UK Demand Response Association

7th March 2014

EMR team

ELEXON Ltd

350 Euston Road

London NW1 3AW

by email only (emr@elexon.co.uk)

Dear Elexon,

Consultation on potential mechanisms for parties to exchange data with EMR settlement systems

Thank you, on behalf of the UK Demand Response Association (UK DRA), for the opportunity to respond to this consultation. Our proforma response is included as an Annex to this letter. However, we would also like to make three general points.

Firstly, we very much welcome Elexon's overall approach in its consultation, of providing a variety of options for data exchange including simple options such as email which only require limited investment in IT. This will be important in enabling smaller market participants to participate in the Capacity Market. Many of those participants will not be Balancing Mechanism Units (BMUs) and so it cannot be assumed that Balancing Mechanism systems will be sufficient for all Capacity Market (CM) purposes.

We would also like to ask that, in designing its Capacity Market systems, Elexon and its IT provider(s) keep in mind that the arrangements for demand response units may be slightly different from those for generation units. We would ask that in designing its CM systems, Elexon consults those involved in demand response to ensure that the systems take full account of any differences. We would be happy to discuss the details with Elexon at the appropriate time.

Finally, we would like to make a point about the need for the systems to be ready in good time. The first auction in the main capacity market will be for delivery of capacity in 2018. However, DECC is also proposing to run Transitional CM Arrangements from 2015 for Demand Response (DR), which would lead to delivery of new DR from 2016. This means that the systems will need to be fully functional by **2016**, rather than by 2018. We would ask that Elexon bears this in mind in its project planning.

We would be happy to discuss any of these points in more detail, if that would be useful.

Yours sincerely

Sara Bell

Principal, UK Demand Response Association

sbell@ukdra.com

07748868483

Annex A: Pro-forma response to consultation on EMR data flows

We invite you to respond to the questions on this form. Please submit responses entitled 'Consultation on EMR data flows' by 5pm on 7 March 2014.

Your details

Respondent	*Sara Bell*
Company name:	*UK Demand Response Association*
Email address:	*sbell@ukdra.com*
Role of stakeholder represented	*CM Capacity Provider – Demand Response*
Does this response contain confidential information?	*No*

Consultation questions

Option 1: Sending files as email attachments	
Question 1.1	Do you agree that sending and receiving electronic data files as email attachments is an appropriate mechanism for parties who wish to minimise their investment in IT systems? If not, what alternative would you propose?
Yes	
Question 1.2	Would you be likely to use this mechanism yourself? If so, would you see this as a permanent solution, or a temporary workaround?
Yes, some of our members may wish to use this mechanism, potentially on a permanent basis	
Question 1.3	Do you agree that XML is an appropriate open standard to use for the data files attached to these emails? If not, what alternative would you propose?
Yes	
Question 1.4	Do you agree with our proposal that the settlement systems should also attach human-readable versions of each file (in PDF format) to outgoing emails?
Yes	
Option 2: Other potential mechanisms for sending and receiving data	
Question 2.1	What do you see as the pros and cons of the options outlined above? Which option(s) do you see as most appropriate?
No comment	
Question 2.2	Are there any other options that we should be considering?
No comment	
Option 3: Possible use of existing industry networks to exchange data	
Question 3.1	Do you agree that the DTN is the appropriate mechanism for HHDAs to provide data to the settlement systems (provided that the obligation to do so is in the BSC)?
No comment	
Question 3.2	Do you believe it is appropriate to allow existing networks (i.e. DTN and/or CVA network) to be used for other EMR purposes (unrelated to the BSC or other existing industry codes)? Please provide your rationale.
No comment	
Question 3.3	Do you agree that the costs incurred in using networks in this way should be recovered from parties who choose to make use of this option? If so, should this apply to all such costs (including for example the costs of including appropriate functionality in the settlement systems.)? Or should it apply only to those costs directly attributable to individual data recipients (e.g. DTN data transfer charges)?
No comment	

Question 3.4	What changes would be needed to existing codes or Licenses to allow the DTN and/or CVA network to be used in this way?
No comment	