

Origin Energy Australian Energy Regulator Disconnections Audit

Audit conducted in November - December 2019

March 2020

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Executive Summary

1.1. Introduction

Protiviti has been engaged by Origin Energy Limited (**Origin**) to execute an audit in accordance with an enforceable undertaking (**Undertaking Agreement**), covering the scope areas in the Disconnections Audit – Detailed Audit Plan approved by the Australian Energy Regulator (**AER**) on 25 October 2019. The audit has been conducted as a "Reasonable Assurance Engagement" in accordance with Standard on Assurance Engagement ASAE3100 Compliance Engagements.

1.2. Background

The offered Undertaking Agreement, signed on 27 June 2019 by Origin's Chief Executive Officer and Managing Director, and Secretary, and accepted on 12 August 2019 by the Australian Energy Regulator (**AER**) Chair requires Origin to audit its compliance with the de-energisation provisions in the National Energy Retail Rules (**NERR**). This follows AER concerns in relation to 54 reported cases of wrongful disconnection of a small customer's premises as a result of:

- Origin's IT system failing to send a de-energisation cancellation request to the distributor; and
- Origin agents failing to ensure a de-energisation order was cancelled or arranging de-energisation otherwise than as agreed with the customer.

As part of the Undertaking Agreement, the AER requires Origin to undertake an independent audit of their relevant compliance obligations. Protiviti has undertaken this engagement in line with the AER's Compliance Procedures and Guidelines, Version 6, April 2019 and the Practice Guide for Compliance audit program.

1.3. Scope

The areas subject to review during the course of the audit are contained in the Detailed Audit Plan approved by the AER on 25 October 2019. This document is included in **Appendix C – Terms of Reference** of this report. The obligations in the NERR identified for review are outlined in the Undertaking Agreement and include:

- NERR Part 6, Division 2, Rule 111 De-energisation for not paying bill;
- NERR Part 6, Division 2, Rule 115 De-energisation for non-notification for move-in or carry-over customers;
- NERR Part 6, Division 2, Rule 116 When retailer must not arrange de-energisation; and
- NERR Part 6, Division 2, Rule 118 Request for de-energisation;

Additionally, the audit scope included:

- Assessment of the root cause of MDH system failure and sufficiency of rectification actions;
- Audit of Origin's systems, process and controls in place to ensure that:
 - o customers are only de-energised in accordance with the rules in the NERR;
 - there are systems, processes and controls in place to facilitate the identification, escalation and remediation of any detected instances of wrongful deenergisation caused by IT systems or agent error; and
 - o current training programs and associated materials in relation to de-energisation obligations are sufficient.

1.4. Methodology

Specifically, to the extent considered appropriate, we have undertaken the following procedure to complete this audit:

- Analysed documented policies and procedures to assess whether they were consistent with the regulatory definition of the obligation and Origin processes;
- Interviewed responsible Origin staff and process owners to assess whether they understood and complied with the documented procedures and regulatory requirements;
- Analysed information systems to assess the extent to which they produced information that complied with regulatory definitions;
- Analysed quality controls to identify whether non-compliance was detected and fed back through appropriate channels for correction;
- Analysed a sample of cases or data to establish the extent to which the obligation has actually been delivered (for example, to assess the accuracy of the reported data);
- Reviewed artefacts from a sample of cases based on an agreed sampling methodology to collect, review and analyse volumes of evidence to validate compliance with requirements; and
- Assessed the licensee's plan to ensure compliance, where a case of significant non-compliance was detected. In particular, we assessed whether the plan was adequate and effective.

We have undertaken a critical but co-operative examination of the possible causes which resulted in an increased risk of a WD. This was undertaken through the review of both obligation specific and generic compliance questions. We have assessed compliance in accordance with the assessment criteria set out within **Section 2.2** of this document.

Consistent with the AER's recommendation, samples were selected in accordance with the approved Detailed Audit Plan and Assurance Engagement Standard ASAE3100 using a 95% confidence level and interval of 7.5% for Disconnection for non-payment (DNP) samples, and 10% for move out and VC samples. The following is a breakdown of the disconnection populations provided and the samples selected:

| Disconnection Type | Approx. 12-month population | Sample size |
|--------------------|-----------------------------|-------------|
| Non-Payment | 27,000 | 170 |
| Move-out | 51,800 | 96 |
| Vacant Consumption | 28,300 | 96 |

Following Origin's investigation to identify the root cause and wrongful disconnections as a result of the MDH System Error failures, it was identified that the related WDs occurred between January and September 2018. As a result, our samples were randomly selected as follows:

- 67% of samples were randomly selected between April 2019 to September 2019; and
- 33% of samples were randomly selected between October 2018 to April 2019.

This concentrated sample selection on the period April to September 2019 in consideration of Origin's remedial activities to address the MDH system issues, which had been fully implemented by end of March 2019.

1.5. Limitations

As required by the AER, this audit has been based on the general principles stated in Standard on Assurance Engagements ASAE 3100 Compliance Engagements. Our work does not guarantee that errors, irregularities or instances of non-compliance will not occur, and may not detect errors, irregularities or instances of non-compliance should they occur. This is illustrated through our observations detailed in **Section 3.2**, below.

Furthermore, the internal control structure within which the reviewed procedures operate has not been assessed in all instances, and no opinion is expressed on its effectiveness. Our work is not designed to detect all weaknesses in the system of internal control because it is not performed continuously during the period subject to review, and the tests performed are on a sample basis.

Origin management is fully and solely responsible for applying independent business judgement with respect to the contents of this report, to make implementation decisions, if any, and to determine further courses of action with respect to any matters addressed in any advice, recommendations, services, reports or other work products or deliverables produced as a result of our review.

The grading and findings expressed in this report have been formed on the above basis. Any projection of the gradings and findings regarding the internal control system to future periods is subject to the risk that the internal control procedures may change, or that the degree of compliance with them may also change.

This document has been prepared for Origin for the purposes of reviewing compliance with the provisions of various obligations, as detailed in **Appendix C – Terms of Reference** as specified by Protiviti and the AER. Protiviti takes no responsibility for any reliance placed upon this report by any external party.

1.6. Executive comment

The 2018 MDH system failure arose from a series of network, system and internal failures which regrettably led to 24 of Origin's customers being wrongfully disconnected. Origin conducted a widespread internal investigation to identify all contributing factors leading to the root cause of the wrongful disconnections. Following this, Origin implemented short- and long-term measures to prevent further incidents, the details of which are further outlined under section 3.1 of this report.

Aside from the MDH system failure, which was an isolated incident, Origin's system and process controls are designed to ensure that disconnection occurs only in accordance with our regulatory obligations and our quality assurance and monitoring functions comprise, what is in our view, a robust disconnection compliance program. Origin is pleased that the review completed by the auditor attests to the adequacy and effectiveness of our controls in maintaining our compliance with obligations for disconnection.

We recognise that the auditor has identified some further opportunities for improvement, which Origin accepts and will seek to implement by no later than 31 July 2020. The details of our commitment to address these improvement opportunities is further outlined in section 2.1 of the report.

1.7. Other Matters

Our summary audit findings are presented in **Section 2 Summary of Audit Findings** and are aligned to the audit areas in the Audit Plan identified in **Appendix C – Terms of Reference** of this document. Please refer to the tables overleaf for a summary of gradings provided for each section of the Audit Scope.

On 19 December 2019, Origin informed Protiviti of 18 wrongful disconnection (WD) breaches of rule 116(g) which had occurred between 30 January 2019 and 15 October 2019 and been reported to the AER on 29 November 2019. Origin later updated the report to the AER to include 3 additional breaches, and subsequently confirmed with the AER on 15 January 2020 that no further additional related WDs had been identified. These breaches were not among the audit samples. Refer to **Section B3**.

Opportunities for Improvement (OFI) identified are tabled in **Appendix A – Opportunities for Improvement**.

2. Summary of Audit Findings

2.1. Summary of findings

We have assessed Origin as per the controls referenced in the Audit Plan in **Appendix C – Terms of Reference**, taking into consideration the effectiveness of such controls in achieving compliance with the Obligations stated in **Section 1.3 Scope**, above.

A summary of findings relating to the relevant Obligations is presented in the table below. Further detail of the grading and assessment of specific compliance issues are presented in **Section 3 Detailed Findings** of this document.

We have assessed compliance in accordance with the assessment criteria set out within **Sections 2.2 Assessing and determining compliance**. Further, a listing of the number of controls that relate to the Obligations stated in the Terms of Reference are included at **Appendix D – Controls identified per the Terms of Reference**.

Additionally, OFI's observed during the audit are tabled in **Appendix A – Opportunities for Improvement**.

| Scope Item | Grading | Finding | Observation and recommendation | Agreed target date |
|---------------------------------|-------------------------|--|---|--------------------|
| MDH Failure Investigation | Adequate / Effective | No findings in relation to the relevant obligation(s). | While no findings were noted, the following OFI was identified: Document the process for escalating MDH system failures to executive management. Origin management comments: Origin has implemented Protiviti's recommendation to document an escalation protocol for MDH system failures. | Completed |
| National Energy Retail Rules | Adequate / Effective | No findings in relation to the relevant obligation(s). | While no findings were noted: In relation to one sample, the Service Order (SO) for de-energisation in accordance with a customer request was raised for the date which the customer had requested, but because the customer requested disconnection after 3 pm on that date the request should have been raised for the following day. While the disconnection was performed by the distributor on a later date than requested (i.e. there was no wrongful disconnection), there was a risk the customer could have been disconnected on the wrong date. Refer to Section B4. On 19 December 2019, Origin informed Protiviti they had reported to the AER a then total of 18 WD breaches of rule 116(1)(g). The AER report was updated in January 2020 to include a total of 21 breaches. These breaches were not identified in the samples we tested. Refer to Section B3. Additionally, the following OFI was identified: Update documented disconnection processes to reflect actual disconnection practices. | 30 April 2020 |

| Scope Item | Grading | Finding | Observation and recommendation | Agreed target date |
|---|-------------------------|--|--|--------------------|
| | | | Origin management comments: Origin has completed further investigation regarding the sample identified in the findings above (and section 3.2 B4) and confirmed this to be an isolated incident with the particular agent. In line with Protiviti's recommendation, Origin is undertaking a review of all documented disconnection processes to ensure that these align with current practices. | |
| Quality Assurance, Reconnections, Complaints, AER Reporting | Adequate / Effective | No findings in relation to the relevant obligation(s). | Not applicable. | Not applicable |
| Staff Training | Adequate / Effective | No findings in relation to the relevant obligation(s). | While no findings were noted, the following OFIs were identified: Formalise reporting on key trends of Origin staff identification of potentially wrongful disconnections (PWDs); Clearly document the assessment grading threshold; and Periodically review and update Learning Management System (LMS) and PeopleSoft data. Origin management comments: In line with Protiviti's recommendations Origin will: Formalise reporting on key trends of Origin staff identification of potentially wrongful disconnections (PWDs); Clearly document the assessment grading threshold; and Periodically review and update Learning Management System (LMS) and PeopleSoft data | 30 April 2020 |

2.2. Assessing and determining compliance

Protiviti has used a traffic light grading system consistent with standard planned AER audits to indicate the adequacy and effectiveness of controls identified for each compliance obligation as provided in the *Assessment Criteria and Guidance Controls* (Appendix C of the Terms of Reference). The Auditor is expected to apply professional judgement when determining the adequacy of the controls and should consider the definitions below when deciding a grading.

Grading control adequacy

| Grade | Description | Definition |
|-------|---|---|
| | Inadequate (requires significant improvement) | Significant to full revision or implementation of processes and controls is required for the control objective and ultimately the compliance obligation to be met. |
| | Partially adequate (requires improvement) | Revision of some key processes and controls is required for the control objective and ultimately the compliance obligation. |
| | Adequate | Minimal or no action is required for the control objective and ultimately the compliance obligation is being met. Improvement opportunities exist in some key processes and controls for the control objective to achieve best practice in meeting the compliance obligation. |

Grading control effectiveness

| Grade | Description | Definition |
|-------|--|---|
| | Ineffective (requires significant improvement) | The requirements of the control objective have not been met, or adequate, relevant and suitable information to form an objective determination on effectiveness was not available to demonstrate compliance. Findings noted are considered material in nature and require urgent remedial action. |
| | Partially effective (requires improvement) | Key requirements of the control objective have been met but only minor achievements in compliance have been demonstrated. Findings noted are considered significant and require substantial effort to correct. |
| | Effective | Most requirements of the control objective have been met with only some minor failures and low risk obligation breaches. Findings noted are considered minor and require routine efforts to correct in the normal course of business. |

Grading Matrix

| | | CONTROLS | | |
|---------------|--|---|---|----------|
| | | Inadequate (requires significant improvement) | Partially adequate (requires improvement) | Adequate |
| ESS | Ineffective (requires significant improvement) | | | |
| EFFECTIVENESS | Partially effective (requires improvement) | | | |
| EFFE(| Effective | | | |

Overall Grade

| Grade | Description |
|-------|---------------------|
| | Non-compliant |
| | Partially Compliant |
| | Compliant |

3. Detailed Audit Findings

3.1. Assessment of root cause of Market Data Hub (MDH) gateway system failure and sufficiency of rectification actions

Instrument Clause Event: National Energy Retail Law

Obligation: N/A

Overall Rating: N/A

Testing Summary:

To confirm that Origin performed an effective independent assessment of the MDH gateway system failure in 2018 and consequently implemented an appropriate rectification plan to mitigate future instances, we:

- Interviewed key stakeholders responsible for the management and maintenance of MDH processes
- · Reviewed the independent analysis of MDH system failures
- Reviewed procedural documentation of the implementation of new controls including reconciliation reports for both inbound and outbound messages

The following opportunity for improvement was identified (Refer to Appendix A):

• Document the process for escalating MDH system failures to executive management.

| Ref Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
|--|---------------|---------------------|---|-------------------------|
| A1 Review of Undertaking Agreement including de-energisation obligations, conduct of concern and specific actions outlined by the undertaking. | N/A | | Discussions held with: Group Manager, Retail Compliance Compliance Analyst Key controls: Scoping of Undertaking Agreement prepared by Origin and submitted to AER Information obtained: AER Undertaking Agreement Tests performed: Reviewed Undertaking Agreement Held discussions with Compliance Conclusion: We identified no evidence of non-compliance or issues to the identified corrective controls. Recommendation: No further recommendations as part of this audit. | Effective / Adequate |



| Corre | Corrective | | | | | | | |
|-------|------------|---------------|---------------------|---------|--------------------|--|--|--|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact | | | |
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3.2. An audit of Origin's systems, processes and controls currently in place to ensure that customers are only de-energised in accordance with retail rules

Instrument Clause Event: National Energy Retail Rules

Obligations:

De-energisation for not paying bill Rule 111

De-energisation for non-notification by move-in or carry over customers - Rule 115

When retailer must not arrange de-energisation – Rule 116

Request for de-energisation – Rule 118

Overall Rating: Compliant

Testing Summary:

- To test compliance with National Energy Retail Rule 111, a randomly selected sample of 170 disconnection for non-payment (DNP) records was requested from Origin. The results of our testing identified no non-compliances.
- To test compliance with National Energy Retail Rule 115, a randomly selected sample of 96 vacant consumption records was requested from Origin. The results of our testing identified no non-compliances.
- To test compliance with National Energy Retail Rule 116, a randomly selected sample of eight disconnected life support, eight disconnected complaint, and 36 disconnected customer hardship records was requested from Origin. The results of our testing identified no non-compliances.
- To test compliance with National Energy Retail Rule 118, a randomly selected sample of 96 customer move out records was requested from Origin. The results of our testing identified no instances of non-compliances. However, for one sample, a disconnection SO was raised for a date prior to that requested by the customer. This did not subsequently result in a WD, as the distributor de-energised the customer six days later than instructed in the SO. Refer to **Section B4** for further information.

Further Commentary:

On 19 December 2019, Origin informed Protiviti of 18 wrongful disconnection (**WD**) breaches of rule 116(g) which had occurred between 30 January 2019 and 15 October 2019 and been reported to the AER on 29 November 2019. Origin later updated the report to the AER to include 3 additional breaches, and subsequently confirmed with the AER on 15 January 2020 that no further additional related WDs had been identified. These breaches were not among the audit samples.

| Preve | entative | | | | |
|-------|--|---------------|---------------------|--|-------------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| 31 | De-energisation for non-payment (Rule 111) | N/A | Process Description | Discussions held with: Governance and Quality Lead, Credit and Collections Senior Business Analyst, Credit and Collections Business Process Analyst, Credit and Collections Business Process Analyst, Credit and Collections Key controls: Induction training provided to all credit and collections staff Issuance of a Reminder Notice and Disconnection Warning Notice sent to the customer prior to best endeavour attempts DNP audit – prior to raising a DNP SO, the | Effective / Adequate |
| | | | | customer's account is manually checked to ensure that all DNP preconditions have been established (rule 111) and that none of the prohibitions (rule 116) apply. Control information obtained: Check Account Details Against Disconnection Checklist Raise Disconnection Service Order | |
| | | | | Procedure Raise Reconnection Service Order Procedure Quick Reference Guide (QRG): Disconnection Checklist QRG: Disconnection Service Order 'Not Completed' Reasons QRG: Disconnection Service Order Rejection Error Codes QRG: Gas Disconnection Service Order Rejection Error Codes | |
| | | | | Standard Operating Procedure (SOP): Manage Retailer Cancellation – DNP Not Completed Service Orders SOP – Potential Wrongful Disconnection SOP – Reconnection after DNP Monitoring SOP – Resolve Connection Exception – DNP Cases SOP – Resolve Disconnection Service Order Rejection | |
| | | | | SOP – Review DNP Service Order Cancellation List Handle DNP Enquiry – Business Procedure Organise Reconnection after DNP Procedure Common Task - Raise Service Notification Reconnection after DNP | |

| Preve | reventative | | | | |
|-------|--|---------------|---------------------|--|-------------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | | | Reviewed all DNP procedural documentation used by both credit and collections staff to determine whether these adhere to DNP requirements. Tested a random sample of DNP records, to ensure correct procedures had been followed. Conclusion: Per testing performed, we have not identified evidence of non-compliance to the identified preventative controls. Recommendation: No further recommendations as part of this audit. | |
| B2 | De-energisation for non-notification by move-in or carry-over customers (Rule 115) | N/A | | Discussions held with: Analyst, Customer Operations Group Manager, Retail Customer Operations Manager, BPO Operations and Governance Key controls: Induction training provided to all customer operations staff Disconnection Checklist to ensure all three letters has been sent to the vacant consumption site prior to raising a denergisation SO. Control information obtained: QRG: Raise a Hot Water Disconnection Service Order – Vacant Consumption QRG: Raise a Pole Top Disconnection Service Order – Vacant Consumption SOP: Disconnections Checklist – Vacant Consumption SOP: Failed Disconnections – Vacant Consumption SOP: Wrongful Disconnection Assessment – Vacant Consumption Manage Vacant Consumption Procedure Tests performed: Reviewed all vacant consumption procedural documentation used by both customer operations staff to determine whether these adhere to Vacant Consumption requirements. | Effective / Adequate |

| Preve | entative | | | | |
|-------|---|---------------|---------------------|---|--|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | | | Tested a random sample of 96 vacant consumption records, to ensure correct procedures had been followed. Conclusion: Per testing performed, we have not identified evidence of non-compliance or issues to the identified preventative controls. Recommendation: No further recommendations. | |
| B3 | When retailer must not arrange de- energisation (Rule 116) | N/A | | Discussions held with: Senior Business Analyst, Credit & Collections Business Process Analyst Sales Delivery Analyst Sales Delivery Manager Marketing and Automation & CRM Lead - Retail Key controls: Account lock in SAP where the customer has an open complaint or has notified Origin that they have applied for a rebate, concession or relief to prevent raising a DNP SO DNP audit – prior to raising a DNP SO, the customer's account is manually checked to ensure none of the following exist (among other things): Customer is on life support Customer has an open complaint Customer has an open complaint Customer has applied for relief The amount outstanding is less than \$300 Control information obtained: Assist Vulnerable Customer kHub Procedure Complete Life Support Enquiry kHub Procedure Mandatory Reconnection kHub Procedure Mandage Disconnection Complaint kHub Procedure Manage Disconnection Complaint kHub Procedure QRG: Disconnections Checklist Tests performed: | Protiviti notes the 21 WD breaches of rule 116(g) reported to the AER. These breaches arose from a specific scenario (ie. re-issue of a DNP SO) which affected a particular subset of customers under rule 116(g) only. It is assessed that this represents an immaterial number in the context of Origin's overall volume of disconnections for non-payment and overall compliance with rule 116. We note that the system issue fix was implemented on 13 December 2019. |

| Preve | entative | | | | |
|-------|--|---------------|---------------------|---|----------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | | | Reviewed all procedural documentation utilised to ensure compliance with Rule 116. Out of the random sample tested for compliance with Rules 111 and 115, where life support, hardship, and active complaint records are identified, test them in accordance with Rule 116 to ensure correct procedures had been followed. Conclusion: Per testing performed, we have not identified evidence of non-compliance or issues to the identified preventative controls. Recommendation: No further recommendations. | |
| B4 | Request for de- energisation (Rule 118) | N/A | | Discussions held with: Delivery Manager, Inbound Sales Manager, Inbound Sales Delivery Analyst, Inbound Sales Induction training provided to all inbound sales staff Induction training provided to all inbound sales staff KHub Procedures Customer is contacted to confirm the timing of the de-energisation request. Control information obtained: Organise a Move Out KHub Procedure Resolve a Move Issue Khub Procedure Reviewed all move-out procedural documentation used by inbound sales agents to determine whether these adhere to move-out requirements. Tested a random sample of move-out records, to ensure correct procedures had been followed. Conclusion: Per testing performed, we have not identified evidence of non-compliance to the identified preventative controls. In relation to one sample, the SO for a move-out de-energisation in accordance with a customer request was raised for the date which the | Effective / Adequate |

| Preve | Preventative | | | | |
|-------|--------------|---------------|---------------------|--|-----------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | | | customer had requested, but because the customer requested disconnection after 3 pm on that date the request should have been raised for the following day. While the disconnection was performed by the distributor on a later date than requested (i.e. there was no wrongful disconnection), there was a risk the customer could have been disconnected on the wrong date. Management confirmed the increased risk of WD as a result of an agent error We note that this is an isolated incident and therefore we consider these corrective actions as sufficient to address this issue. | |
| | | | | Recommendation: | |
| | | | | No further recommendations. | |

3.3. An audit of Origin's systems, processes and controls currently in place which facilitate the identification, escalation and remediation of any detected instances of wrongful de-energisation caused by IT systems or Agent error.

Obligation: N/A

Overall Rating: N/A

Testing Summary:

The results of our testing identified no instances where systems, processes and controls in place are inadequate for the identification, escalation and remediation of any WDs.

A review of procedural documentation and walkthrough's with key stakeholders provided the necessary insight to assess the design effectiveness of controls in the identification, management and rectification of a WD.

| Detec | Detective | | | | | |
|-------|--------------------------------|---|---------------------|--|-------------------------|--|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact | |
| C1 | Quality Assurance Practices | Confirm the following processes are in place and operating effectively as intended: • Establishment of quality assurance practices relevant to de-energisation processes • Reporting and escalation of exceptions identified including root cause analysis • Establishment of remediation action plans (including training, system, third party issues) and monitoring of completion | | Discussions held with: Compliance Analyst Manager, BPO Operations & Governance Key controls: Cal bration Checklists are completed to identify audit inconsistencies between Accenture and Origin auditing processes. Weekly meetings are held with Operations and Governance to identify and address any issues that may require remediation, including reviewing outstanding items. Origin and Accenture staff have documented guidance (Quality Checklist) to standardise quality assurance practices. Control information obtained: Billing & Metering & LPG Monthly Quality Report Retail Weekly Operational Updates Cal bration and Quality Checklist Tests performed: Reviewed all quality assurance procedural documentation used by Operations and Governance. Reviewed a sample of recently completed quality assurance programs. Conclusion: | Effective / Adequate | |

| Detective | Detective | | | | | |
|----------------------|-----------|---|---------------------|--|-------------------------|--|
| Ref Test S | tep | Sub-test Step | Process Description | Testing | Grading/ Impact | |
| | | | | Per testing performed, we have identified no evidence of non-compliance or issues to the identified detective controls. Recommendation: No further recommendations. | | |
| C2 Reconi Protoco | | Confirmation that frontline agents consider wrongful disconnection processes as part of reconnection process Confirmation that potential wrongful disconnections are reported for investigation | | Discussions held with: Senior Business Analyst Customer Relations Consultant Retail Compliance Analyst Key controls: Frontline agents undertake training to identify and escalate PWDs. Ombudsman team reviews all PWD investigations. All information relating to PWDs and WDs is documented in a spreadsheet and stored within SharePoint to ensure consistency of case information amongst teams. Control information obtained: SOP – Reconnection After DNP Monitoring Tests performed: Held discussions with Credit and Ombudsman. Reviewed the design effectiveness of the reconnection process and the identification and escalation of PWDs. Conclusion: Per testing performed, we have identified no evidence of non-compliance or issues to the identified detective controls. Recommendation: No further recommendations. | Effective / Adequate | |

| Detec | ctive | | | | |
|-------|------------------------------------|---|---------------------|--|-------------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| СЗ | Complaints Handling | Establishment of root cause analysis of issues identified by customer complaints Reporting and escalation of exceptions identified including root cause analysis Establishment of remediation action plans including monitoring of completion | | Discussions held with: Group Manager, Customer Services Customer Relations Consultant Key controls: All frontline agents are trained to resolve or escalate complaints to their team leader. Complaints management processes are documented for Origin staff. Ombudsman team perform an investigation of complaints where the customer is not satisfied with the proposed outcome. Information obtained: Handle Feedback or Complaint procedure Business Offer Compensation procedure Tests performed: Held discussions with Customer Relations and Ombudsman teams. Reviewed the design effectiveness of the reconnection process and the identification and escalation of PWDs process. Conclusion: Per testing performed, we have identified no evidence of non-compliance or issues to the identified detective controls. Note that the samples we randomly selected to test compliance with Rules 111, 115 and 118 did not include instances of WDs and/or where a complaint was raised in relation to disconnections. Recommendation: No further recommendations. | Effective / Adequate |
| C4 | Reporting of compliance to the AER | Completeness and accuracy of reporting practices including notification of breaches | | Discussions held with: Retail Compliance Analyst Key controls: Standardised reports are used in reporting compliance breaches to the AER. Executive sign off procedures for breach reports prior to distributing to the AER. Control information obtained: Sample of Origin Compliance Breach Reports submitted to the AER. | Effective / Adequate |

| Detective | | | | | |
|-----------|-----------|---------------|---------------------|---|--------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | | | Wrongful Disconnection Reporting – Process for reporting | |
| | | | | Tests performed: | |
| | | | | Held discussions with compliance staff to determine adequacy and accuracy of reporting processes. | |
| | | | | Conclusion: | |
| | | | | Per testing performed, we have identified no evidence of non-compliance or issues to the identified detective controls. | |
| | | | | Recommendation: | |
| | | | | No further recommendations. | |
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3.4. An audit of Origin's current training programs and associated materials in relation to the De-energisation Obligations.

Instrument Clause Event: National Energy Retail Law

Obligation: N/A

Overall Rating: N/A

Testing Summary:

The results of our testing identified no instances where inadequate training was provided to staff which may result in a WD.

To ensure training materials are developed in accordance with de-energisation obligations, disconnection training materials were mapped against compliance obligations. Additionally, walkthroughs were performed with Learning and Development to gain a key understanding of current validation processes, as well as, training requirements for Origin staff.

The results of our testing identified no instances where disconnection training was not adequately mapped to the de-energisation obligations or instances where staff had not successfully completed the required training according to Origin's standard practice.

However, the following opportunities for improvement were identified:

- Formalise reporting on key trends of Origin staff identification of PWDs;
- · Clearly document the assessment grading threshold; and
- Periodically review and update Learning Management System and PeopleSoft data.

Refer to Appendix A for further details.

| Preve | Preventative | | | | |
|-------|---|--|---------------------|--|-------------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| D1 | Review training platform to determine the completeness of training materials in accordance with deenergisation obligations. | This review included: Mapping training activities to compliance obligations Verifying the currency and completeness of training materials including frequency of review by suitable personnel Assessing the process to monitor completion of training programs by operators on a periodic basis | | Discussions held with: Manager, Learning and Development Key controls: Induction training is provided to all front-line staff on the identification and management of a PWDs. All front-line staff must perform refresher training on an annual basis. All training related to disconnections is refreshed on an ad doc basis utilising staff feedback, key trends identified from business leads and change in relevant legislation or standards. All relevant stakeholders are involved in the mapping process in the development or review of training materials. Stakeholders include: Learning and Development; | Effective / Adequate |

| Preve | entative | | | | |
|-------|--|--|---------------------|---|-------------------------|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact |
| | | including induction and re-training; and Examination of induction, training, coaching and assessment processes | | SME's; and Compliance. Control information obtained: Training packages developed for staff to manage disconnections include the following: PWD eLearn; Inbound/outbound Sales Induction Pack; Universal Induction Pack; Centralised Energy Services Payment Induction Pack; Credit and Collections Induction Pack; Customer Advocacy Induction Pack; and Premium Business Centre induction Pack. Information to support the review of training completed by staff include: Universal Induction data; Survey Monkey template; PWD eLearn document; and All in one document (attendance records). Tests performed: Held a discussion with Learning and development. Reviewed the design effectiveness of all training materials including assessments. Conclusion: Per testing performed, we have identified no evidence of non-compliance or issues to the identified preventative controls. Recommendation: Refer to the opportunities for improvement identified in Appendix A. | |
| D2 | Assess findings identified as part of the audit in scope item 2 to confirm instances of issues relating to user error and confirm alignment with training practices. | N/A | | Discussions held with: Refer to Item B4 and D1 Key controls: Refer to Item D1 Information obtained: Refer to Item D1 Tests performed: Held discussions with Inbound Sales and Learning and Development. | Effective / Adequate |

| Preve | Preventative | | | | | |
|-------|--------------|---------------|---------------------|--|--------------------|--|
| Ref | Test Step | Sub-test Step | Process Description | Testing | Grading/ Impact | |
| | | | | Conclusion: | | |
| | | | | Per testing performed, we have identified no evidence of non-compliance or issues to the identified preventative controls. | | |
| | | | | Recommendation: | | |
| | | | | No further recommendations. | | |
| | | | | | | |

4. Auditor Statement

The key findings set out above reflect in all material respects the professional opinion of the auditor to the level of confidence specified by the Australian Energy Regulator and consistent with the audit approach and methodology described in this report.

Professional auditor opinion - Compliance with NERL and NERR de-energisation provisions

It is the professional opinion of Protiviti that Origin has demonstrated compliance with the following areas identified in the audit scope. Accordingly, we have assessed "Compliant" with respect to the following obligations in the National Energy Retail Rules (NERR) and the National Energy Retail Law (NERL) identified for review:

- NERR Part 6, Division 2, Rule 111 De-energisations for not paying bill;
- NERR Part 6, Division 2, Rule 115 De-energisations for non-notification for move-in or carry-over customers; and
- NERR Part 6, Division 2, Rule 116 When retailer must not arrange de-energisation; and
- NERR Part 6, Division 2, Rule 118 Request for de-energisation.

Comments in relation to Origin's compliance with NERR rule 116

On 19 December 2019, Origin informed Protiviti of 18 wrongful disconnection (WD) breaches of rule 116(g) which had occurred between 30 January 2019 and 15 October 2019 and been reported to the AER on 29 November 2019. Origin later updated the report to the AER to include 3 additional breaches, and subsequently confirmed with the AER on 15 January 2020 that no further additional related WDs had been identified. These breaches were not among the audit samples.

These breaches arose from a specific scenario in relation to the re-issue of a DNP SO which affected a particular subset of customers. The system issue fix was implemented on 13 December 2019.

Noting the controls that have been tested as part of the audit program, we have assessed these instances as not materially impacting the level of compliance under rule 116 and have assessed the grading of rule 116 as Effective/Adequate according to the audit Grading Scale (see **section 2.2**).

Professional auditor opinion – MDH system failure and remediation, and training programs

It is the professional opinion of Protiviti that Origin has demonstrated adequate controls in the following areas identified in the scope:

- Assessment of root cause of Market Data Hub "MDH" gateway system failure and sufficiency of rectification actions; and
- Current training programs and associated materials in relations to the De-energisation Obligations.

Opportunities for improvement were identified during this audit and are outlined in Appendix A.

Appendix A – Opportunities for Improvement

The following observations do not relate to non-compliance. Instead they represent opportunities for Origin to strengthen its current processes and controls.

| Opportunities for Improvement | |
|--|--|
| Scope Item 1 | Document the process for escalating MDH system failures to executive management |
| Scope Area: Market Data Hub Failure | Discussions with Origin stakeholders indicated that for the MDH system failure in 2018, Rectification Plans, once developed, were submitted to executive management for consideration and endorsement. However, there is no documented procedure in place to ensure this escalation protocol is consistently exercised, should other MDH system failures arise in future. This in turn increases the risk that proposed mitigation controls are not fully reviewed to confirm fitness for purpose prior to implementation. As such, we recommend that the escalation protocol for MDH system failures be documented. |
| Scope Item 2 | Update documented disconnection processes to reflect actual disconnection practices. |
| Scope Area: Disconnections Processes Instrument Clause Event: National Energy Retail Rules | A review of Origin's documented disconnection processes indicated some of these are out of date and do not reflect current practices. For example, the following process in the Quick Reference Guide – Disconnection Checklist is no longer required: Origin must issue a Disconnection Imminent Letter more than six weeks after the final bill due date before disconnecting Queensland gas customers. |
| Obligation: Rules 111, 115, 116 and 118 | Discussions with management indicated that disconnection procedures and guidelines are currently under review and will be updated where necessary. This review is scheduled for completion in early 2020. |
| Scope Item 4 | Formalise reporting on key trends of Origin staff identification of PWDs |
| Scope Area: Staff Training | No formal reporting is developed from business unit leads on areas where PWD training is required for Origin staff. Currently, the Learning and Development team meet with the business unit leads on an ad hoc basis to gain key insights on Origin staff performance in the identification and management of PWDs. This process ensures that refresher training can be updated to address Origin staff needs. |
| | The implementation of a templated report, designed in collaboration with Learning and Development and relevant business units, will ensure the required analysis is performed in the review of Origin staff ability to identify and manage a PWD. This will improve Learning and Development's ability to update training to accommodate Origin staff needs. |
| | Clearly document the assessment grading threshold |
| | A review of the completion rate of all PWD induction training performed by staff from the period 29 July to 23 September 2019 indicated that staff who do not achieve an 80% grading in their final assessment are required to re-take the assessment. This is further confirmed through discussions with Learning and Development staff. However, Origin does not have a documented process or procedure that clearly articulates this threshold, to minimise any confusion amongst agents with regards to this assessment requirement. |
| | Periodically review and update Learning Management System (LMS) and PeopleSoft data |
| | Currently, Learning and Development generate reports from LMS on a monthly basis to follow up with staff who are due in the next 30 days to complete upcoming training. However, in a review of the LMS data and master data extracted from PeopleSoft, 110 employees were identified as not completing the refresher training within the required time period. Discussions with Learning and Development confirmed these exceptions are due to the following: |
| | Staff who do not receive have customer-facing responsibilities are assigned training requirements in error; |
| | Staff have been terminated but the wrong form has been completed to deactivate learners from PeopleSoft; and/or |
| | All front-line staff completed refresher training in October 2018 regardless of how recently the training had previously been. Learning and Development are progressing through the overdue training items for Origin staff and re-scheduling the refresher training sessions as required. |
| | As a result, Origin should continue to make the required system adjustments to correct all items that are incorrectly recording Origin staff who are overdue in completing the refresher training. Additionally, the training data should be reviewed on a periodic basis to ensure necessary adjustment are made in a timely manner for increased reporting accuracy. |





Appendix C - Terms of Reference

The Scope of this audit was based on the Undertaking Agreement made between Origin and the AER on 12 August 2019 pursuant to section 288 of the National Energy Retail Law. The Detailed Audit Plan was developed prior to the commencement of fieldwork and was approved by the AER on 25 October 2019.

In delivering this audit to the AER, the scope of the audit included coverage of the undertakings made by Origin to the AER in relation to the following:

- De-energisation obligations; and
- Conduct of concern.

Specifically, the audit scope included the following components:

- 1. Assessment of root cause of MDH system failure and sufficiency of rectification actions, in which we:
 - Reviewed the Undertaking Agreement including de-energisation obligations, conduct of concern and specific actions outlined by the undertaking.
 - Reviewed post failure analysis undertaken by Origin and independently assessed the following:
 - Interviewed key controls, system owners as well as the author of the analysis
 - Confirmed robustness and independence of investigation process
 - Validated root cause analysis of failures
 - Validated controls identified including recommended corrective control and system enhancements
 - Confirmed the status of corrective actions including mitigating controls that had possibly been implemented in short term
 - Confirmed the level of reporting and escalation of recommendations within Origin and the status of corrective actions including outstanding actions
 - In assessing the design and operating effectiveness of controls, Protiviti assessed this as part of the broader audit requirement as detailed at Scope item 2 noting that the highest level of risk was associated with de-energisation for not paying the bill (NERL Rule 111)
- 2. An audit of Origin's systems, processes and controls currently in place to ensure that customers had only been de-energised in accordance with the retail rules, in which we undertook detailed testing with respect to a range of National Energy Retail Rules (Version 13, July 2018) relating to:
 - De-energisation for not paying the bill (Rule 111);
 - De-energisation for non-notification for move-in or carry-over customers (Rule 115);
 - When retailer must not arrange de-energisation (Rule 116); and
 - Request for de-energisation (Rule 118).

As part of the approved test procedures, we performed sample testing from a population of in-scope activities included the request of audit artefacts including documentation, policies, procedures and call recordings. To achieve a level of Reasonable Assurance, our sample sizes was calculated based on a 95% confidence level.

Recognising the requirements of Scope Item 1 to assess the sufficiency of rectification actions in relation to the "MDH" gateway system failure, key attributes of our sampling approach included the following:

• We increased the level of sampling (by reducing the confidence interval from 10% to 7.5%) to focus on disconnection based on non-payment as this disconnection type is most impacted by the MDH gateway failure.

- Sampling was concentrated in the last six months of the audit period being April September 2019.
- Sample sizes had been calculated based on 12-month populations of disconnection types.

The following is a breakdown of the disconnection populations provided and the samples selected:

| Disconnection Type | Approx. 12-month population | Sample size |
|--------------------|-----------------------------|-------------|
| Non-Payment | 27,000 | 170 |
| Move-out | 51,800 | 96 |
| Vacant Consumption | 28,300 | 96 |

3. An audit of Origin's systems, processes and controls currently in place which facilitated the identification, escalation and remediation of any detected instances of wrongful de-energisation caused by IT systems or Agent error

In auditing this scope item, Protiviti undertook detailed testing with respect to establish policies, systems and procedures to enable Origin to effectively and efficiently monitor obligations with NERL.

This included the quality assurance, reconnection protocols, complaints handling and reporting practices. Specifically, this scope item addressed the following:

- Quality Assurance Practices:
 - Establishment of quality assurance practices relevant to de-energisation processes
 - Reporting and escalation of exceptions identified including root cause analysis
 - Establishment of remediation action plans (including training, system, third party issues) and monitoring of completion
- Reconnection Protocols
 - Confirmation that frontline agents consider wrongful disconnection processes as part of reconnection process
 - Confirmation that potential wrongful disconnections are reported for investigation

Specifically, this scope item addressed the following:

- Complaints Handling
 - Establishment of root cause analysis of issues identified by customer complaints
 - Reporting and escalation of exceptions identified including root cause analysis
 - Establishment of remediation action plans including monitoring of completion
- Reporting of compliance to the AER
 - Completeness and accuracy of reporting practices including notification of breaches

4. An audit of Origin's current training programs and associated materials in relation to the De-energisation Obligations, in which we:

- Reviewed training platform to determine the completeness of training materials in accordance with de-energisation obligations. This included review of but not limited to the following:
 - Mapping to compliance obligations
 - Currency and completeness of training materials including frequency of review by suitable personnel
 - Process to monitor completion of training programs by operators on a periodic basis including induction and re-training
 - Induction, training, coaching and assessment processes
- Assessed findings (where identified) as part of the audit in scope item 2 to confirm instances of issues relating to user error and confirmed alignment with training practices.