**Change Proposal Circular**

|  |
| --- |
|  |
| **Your response** |
| Please carry out anImpact Assessment of the attached CPs |
| **calendar_dates** |
| **When to return your response** |
| Please return yourresponse using theattached forms by**5:00pm Thursday 24 January 2013 to** **CCC@elexon.co.uk**Please tell us as soon aspossible if you are unableto meet this deadline. |

|  |
| --- |
| CPC00722: 28 December 2012 Batch |
| CPC00722 contains 2 Change Proposals for Impact Assessment by your organisation: CP1387 and CP1388.  |

|  |  |
| --- | --- |
| **To:**  | BSC Change Administrators (BCAs)/ Party Agent Change Administrators (PACAs) |
| **No:**  | CPC00722 |
| **Purpose:** |  |
| **From:** | Change Management Team  |
| **Date:** | 28 December 2012 |

| **Change Proposals** |
| --- |
| **CP no.** | **Title** | **SVA/CVA** | **Summary of Proposal** |
| CP1387 | Clarifications to BSCP533 and Appendices | SVA | Amendments to BSCP533 ‘PARMS’ and its appendices to incorporate ELEXON guidance; and address housekeeping issues, to ensure clarity and consistency in interpretation. This CP doesn’t propose changes to PARMS. |
| CP1388 | Meter Technical Details for Smart Meters | SVA | The creation of Meter Technical Details (MTDs) for smart Meters and associated process changes to reflect responsibilities for these smart metering MTDs. |

For details on the expected impacts on participants, please refer to the CP Participant Impact Matrix[[1]](#footnote-1) via the following links:

[CP Participant Impact Matrix](http://www.elexon.co.uk/change/data-reports/change-reports/)

Details of these Change Proposals will shortly be published on the [ELEXON Website](http://www.elexon.co.uk).

**Impact Assessment**

|  |
| --- |
| any_questions |
| **Any questions?** |
| If you have any queries,please contact:**Claire Anthony****020 7380 4293****claire.anthony@elexon.co.uk****or****CCC@elexon.co.uk****.****H:\Claire-Anthony - photo.jpg** |

Please carry out an Impact Assessment and redline text review, as appropriate, of the attached CPs and return your response using the attached forms by **5:00pm on Thursday 24 January 2013.**

Please let me know as soon as possible if you are unable to meet this deadline.

**ELEXON Change Management**

|  |
| --- |
| **Attachments for Change Proposals (12 Attachments)** |
| **CP No.** | **Attached Documents** |
| CP1387 | CP1387 FormCP1387 BSCP533 redlined text v0.1CP1387 BSCP533 Appendix A redlined text v0.1CP1387 BSCP533 Appendix B redlined text v0.1 |
| CP1388 | CP1388 FormCP1388 BSCP504 redlined text v0.1CP1388 BSCP514 redlined text v0.1CP1388 BSCP515 redlined text v0.1CP1388 SVA Data Catalogue Volume 1 redlined text v0.1CP1388 SVA Data Catalogue Volume 2 redlined text v0.1CP1388 DTC CP Annex B redlined text v0.1CP1388 DTC CP Annex D redlined text v0.1 |

**Contact Name**

|  |
| --- |
| **email_us_go_online** |
| **Your response** |
| Please send yourcompleted response to:**CCC@elexon.co.uk** |

|  |  |
| --- | --- |
| **Organisation name:** |  |
| **Capacity Organisation operates in:**(e.g. Supplier, HDDC, etc.) |  |
| **Contact Name:**(if different to Assessor) |  |
| **BCA/PACA:** |  |
| **Contact email:** |  |
| **Phone no:** |  |
| **Is this information to be used for all DCPs/CPs:** | **Yes/No** **[[2]](#footnote-2)** |

**Assessor Name if different from above**

|  |  |
| --- | --- |
| **Organisation name:** |  |
| **Capacity Organisation operates in:**(e.g. Supplier, HDDC, etc.) |  |
| **Assessor Name:** |  |
| **BCA/PACA:** |  |
| **Contact email:** |  |
| **Phone no:** |  |
| **Is this information to be used for all DCPs/CPs:** | **Yes/No** 2 |

|  |
| --- |
| **Change Proposal Impact Assessment Form (CP1387)** |
| Title: | Clarifications to BSCP533 and Appendices |
| CP Number: | **CP1387** |
| Proposed Implementation Date: | June 2013 |

| **Question 1:** | Responses: |
| --- | --- |
| Do you agree with the change? | Yes/No/Neutral 2 |
| Please provide any comments: |
|  |

| **Question 2:** | Responses: |
| --- | --- |
| Is your organisation impacted? | Yes/No 2 |

| Question 2a: |
| --- |
| If yes, then for which role is your organisation impacted (e.g. Supplier, HHDC, etc)? |
|  |

| Question 2b: |
| --- |
| Please state what the impact is: |
|  |

| **Question 3:** | No calendar days: |
| --- | --- |
| How much notice would you need to implement this change, if they were approved (from the date that the committee decision is made)? |  |
| Please provide any comments: |
|  |

| Question 4: |
| --- |
| Would implementation in the proposed Release have an adverse impact on your organisation? |
| Please state impact: |
|  |

|  |
| --- |
| Question 5: |
| Please provide details of the associated costs on your organisation to implement the change. If you would like any details to remain confidential and only for use by the Panel/Panel Committees when making a decision, please indicate accordingly. |
| Please give details: |
|  |

| Question 6: |
| --- |
| **Do you have any other comments?** |
| Please give any comments:  |
|  |

REVIEW CP redlined text (CP1387) – BSCP533

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

REVIEW CP redlined text (CP1387) – BSCP533 – Appendix A

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

**REVIEW CP redlined text (CP1387) – BSCP533 – Appendix B**

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

|  |
| --- |
| **Change Proposal Impact Assessment Form (CP1388)** |
| Title: | Meter Technical Details for Smart Meters |
| CP Number: | **CP1388** |
| Proposed Implementation Date: | June 2013 |

| **Question 1:** | Responses: |
| --- | --- |
| Do you agree with the change? | Yes/No/Neutral 2 |
| Please provide any comments: |
|  |

| **Question 2:** | Responses: |
| --- | --- |
| Is your organisation impacted? | Yes/No 2 |

| Question 2a: |
| --- |
| If yes, then for which role is your organisation impacted (e.g. Supplier, HHDC, etc)? |
|  |

| Question 2b: |
| --- |
| Please state what the impact is: |
|  |

| **Question 3:** | No calendar days: |
| --- | --- |
| How much notice would you need to implement this change, if they were approved (from the date that the committee decision is made)? |  |
| Please provide any comments: |
|  |

| Question 4: |
| --- |
| Would implementation in the proposed Release have an adverse impact on your organisation? |
| Please state impact: |
|  |

|  |
| --- |
| Question 5: |
| Please provide details of the associated costs on your organisation to implement the change. If you would like any details to remain confidential and only for use by the Panel/Panel Committees when making a decision, please indicate accordingly. |
| Please give details: |
|  |

| Question 6: |
| --- |
| **Do you have any other comments?** |
| Please give any comments:  |
|  |

REVIEW CP redlined text (CP1388) – BSCP504

Please review the redlined text for CP1384 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

REVIEW CP redlined text (CP1388) – BSCP514

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

**REVIEW CP redlined text (CP1388) – BSCP515**

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

**REVIEW CP redlined text (CP1388) – SVA Data Catalogue Volume 1**

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

**REVIEW CP redlined text (CP1388) – SVA Data Catalogue Volume 2**

Please review the redlined text for CP1387 and use the following table to enter any comments you have.

|  |  |  |  |
| --- | --- | --- | --- |
| Point No.  | Enter Location: (Section and paragraph numbers) | Severity Code (H/M/L) | Reviewer comments |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |
| **5** |  |  |  |
| **6** |  |  |  |
| **7** |  |  |  |
| **8** |  |  |  |
| **9** |  |  |  |
| **10** |  |  |  |
| **11** |  |  |  |
| **12** |  |  |  |

1. Please note that the contents of the CP Participant Impact Matrix may not be exhaustive. Please carefully review the attached DCPs and CPs to determine the impact on your organisation. [↑](#footnote-ref-1)
2. Delete as appropriate – please do not use strikeout, this is to make it easier to analyse

the responses [↑](#footnote-ref-2)