SROI), including for the gas consumers funding the VCMA project;	YES
b)	 Either: i. Provide support to consumers in vulnerable situations, and relate to energy safeguarding, or ii. Provide awareness on the dangers of CO, or iii. Reduce the risk of harm caused by CO; 	YES
c)	Have defined outcomes and the associated actions to achieve these;	YES
d)	Go beyond activities that are funded through other price control mechanism(s) or required through licence obligations; and	YES
e)	Not be delivered through other external funding sources directly accessed by a GDN, including through other government (national, devolved or local) funding.	NA
	n 2 - Eligibility criteria for company specific essential gas appliance servicing, repair and ement projects	d
	er to qualify as a VCMA project, unsafe pipework and essential gas appliance servicing, repair on the following criteria:	or replacement
a)	A GDN has to isolate and condemn unsafe pipework or an essential gas appliance following a supply interruption or as part of its emergency service role;	NA
b)	The household cannot afford to service, repair or replace the unsafe pipework or essential gas appliance; and;	NA
c)	Sufficient funding is not available from other sources (including national, devolved or local government funding) to fund the unsafe pipework or essential gas appliance servicing, repair or replacement.	NA
Sectio	n 3 - Eligibility criteria for collaborative VCMA projects	
In orde	er to qualify as a collaborative VCMA project, a project must:	
a)	Meet the above company specific and boiler repair and replace (if applicable) project eligibility criteria;	YES
b)	Have the potential to benefit consumers on the participating networks; and	YES
c)	Involve two, or more, gas distribution companies.	YES

Gas Network Vulnerability and Carbon Monoxide Allowance (VCMA) Governance Document - Project Registration Table 2

Information Required	Description				
Project Title	Energy safeguarding and tackling fuel poverty for terminally ill people				
Funding GDN(s)	The GDN(s) which register(s) the VCMA project				
Role of GDN(s) *For Collaborative VCMA Projects only	The specific role(s) of GDN(s) participating in a collaborative VCMA Project Lead: SGN Supported by Cadent, NGN and WWU				
Date of PEA Submission	04/08/2022				
VCMA Project Contact Name, email and Number	Kerry Potter Kerry.potter@sgn.co.uk				
Total Cost (£k)	Total - £1,780,825 plus VAT Year 1 - £675,000 plus VAT + £5,825 SROI assessment Year 2 - £550,000 plus VAT Year 3 - £550,000 plus VAT				
Total VCMA Funding Required (£k)	Total - £1,780,825 plus VAT Year 1 - £675,000 plus VAT + £5,825 SROI assessment Year 2 - £550,000 plus VAT Year 3 - £550,000 plus VAT Funding breakdown				
	Network	Year 1	Year 2	Year 3	Total
	Cadent	£339,092.38	£273.933.55	£273,933.55	£886,959.48
	NGN SGN	£78,679.55 £184,306.13	£63,560.76 £148,890.50	£63,560.76 £148,890.50	£205,801.07 £482,087.13
	WWU	£78,746.94	£63,615.19	£63,615.19	£205,977.32
Problem(s)	who are terminally Terminally ill peop Their deteriorating sufficiently, which significant costs a	uence of living in erm conditions, a y ill fall into sever ole are a risk of b g health means th some may strug issociated with th can lead to new i	a cold housing are and people with lo al, if not all, of the eing connected to ney must spend m gle to afford due to eir illness. The co nfections, make e	o older people, tho ow or declining inc ese categories. The vicious cycle nore money to hea to depleted incom onsequences of live existing symptoms	e of fuel poverty. at their homes es and the other <i>r</i> ing in a cold home flare up or become
	workforce and am during the last five Marie Curie Nurse person's physical advanced or life-li For example, hou over 40% of all fu	light on the scale ong those who re e years who said es who have care health worse. Ou miting illnesses a seholds with som el poor househol	of the problem. Wesponded, 28% h they were strugg ed for patients in f ur findings reinford are particularly vu neone with a long ds in England. ⁽²⁾	Ve surveyed our of ave provided care ling with heating of uel poverty believ ce other evidence Inerable to experie -term illness or dis With the current of	community nursing e to a dying patient costs. ⁽¹⁾ 38% of e it made the that those with encing fuel poverty. sability account for

	In 2021/22, Marie Curie answered 16,589 calls and webchats through our support line and 13% of these were regarding benefits or money issues. Since April 2022, this percentage has risen to 16.5%. Marie Curie is currently unable to provide financial advice and we only provide light-touch information on fuel poverty and benefits on our website. If the call is about a cancer patient, we signpost them to Macmillan Cancer Support but for other terminal illnesses, there are few areas we can signpost to. Marie Curie's Registered Nurses and Health Care Assistants (HCAs) can be the key to identifying households in need to support. Each year our nurses and HCAs visit between 30,000-45,000 households with terminally ill people in. The patients they support are all at a high risk of being in, or falling into fuel poverty, but may not be receiving the right support. Our nurses and HCAs are trusted by our patients and can help make sure that they receive support on energy through our Information & Support service and get signed up to the Priority Services Register.
	After receiving a terminal diagnosis, people should be able to concentrate on the things that matter – making the most of the time they have left, creating new memories with loved ones and putting their affairs in order. They shouldn't have to worry about whether they can afford to keep their house warm.
	Urgent action is needed provide energy safeguarding support and tackle fuel poverty amongst terminally ill people. It is unacceptable that any dying person should spend the end of their life in cold, damp, and uncomfortable conditions – deprived of the best possible end of life experience because of unaffordable heating costs.
	 References (1) Marie Curie (2020). <u>The vicious cycle of fuel poverty and terminal illness.</u> (2) Office for National Statistics (2020). Annual fuel poverty statistics in England, 2020 (2018 data).
Scope and Objectives	Delivered in partnership with Marie Curie, and co-funded by the four UK Gas Distribution Networks (GDN's), aims to identify and support terminally ill people and their families that are suffering from fuel poverty with dedicated support and advice. There are four key areas that Marie Curie will deliver on through this partnership. These are:
	 Improving information and support on fuel poverty Marie Curie will recruit a member of staff to the I&S team on a fixed term contract for the duration of this partnership to undertake the following tasks: Provide training to I&S staff on how to deal with energy related questions, how to support our beneficiaries to use the benefits calculator, access to the Warm Home Discount Scheme, Cold Weather Payments, Winter Fuel Payments and triage energy related enquiries. Deal with enquiries on a case-by-case basis relating to fuel poverty to ensure the best possible support and information is provided to enable the beneficiaries to get out of fuel poverty and access the necessary financial support. Work alongside the GDNs to improve and create new information resources on the Marie Curie website to help terminally people and their families understand how to increase their energy resilience, access the correct financial support and safeguarding support, such as eligibility for the Priority Services Register.
	 2. Priority Services Register Marie Curie promotes the Priority Services Register (PSR) to the households it supports. The Priority Services Register give vulnerable households immediate support in the event of emergencies such as power cuts. All of the households Marie Curie supports will be eligible for the PSR. A power cut without immediate support could be catastrophic to a terminally person's household. Marie Curie will promote the PSR through: Including the PSR in the list of prompts for our I&S service when dealing with calls or webchat enquiries.

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	 Providing training to the Community Nurses, Health Care Assistants (HCAs) and Helper Volunteers to increase their understanding and awareness of the PSR. The Nurses, HCAs and Helper Volunteers will be encouraged to ask the households they support if they are signed up to the PSR. If they are not signed up, staff/volunteers will encourage the patient, carers or family members to sign the household up whilst they are with them. In certain circumstances, the staff will sign the patient up if another member of the household is unable to do so. Communications through the Marie Curie social media channels, email, and magazine to promote the PSR to a wider audience. Providing information resources on the Marie Curie website about the PSR and referencing it where appropriate on related webpages.
	3. Identifying households in fuel poverty and providing support Provide training and support to Community Nurses, Health Care Assistants (HCAs) and Helper Volunteers on how to spot signs of a household suffering from fuel poverty, how to react and where to report it to. Assessing where the household is potentially suffering from fuel poverty will be built into the risk assessment Community Nurses & HCAs conduct when visiting a home.
	 This training will be led by Marie Curie and rolled out through L&D. Training content will likely be webinars or modules with video content. The GDNs will support the development of the content with their expertise. Reporting the household in need to Marie Curie will go through to our I&S Energy Line who will be able to contact and support the household to access the right support and information.
	We will run a 3-month pilot with a place-based team in the UK. We will conduct evaluation to ensure the training and in-home support is effective.
	<u>4. Reaching groups most likely to be suffering from fuel poverty</u> Following recent research conducted by Marie Curie, working aged people at the end of life are twice as likely to be in poverty than those of pension age. 2 in 5 working aged people from minority ethnic groups die below the poverty line. Working aged people with children are more likely than any other group to fall below the poverty line at the end of life. As these groups are most at risk of fuel poverty at end of life, it is essential that we reach these groups with this partnership.
	 To achieve this, we will: Include in training to I&S staff so they are aware of the groups most at risk and can ask questions about fuel poverty when supporting enquiries from these groups. Include in the training for Community Nurses so when they are supporting patients from these groups, they will be more aware of the importance of referring them to I&S and the Priority Services Register. Targeted communications to reach those most likely to be a risk. Focused projects in our place-based locations with a higher portion of people from an ethnic minority background.
Why the Project is Being Funded Through the VCMA	This project operates across all the GDN networks and aligns to our collective GDN strategic ambition to support vulnerable customers most in need of help to maintain a safe and warm home and to access key services designed to meet their needs including the Priority Services Register. This project meets the VCMA eligibility criteria as it will provide energy safeguarding for those most in need through a defined set of outcomes. The initiative will proactively support customers with tailored access the help they need to live in a safe and warm home ensuring that the funding achieves a positive Social Return on Investment.
Evidence of Stakeholder/Customer Support	Marie Curie Research and client feedback In 2020 Marie Curie released the report 'The vicious cycle of fuel poverty and terminal illness' ⁽¹⁾ which provides an overview of some of the drivers and impacts of fuel poverty among people living with terminal illnesses, as well as setting out the case for change

and policy recommendations that would help reduce the number of dying people who can't afford to heat their homes.
 As a result of the lack of data on fuel poverty rates among terminally ill people, Marie Curie surveyed our community nursing workforce and received the following results ⁽¹⁾: 65% of Marie Curie community nurses believed that they had supported patients in the last year who were struggling to make ends meet financially. 38% of Marie Curie Nurses who have cared for patients in fuel poverty believe it made the person's physical health worse. 17% of Marie Curie Nurses who have cared for patients in fuel poverty believe it hastened the person's deterioration. 40% of Marie Curie Nurses who have experienced patients in fuel poverty believe it made the person's mental health worse.
Response to our community nurse survey: "On numerous occasions over the five years I have experienced different levels of fuel poverty. The pressure carers have when faced with less income and the additional cost of having to purchase things like incontinence items results in choosing between heat in the home and patient dignity. Patients can be very agitated, especially when experiencing end stage pain and body temperature changes. Some families would rather have them laden with covers than put the heating on for fear of the winter bill or increased fuel costs"
Beth is a Marie Curie Healthcare Assistant working in Greater London: "Caring for patients in the winter months presents its own challenges, particularly when you're working in houses that are freezing cold with no central heating and you have to find ways to keep the patient warm. I remember one night I spent with a patient, and it was freezing It was a struggle to go through the night, but I made sure the patient was fully covered. They have two electric heaters, so I put them by the patient to make sure they were warmer than me."
Karen's dad Patrick, from Barnsley, had terminal lung cancer and other co-morbidities: "Dad was always an outdoorsman – a strapping big guy. He loved looking after the garden and wouldn't really have been bothered by the temperature. He'd have been happy sitting in a pair of shorts and t-shirt in the house no matter what time of the year. But once he got sick, he lost a lot of weight and really started to feel the cold more. If he was watching TV or in bed, he'd need to be wrapped up in multiple layers just to be comfortable. Towards the end, the heating was on pretty much non-stop, so the bills absolutely sky rocketed."
13% of the enquiries to the Marie Curie helpline in financial year 2021/22 were about money and during this financial year, we have seen this rise to 16.5%. Joanne Lewis is a Marie Curie Support Line Office and when asked about enquiries she's been receiving about fuel poverty, she said this: <i>"I have recently had a few calls regarding this. One gentleman recently diagnosed with a terminal illness and had to give up a highly paid job due to his health. He was struggling to pay his fuel bills and had built up arrears. I told him to contact the provider and see if he would be eligible for a hardship fund and shared information on energy advice lines that could help him save money on his bills and looked at a benefit assessment to check he was receiving the correct amount of benefits to help his financial situation. I have a few other examples with similar scenarios; people concerned that their bills are rising and due to their diagnosis, they are no longer able to work, and this has impacted their income. Benefits are taking time to be processed and so debts are mounting up."</i>
SGN Customer Engagement Group and Vulnerable Steering Group Engagement During the shaping of the SGN business plan we committed to supporting over 250,000 vulnerable customers to use gas safely, affordably and efficiently. To ensure that we adapt to market conditions we continue to engage our SGN Vulnerable Steering Group (VSG), have guided us to look for communities most vulnerable where the impact is greatest, to work with existing organisations that already support those in crisis and where we are able to broaden the reach or increase the capacity of those established organisations. This partnership is supported by the VSG as it supports the most vulnerable in the community with support to join the PSR and help with maintaining a safe and warm home. In addition, the VSG are keen on building sustainable partnerships that can maintain the required support in the long term.
Cadent Vulnerability and Fuel Poverty approach Cadent conducted extensive stakeholder engagement and customer feedback in order to shape its strategy for investment of the VCMA funding, particularly centred around fuel poverty. Cadent stakeholder feedback has supported the co-design of this project as it aligns to the principle of providing customers with help with more broader welfare

	ervices, including support with alleviating fuel poverty, PSR registration, and support for ustomers living with critical illness.
po ww in da sp m is ww es to M th th th by sa co ra si au au A S S op cl ho co	IGN Strategic Workshops NGNs February 2020 annual strategic workshop, cold related ill health and fuel overty awareness was discussed as an emerging issue. During their July 2020 vorkshop, stakeholders discussed new emerging issues due to Covid-19, what the mpact of the pandemic had on hidden vulnerability and how the pandemic impacted emand for essential services to support customers in vulnerable situations. A Covid-19 pecific workshop was held in August 2020 and NGN stakeholders said some of the hain impacts had been associated with an increase in mental health issues due to social iolation, job losses, food, and fuel poverty. They also identified that larger energy bills ras an emerging issue due to the pandemic, and spending more time at home, specially during winter. They identified that there was also an increased risk of CO due on to being able to get appliances repaired or maintained because of financial hardship. Maintaining and repairing or replacing appliances was not a priority for these groups, herefore this significantly increased the risk of CO poisoning. Stakeholders said there eeded to be more focus on CO awareness, so customers understand the risks posed y not having appliances repaired or serviced. They see a strong correlation between afety and the gas networks social obligations and said that it is essential that we ontinue to raise awareness of CO, because doing so saves lives. Stakeholders also aised the point that the mental health of people living with physical disabilities had been ignificantly impacted due to lockdown. Another impact the pandemic had was on ccessing essential services for those living in vulnerable situations. In some of these reas, a GP may have been the only person providing support to priority groups. further workshop around Customer Touchpoints was held in October 2020. takeholders said that to tackle fuel poverty, gas networks needed to maximise pportunities at every-day touchpoints and daily interactions, such as GP surgeries, linics,
E of th ke su	IGN Customer Perceptions Research fach year NGN use annual Customer Perceptions Research to understand the priorities f their customers. Amongst a set of general tracker questions ie, the same questions hat are asked year on year, the evidence in the most recent research, indicated that eeping bills as low as possible ranked more highly than providing a safe and reliable upply of gas for the first time. This is a clear indication as to how concerned customers re about the cost of energy and the need for support to address these issues.
TI	DN Vulnerability Working Group This initiative is aligned to our ambition and collaborative strategy to support people most in need to access support services designed for customers in vulnerable circumstances and help those most at risk of harm by living in a cold home.
TI pa	D2 VCMA Steering Group This initiative was supported by all members of the strategic steering group as a key artnership that looks to deliver our ambitions to support those most in need via the fulnerability and Carbon Monoxide allowance.
D M	DN Collaborative VCMA Show Case Event During the 2022 Annual VCMA show case event there was overall endorsement that Marie Curie and supporting people at end of life with energy safeguards would be a ositive use of VCMA funding.
	references
R	References
	⁽¹⁾ Marie Curie (2020). <u>The vicious cycle of fuel poverty and terminal illness.</u>
Outcomes, T Associated Actions and Success Criteria	 hrough this partnership, we aim to achieve the following outputs: Train 7x I&S staff to be able to support enquiries relating to energy and money. This will lead to the following outcomes: Helping beneficiaries use the benefits calculator Helping beneficiaries use the benefits calculator
	 Understand the Warm Home Discount Scheme, Cold Weather Payments and Winter Fuel Payments and how households can be eligible so they can help beneficiaries sign up

 Understand the Priority Services Register and how households can be eligible so they can help beneficiaries sign up
Support 2,200 beneficiaries per annum through energy related enquiries to our
energy helpline.
 2,000 users per annum access each energy related resource we create for the Marie Curie website with trend analysis to demonstrate the resources' usefulness.
 9,000 completed calculations on the benefits calculator per annum to increase
household income with an additional target to identify a minimum of £1.5m of income people are entitled to.
 4,500 people per annum use the interactive Warm Homes Discount tool to reduce household expenditure on bills.
 In the first year, begin training 1,445 Community Nurses and Health Care
Assistants (HCAs) on how to spot signs of fuel poverty, how to react and where to report it to. We will aim to have all Community Nurses and HCAs trained within the first year and a half of the partnership. Thereafter train all eligible new Community Nurses and HCAs when joining Marie Curie as part of their induction process.
• In the first year, begin training 1,445 Community Nurses and HCAs on the Priority Services Register. We will aim to have all Community Nurses and HCAs trained within the first year and a half of the partnership. Thereafter train all eligible new Community Nurses and HCAs when joining Marie Curie as part of the induction preserve.
 their induction process. Last year approximately 22,500 of the homes we supported would be suitable
for our Community Nurses and HCAs to encourage to join the Priority Services Register.
Through I&S and Community Nursing, we will aim to record 5,000 conversations
about the Priority Services Register to encourage the households to sign up.
 Community Nurses and HCAs include fuel poverty in the risk assessment for 30,000-45,000 households per annum and refer households at risk of fuel poverty to I&S for additional support.
• In the first year, train 338 Helper Volunteers on how to spot signs of fuel poverty,
how to react and where to report it to. Thereafter train all new Helper Volunteers as part of their induction process.
 Train 338 Helper Volunteers on the Priority Services Register. Thereafter train all new Helper Volunteers as part of their induction process.
 Helper Volunteers support 1,000 households to sign on to the Priority Services Register each year and assess whether the household is struggling with fuel poverty.
 Collect case studies from employees about how the training they received has made a difference to our beneficiaries.
Collect case studies from beneficiaries about how the information and support
has made a difference to their lives.
 Collect case studies from ethnic minority and young families supported by the partnership.
These outputs will lead to achieving the following outcomes:
 Increase in # of beneficiaries supported with energy related enquiries on I&S helpline
 Increase in # beneficiaries accessing resources around energy from the Marie Curie website
 Increase in beneficiaries able to use the benefits calculator/increase in
beneficiaries having/ knowledge of benefits & support for energy related issues
 Increase in # of households identified as entitled to benefits Increase in I&S team knowledge in supporting beneficiaries with Warm Home
Discount Scheme, Cold Weather Payments and Winter Fuel Payments

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	 Increase in I&S team confidence in supporting beneficiaries with Warm Home Discount Scheme, Cold Weather Payments and Winter Fuel Payments Increase in I&S team knowledge around the Priority Services Register Increase in I&S team confidence in supporting beneficiaries with the Priority Services Register Increase in # nurses and HCAs trained in Priority Service Register Increase in beneficiaries signing up to the Priority Services Register Increase in community nurse, HCA and Helper Volunteer knowledge of the signs of fuel poverty, how to react and where to report it Increase in community nurse, HCA and Helper Volunteer confidence in spotting the signs of fuel poverty, how to react and where to report it Increase in the # of household supported by MC community nurses, HCAs and Helper Volunteers to sign up to the Priority Services Register Increase in fuel poverty risk assessments for households, conducted by MC nurses Increase in # of households signposted to I&S for additional support Reduction in anxiety around energy related issues Increased financial security We will survey the information and support team and community nurses before and after the training. We will do this to understand what change there has been in their knowledge and confidence at supporting people experiencing fuel poverty. We may also conduct in-depth semi-structured interviews with staff to explore how the training benefited them and the people they support. We will also survey people who contact the I&S team for energy related queries. This will explore the difference the call has made. This will be in terms of their feelings around energy and fuel poverty, and how able they now feel to deal with energy-related issues.
Project Partners and	Details of Project Partners or third-party involvement.
Third Parties Involved	SGN – Lead gas network Cadent / Northern Gas Networks / Wales & West Utilities – Collaborative partner gas networks Marie Curie – Lead delivery partner
Potential for New Learning	Working in partnership with Marie Curie will help the GDNs better understand the needs of customers who are dealing with terminal illness or experiencing bereavement.
	Marie Curie will conduct ongoing evaluation of the impact of the partnership as well as provide case studies and feedback from beneficiaries of the partnership. This will help Marie Curie and the GDNs better understand how to support vulnerable households struggling with fuel poverty. Currently there is little data on the relationship between terminal illness and fuel poverty. The data collected through this partnership will be able to shape future policy change and Marie Curie campaigns.
	This partnership is designed to become embedded within Marie Curie to ensure it delivers systemic change. Once the funding from the GDNs ends, Marie Curie will be able to continue supporting terminally ill people and their families that are struggling with fuel poverty. The learnings and evaluation of this partnership can be used as a model for future partnerships the GDNs conduct to ensure the projects they are funding are sustainable and continue to have a legacy after the funding ends.
	Marie Curie will conduct ongoing knowledge sharing activities with the GDNs and their partners to help improve ongoing partnerships that are supporting vulnerable people. Marie Curie will be keen to have ongoing open conversations with the GDNs and their partners to help us all learn from one another.
	Marie Curie are a leading charity in bereavement and can support the GDN's staff in gaining a better understanding of bereavement and how to support customers that are experiencing bereavement. Through this partnership, Marie Curie will be able to work

	able to share data, online resound It is estimated that, at any time, bereavement ⁽¹⁾ which can lead ⁽²⁾ . Marie Curie found that 58% their grief months after the deat (being at work but unable to fur bereavement costs the UK eco References ⁽¹⁾ McGuinnes, B (2009). Bereavement Care, 28 ⁽²⁾ Marie Curie (2021). References	Grief in the workpla Grief in the workpla	eir health, wellbeing, and productivity heir performance was still affected by nd it is estimated that "presenteeism" employees at work following a r year ⁽³⁾ . ce: Developing a bereavement policy.
	bereavement support.	·	
Scale of VCMA Project and SROI Calculations	The Funding Licensee(s) should justify the scale of the VCMA Project – including the scale of the investment relative to its potential benefits. As part of this it should provide the SROI calculation.		
	We worked with leading social impact research consultancy SIA Partners to carry out an assessment of the financial and wellbeing outcomes applicable to our services for vulnerable customers incorporated in this partnership. Carrying out an in-depth assessment of the predicted outcomes we forecast a positive net social return of £12.16		
	Total cost*	£1,725,656.85	
	Total gross present value	£22,717,943.59	
	NPV	£20,992,286.74	
	SROI £12.16		
	*Factoring in the WACC adjustment for year two and three costs		
VCMA Project Start and End Date	September 2022 to October 20	25.	
Geographical Area	UK-wide (delivery includes Northern Ireland as Marie Curie provides a consistent service for all customers)		
Remaining Amount in			
the Allowance at Time of Registration	Amount before this project: £10,828,177.10		
	**based on CO in Pregnancy, S	Scouts, CA National	l, Fuel Bank Foundation, CO Schools'
	Education, Collaborative GDN Winter Awareness Campaign, SCOPE Disability Energy Support with water advice service, MyBnk Financial inclusion and energy safeguarding		
			Safe Homes being the only confirmed
	Project costs: £1,780,825		
	Remaining following this projec		
Gas Network Vulnerabilit			ernance Document - PEA Control

Gas Network Vulnerability and Carbon Monoxide Allowance (VCMA) Governance Document - PEA Control Table

In order to ensure that a VCMA project is registered in accordance with the Ofgem VCMA governance document (incl. project eligibility assessment), the below table should be completed as part of the project registration process.

Stage 1: GDN Collaboration Group PEA Review Meeting date review completed: Multiple dates by email Review completed by: GDN: Name: Job Title: Jo Giles Customer Safeguarding Senior Manager Cadent NGN Eileen Brown **Customer Experience Director** SGN Kerry Potter Group Social Impact and Vulnerability Manager WWU Nigel Winnan Head of Customer and Social Obligations Stage 2: GD2CVG Panel Review Meeting date sign off agreed: Multiple dates by email Review completed by: GDN: Name: Job Title: Philip Burrows Head of Customer Vulnerability Delivery Cadent NGN Eileen Brown **Customer Experience Director** Maureen McIntosh SGN Head of Customer Experience WWU Nigel Winnan Head of Customer and Social Obligations

Step 3: Participating GDN individual signatory sign-off

GDN	Name:	Job Title:	Signature:	Date:
Cadent:	Philip Burrows	Head of Customer Vulnerability Delivery	MAR D	17/8/2
NGN:	Eileen Brown	Customer Experience Director	Elbon	18/08/22
SGN:	Rob Gray	Director of Stakeholder and Communications	for him	23/08/22
WWU:	Nigel Winnan	Head of Customer and Social Obligations	Negel Wimen	18/8/22

Date that PEA Document Uploaded to the Website: 31/08/2022

Date that Notification Email Sent to Ofgem: 31/08/2022