

# Customers With Special Needs: A ScottishPower Charter



**SCOTTISHPOWER**  
The Energy People

This charter outlines how we can help customers with special needs. This includes anyone in your household who:

- Has a disability.
- Has a chronic illness.
- Is over 60.
- Is blind or partially sighted.
- Is deaf or hard of hearing.
- Has another type of special need.

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# 1

## What You Can Expect From Us

**This section outlines the support we are able to offer customers with special needs.**

**We will:**

- Maintain a Priority Services Register (PSR) of customers who have special needs. This is known as our Carefree scheme.
- Include on the register details of all customers who have special needs and who ask to be included themselves, or through someone acting on their behalf.
- Provide free information and advice on the services available to our PSR customers.
- Tell all customers about the PSR scheme and how to register on it.
- Make sure your local electricity or gas distribution company knows that you have special needs, so that they tell you in advance if they are planning to cut off supplies for essential maintenance.
- Move your meter to a more suitable location, free of charge, if you can't read it or access it to make payments due to your physical circumstances<sup>1</sup>.



<sup>1</sup>Conditions may apply, please contact us for further details.

## 2

# Carefree: What it Means For You

If you have special needs you can apply to join our Carefree scheme, which provides a range of special services. Please see the application form on the back page of this Charter.

As a Carefree member, we can offer bills and information leaflets in alternative formats free of charge, including:

- **Braille.**
- **Large print.**
- **Compact disc.**
- **Audio cassette.**

### Password Service

We realise that you want to be sure about the identity of anyone visiting your home. As a Carefree member you can have the added security of using our free Password service. We can hold your personal password securely on our system, for our representatives to quote when they visit your home. We will also pass this on to your local electricity distributor or gas transporter. You can change this password at any time. Please contact us to arrange a password.

For further information on how to check the identity of our representatives, please see our Charter on Visiting Your Premises, under Customer Charters, in the Customer Services section of our website.

### We will also offer the following:

- A free Password service (See opposite).
- A dedicated helpline service on **0141 272 6042** and Minicom textphone service on **0845 272 7000**. You can also use these services to make an enquiry, or if you wish to make a complaint about any aspect of our Carefree scheme.
- A Protected Service Scheme (See opposite).
- Advice on special controls for your gas or electrical appliances.
- Wheelchair access to our public offices wherever possible.
- A quarterly meter reading service, available where you and all the members of your household are unable to read your meter(s). Please call the Carefree helpline or Minicom number to arrange this service.

### Protected Service Scheme

This allows you to nominate another person, such as a relative or friend, who can receive your bill for you and help you to make sure it is paid on time. This may be especially valuable if you have sight difficulties or are housebound. This service is free of charge.

# 3

## Interruptions to Your Electricity Supply

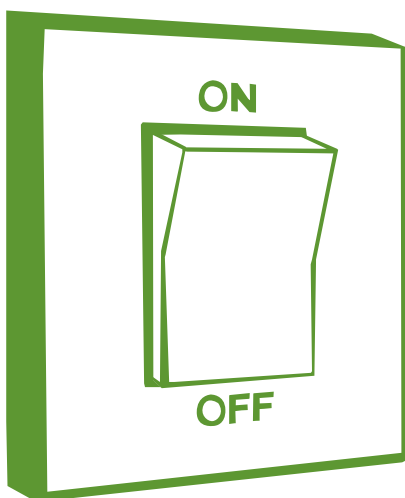
We realise that as a customer with special needs, you may be more dependent on your electricity supply than others, so we will tell your local distribution company about your special needs.

If you have essential equipment that needs electricity, such as a home dialysis machine or artificial ventilator, your local electricity distribution company will do their best to keep you on supply.

Your local distribution company must tell you about planned interruptions to your supply, for maintenance work or testing, two days in advance.

However, your supply may be cut off due to emergency conditions such as severe weather, so please ask your hospital or medical practice about a battery back up, or other arrangements, to help you cope with an unexpected loss of power.

If your electricity supply goes off unexpectedly, phone your local distribution company on the power loss & emergency number – this is shown on your bill or statement, and in the Phone Book or Yellow Pages.



### If you smell gas, or think you may have a gas leak:

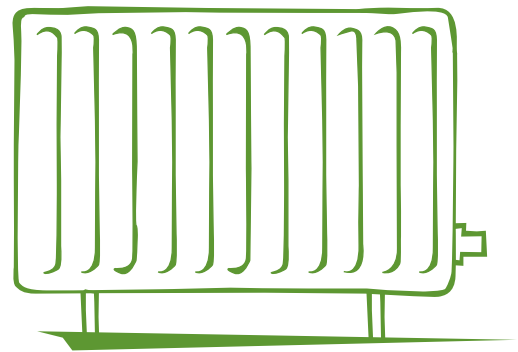
- Call the 24-hour Gas Emergency Service on 0800 111 999.
- Turn off the gas immediately at the emergency control valve by the meter.
- Open all windows and doors.
- Do not use electrical appliances, light switches, or naked flames.

# 4

## Free Gas Safety Checks

We will offer a free annual gas safety check to some of our customers if they ask us. To check if you are eligible for this service, see the conditions below. The safety check involves a suitably qualified gas engineer visiting you at home to test your gas appliances and other gas fittings to ensure they are safe for you to use. We will only offer this service if you have not had a gas safety check at your current home within the previous 12 months.

When examining your gas appliances, the engineer will also look at any flues, the supply of combustion air, operating pressure and heat input and the overall operation of your appliances, to make sure they are safe.



### **You will be eligible for a free annual gas safety check if:**

- You own and occupy your home and
- You are over 60 years of age, disabled or chronically sick, and
  - i. Live alone
  - ii. Live with others, all of whom are over 60, under 18, disabled or chronically sick
- You live with others, including at least one child who is aged under five years and you receive a means tested benefit.

If you are not sure whether you qualify, please call us on the Carefree helpline.

# 5 Payment Difficulties

We know that for many different reasons customers sometimes have difficulty paying bills. If you are finding it hard to pay your electricity or gas bill, please contact us as soon as possible for help and advice.

If you are suffering from financial hardship, you may find our booklet *Warmth Without The Worry* useful. This is available in the Customer Services section of our website at [www.scottishpower.co.uk](http://www.scottishpower.co.uk).

## Energy Efficiency

Staying warm and comfortable, while keeping costs at a level you can afford can be a challenge when you're on a low income. We are happy to give you advice and information to help you make the most of the energy you use at home, and can offer a few money saving tips.

You can visit our website at

[www.scottishpower.co.uk/Home\\_Energy/Energy\\_Efficiency](http://www.scottishpower.co.uk/Home_Energy/Energy_Efficiency) or contact our Energy Efficiency advice line on **0800 33 22 33**.



## Keeping Warm in Winter

It is important to keep warm enough in winter to avoid illness and hypothermia. Cold-related conditions can happen to anyone, but if you are not very mobile you are at increased risk. Contact us and we can recommend tips for keeping warm.

# 6

## What to do if We Get it Wrong

We want to provide you with the best possible service at all times. However, if we have made a mistake, or you are unhappy with any aspect of our service, please tell us – we will do our best to put things right. You can email, telephone or write to us.

E-mail: [contactus@scottishpower.co.uk](mailto:contactus@scottishpower.co.uk)

Phone: 0845 2700 700

Minicom: 0800 027 4900

Write to: ScottishPower, Customer Services,  
Cathcart Business Park, Spean Street,  
Glasgow G44 4BE.

For further details on our complaints process please see our Charter on Handling Your Enquiry or Complaint, under Customer Charters, in the Customer Services section of our website at [www.scottishpower.co.uk](http://www.scottishpower.co.uk)



# 7

## The Carefree Priority Service Register Application Form

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone number \_\_\_\_\_

How would you describe yourself?  
(Please tick the boxes that apply)

- |                             |                          |                               |                          |
|-----------------------------|--------------------------|-------------------------------|--------------------------|
| I am aged 60 or over        | <input type="checkbox"/> | I have breathing difficulties | <input type="checkbox"/> |
| I am partially sighted      | <input type="checkbox"/> | I use a wheelchair            | <input type="checkbox"/> |
| I am blind                  | <input type="checkbox"/> | I have walking difficulties   | <input type="checkbox"/> |
| I am blind and read Braille | <input type="checkbox"/> | I have learning difficulties  | <input type="checkbox"/> |
| I am hard of hearing        | <input type="checkbox"/> | I have speech difficulties    | <input type="checkbox"/> |
| I am deaf                   | <input type="checkbox"/> | I have a poor sense of smell  | <input type="checkbox"/> |
| I have arthritis            | <input type="checkbox"/> | I am forgetful or confused    | <input type="checkbox"/> |
| I have arthritic hands      | <input type="checkbox"/> | I have to stay in bed         | <input type="checkbox"/> |
| I have a heart condition    | <input type="checkbox"/> | I have no disabilities        | <input type="checkbox"/> |
| I have a serious illness    | <input type="checkbox"/> |                               |                          |

I have another disability. Please give details below.

\_\_\_\_\_

**Please use the space below to give us information about the special needs of other people who live in your home.**

Name	Relationship	Special Needs
_____		

I understand that these details will be passed to my local distribution company.

SIGNATURE \_\_\_\_\_ DATE:     /     /

## Free gas safety check

If you use gas supplied by ScottishPower, you may be eligible for a free gas safety check. Please also fill in this section.

	<input type="checkbox"/>	<input type="checkbox"/>
Do you own your own home?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
If 'No', who does?	Private landlord	Local authority

Is there anyone living in your home who:

- has a disability
- has a chronic illness
- has some other type of special need
- in receipt of means tested benefits with a child under 5

<input type="checkbox"/>	<input type="checkbox"/>	_____
Yes	No	If 'Yes', who?

Is anyone over 60?

<input type="checkbox"/>	<input type="checkbox"/>	_____
Yes	No	If 'Yes', who?

	<input type="checkbox"/>	<input type="checkbox"/>
Would you like to have a gas safety check?	Yes	No

If 'Yes', please answer the following:

	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a gas central-heating system?	Yes	No

How many of the following gas appliances do you have?

<input type="checkbox"/>	<input type="checkbox"/>
Gas cooker	Free-standing gas fire
<input type="checkbox"/>	<input type="checkbox"/>
Gas wall heater	Gas water heater
	_____

Other gas appliances (please say what they are)

Return this form to:

ScottishPower  
Carefree Response  
FREEPOST SCO 1793  
Glasgow G44 4BR.