

Agenda – Y Pwyllgor Cyfrifon Cyhoeddus

Lleoliad: I gael rhagor o wybodaeth cysylltwch a:
Ystafell Bwyllgora 3 – Y Senedd Fay Bowen
Dyddiad: Dydd Llun, 11 Mehefin 2018 Clerc y Pwyllgor
Amser: 13.45 0300 200 6565
SeneddArchwilio@cynulliad.cymru

(Rhag-gyfarfod)

(13.45 – 14.00)

1 Cyflwyniad, ymddiheuriadau, dirprwyon a datgan buddiannau

(14.00)

2 Papur(au) i'w nodi

(14.00)

(Tudalennau 1 – 3)

2.1 Gronfa Buddsoddi Cymru mewn Adfywio (RIFW): Llythyr oddi wrth Llywodraeth Cymru (21 Mai 2018)

2.2 Gwasanaethau Gwybodeg GIG Cymru: Llythyr oddi wrth Llywodraeth Cymru (31 Mai 2018)

2.3 Gwasanaethau Gwybodeg GIG Cymru: Gohebiaeth y Pwyllgor

3 Rheoli meddyginiaethau: Ystyried ymatebion i adroddiad y Pwyllgor

(14.05 – 14.15)

PAC(5)–16–18 Papur 1 – Ymateb Llywodraeth Cymru (2 Mai 2018)

PAC(5)–16–18 Papur 2 – Ymateb Llywodraeth Cymru (31 Mai 2018)

PAC(5)–16–18 Papur 3 – Llythyr oddi wrth Archwilydd Cyffredinol Cymru



4 Y Rhaglen Addysg ac Ysgolion ar gyfer yr 21ain Ganrif:

Gohebiaeth

(14.15 – 14.20)

PAC(5)-16-18 Papur 4 – Llythyr oddi wrth Gymdeithas Arweinwyr Ysgolion a Cholegau Cymru

PAC(5)-16-18 Papur 5 – Llythyr oddi wrth Gomisiwn Dylunio Cymru

PAC(5)-16-18 Papur 6 – Llythyr oddi wrth Wasanaethau Addysg Gatholig

PAC(5)-16-18 Papur 7 – Llythyr oddi wrth Rhieni dros Addysg Gymraeg

PAC(5)-16-18 Papur 8 – Llythyr oddi wrth NASUWT Cymru

PAC(5)-16-18 Papur 9 – Llythyr oddi wrth Cenric Clement-Evans

5 Rhaglen Ysgolion ac Addysg yr 21ain Ganrif: Sesiwn Dystiolaeth 1

(14.20 – 15:20)

Papur briffio gan y Gwasanaeth Ymchwil

PAC(5)-16-18 Papur 10 – Cymdeithas Llywodraeth Leol Cymru

Dr Chris Llewelyn, Dirprwy Brif Weithredwr a Chyfarwyddwr Dysgu Gydol Oes,

Hamdden a Gwybodaeth – Cymdeithas Llywodraeth Leol Cymru

Paula Ham, Cyfarwyddwr Dysgu a Sgiliau – Cyngor Bro Morgannwg

(Egwyl)

(15.20 – 15.30)

6 Rhaglen Ysgolion ac Addysg yr 21ain Ganrif: Sesiwn Dystiolaeth 2

(15.30 – 16.30)

Papur briffio gan y Gwasanaeth Ymchwil

Iestyn Davies, Prif Swyddog Gweithredol, Colegau Cymru

Judith Evans, Pennaeth, Coleg y Cymoedd

Guy Lacey, Pennaeth, Coleg Gwent

7 Cynnig o dan Reol Sefydlog 17.42 i benderfynu gwahardd y cyhoedd o'r cyfarfod ar gyfer y busnes canlynol:

(16.30)

Eitemau 8 & 9

8 Rhaglen Ysgolion ac Addysg yr 21ain Ganrif: Trafod y dystiolaeth a ddaeth i law

(16.30 – 16.45)

9 Plant a phobl ifanc sydd wedi bod mewn gofal: Ystyried materion allweddol

(16.45 – 17.00)

Cofnodion cryno – Y Pwyllgor Cyfrifon Cyhoeddus

Lleoliad:

Gellir gwyllo'r cyfarfod ar [Senedd TV](#) yn:

Ystafell Bwyllgora 3 – Y Senedd

<http://senedd.tv/cy/4747>

Dyddiad: Dydd Llun, 4 Mehefin 2018

Amser: 15.09 – 16.32

Yn bresennol

Categori	Enwau
Aelodau'r Cynulliad:	Nick Ramsay AC (Cadeirydd) Mohammad Asghar (Oscar) AC Vikki Howells AC Rhianon Passmore AC Lee Waters AC
Tystion:	Andrew Slade, Llywodraeth Cymru Simon Jones, Llywodraeth Cymru
Swyddfa Archwilio Cymru:	Huw Vaughan Thomas – Archwilydd Cyffredinol Cymru Matthew Mortlock
Staff y Pwyllgor:	Fay Bowen (Clerc) Meriel Singleton (Ail Clerc) Claire Griffiths (Dirprwy Clerc) Sian Thomas (Ymchwilydd)



1 Plant a phobl ifanc sydd wedi bod mewn gofal: Trafod y materion allweddol

1.1 Trafododd yr Aelodau y papur materion allweddol a gofynnodd bod drafft cychwynnol o argymhellion posibl yn cael ei baratoi er mwyn eu hystyried.

2 Cyflwyniad, ymddiheuriadau, dirprwyon a datgan buddiannau

2.1 Croesawodd y Cadeirydd yr Aelodau i'r Pwyllgor.

2.2 Cafwyd ymddiheuriadau gan Neil Hamilton AC ac Adam Price AC. Ni chafwyd dirprwyon.

3 Papur(au) i'w nodi

3.1 Cafodd y papurau eu nodi.

3.2 Trafododd y Pwyllgor gynnwys y llythyr ar heriau digidoleiddio gydag Andrew Slade, Cyfarwyddwr Cyffredinol yr Economi, Sgiliau ac Adnoddau Naturiol. Yn dilyn y sesiwn dystiolaeth, gofynnodd Aelodau bod y Clercod yn trafod y posibilrwydd o sefydlu grŵp rapporteur ynghyd ag Aelodau o Bwyllgor yr Economi, Seilwaith a Sgiliau er mwyn mynd i'r afael â'r mater hwn.

3.1 Adroddiad(au) Archwilydd Cyffredinol Cymru: Adolygiad blwyddyn gyntaf o sut mae cyrff cyhoeddus yng Nghymru yn gweithredu Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015

3.2 Gwasanaethau Gwybodeg GIG Cymru: Gwybodaeth ychwanegol gan Fwrdd Iechyd Prifysgol Aneurin Bevan (10 Mai 2018)

3.3 Heriau digidoleiddio: Gohebiaeth gan Lywodraeth Cymru (16 Mai 2018)

4 Gwasanaeth Awyr oddi mewn i Gymru – Caerdydd i Ynys Môn: sesiwn dystiolaeth

4.1 Clywodd yr Aelodau dystiolaeth gan Andrew Slade, Cyfarwyddwr Cyffredinol yr Economi, Sgiliau ac Adnoddau Naturiol, a Simon Jones, Cyfarwyddwr, Seilwaith

Economaidd, Llywodraeth Cymru ar Wasanaeth Awyr oddi mewn i Gymru – Caerdydd i Ynys Môn

4.2 Cytunodd Andrew Slade i anfon manylion am berfformiad prydlondeb y gwasanaeth awyr a nifer o weithiau y cafodd y gwasanaeth ei ganslo am resymau technegol o gymharu â pherfformiad y gwasanaeth o dan weithredwyr eraill ers 2014.

5 Cynnig o dan Reol Sefydlog 17.42 i benderfynu gwahardd y cyhoedd o'r cyfarfod ar gyfer y busnes canlynol:

5.1 Derbyniwyd y cynnig.

6 Gwasanaeth Awyr oddi mewn i Gymru – Caerdydd i Ynys Môn: Trafod y dystiolaeth a ddaeth i law

6.1 Trafododd yr Aelodau y dystiolaeth a ddaeth i law a chytunwyd i ofyn am fanylion y contract, pan y'i dyfernir.



Llywodraeth Cymru
Welsh Government

Nick Ramsay AC
Cadeirydd y Pwyllgor Cyfrifon Cyhoeddus
Cynulliad Cenedlaethol Cymru
Bae Caerdydd
CF99 1NA

21 Mai 2018

Diolch am eich nodyn diweddar yn gofyn i ni roi'r newyddion diweddaraf i chi am Gronfa Buddsoddi Cymru mewn Adfywio.

Rwy'n ymwybodol o ymrwymiad fy rhagflaenydd (Owen Evans) i roi briff llawn i'r Pwyllgor ar y mater hwn unwaith y bydd y gwaith sy'n mynd rhagddo ar hyn o bryd wedi dod i ben.

Rwy'n siŵr bod y Pwyllgor yn ymwybodol ein bod wedi cyhoeddi, ym mis Ionawr 2018, fod camau cyfreithiol yn cael eu cymryd yn erbyn y ddau sefydliad sy'n gyfrifol am redeg y Gronfa o ddydd i ddydd. Mae'r camau cyfreithiol hyn yn mynd rhagddynt ac nid ydym yn bwriadu gwneud unrhyw ddatganiadau tan fydd y broses wedi ei chwblhau.

Rwy'n fwy na pharod i ailadrodd ymrwymiad Owen Evans i roi adroddiad cymodi sy'n fwy cyflawn i'r Pwyllgor unwaith y bydd yr achos llys wedi gorffen.

Yn y cyfamser, gallaf gadarnhau ein bod yn rhoi adroddiadau cyson i'n cydweithwyr yn Swyddfa Archwilio Cymru, o gofio pa mor bwysig yw'r mater hwn i ni.



Tracey Burke
Cyfarwyddwr Cyffredinol, Addysg a Gwasanaethau Cyhoeddus

Parc Cathays, Caerdydd CF10 3NQ
Cathays Park, Cardiff CF10 3NQ
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Alistair Davey MA Chartered FCIPD
Y Gyfarwyddiaeth Gwasanaethau Cymdeithasol ac
Integreiddio
Social Services and Integration Directorate Y Grŵp Iechyd a
Gwasanaethau Cymdeithasol
Health and Social Services Group



Llywodraeth Cymru
Welsh Government

Nick Ramsay AC,
Cadeirydd, Y Pwyllgor Cyfrifon Cyhoeddus

31 Mai 2018

Annwyl Nick,

Yn dilyn cyfarfod y Pwyllgor Cyfrifon Cyhoeddus yr oeddwn yn bresennol ynddo gydag Albert Heaney ar 30 Ebrill, cytunais i ysgrifennu at y Pwyllgor ynglŷn â'r ddau faes canlynol:

1. Cadarnhau a oes unrhyw blant yn aros i gael eu rhoi mewn gofal yn unrhyw ardal awdurdod lleol, ac os oes, sawl un?

Nid oes unrhyw blentyn yn aros i gael ei roi mewn gofal yng Nghymru. Bydd lleoliad yn cael ei ganfod i bob plentyn a pherson ifanc sydd angen gofal gan awdurdod lleol, a bydd awdurdodau lleol yn gwneud eu gorau i ddod o hyd i'r lleoliad mwyaf addas i blentyn penodol, yn unol â'u dyletswyddau statudol. Mae amryw o opsiynau o ran lleoliadau ar gael i awdurdodau lleol, gan gynnwys lleoliad gyda gofalwr maeth awdurdod lleol, trefniadau gofal gan berthnasau gan gynnwys gorchmynion gwarcheidwaeth arbennig, lleoliad gyda gofalwr asiantaeth faethu annibynnol, neu ofal preswyl. Bydd y lleoliad mwyaf addas i blentyn yn cael ei nodi fel rhan o'r broses cynllunio gofal, sy'n gwneud asesiad cyfannol o anghenion a chanlyniadau personol y plentyn.

Weithiau bydd angen rhoi plentyn mewn trefniant dros dro neu drefniant brys cyn dod o hyd i leoliad mwy addas a hirdymor. Er enghraifft, efallai y bydd angen rhoi plentyn mewn cartref plant nes bod lleoliad maethu addas ar gael, neu efallai y bydd angen rhoi plentyn sydd i'w fabwysiadu gyda rhieni maeth nes y deuir o hyd i fabwysiadwr addas.

Mae awdurdodau lleol yn ceisio sicrhau cyfyngu ar sawl gwaith y caiff plentyn ei symud o'r naill leoliad i'r llall wrth dderbyn gofal. Mae dyletswydd arnynt o dan Ddeddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014 i gymryd camau i sicrhau bod ganddynt ddarpariaeth ddigonol i ddiwallu anghenion eu poblogaeth sy'n derbyn gofal. Mae awdurdodau lleol wrthi'n llunio strategaethau comisiynu lleoliadau

i'w galluogi i gyflawni'r ddyletswydd 'digonolrwydd' hon. Maent hefyd yn cael eu hannog i ddatblygu darpariaeth fwy arbenigol ar sail ranbarthol.

Er ein bod yn casglu data yn genedlaethol o ran sawl gwaith y bydd plentyn yn symud lleoliad, nid ydym yn casglu gwybodaeth am addasrwydd lleoliadau ar gyfer pob plentyn na gwybodaeth ynghylch a yw lleoliad yn diwallu anghenion plentyn yn llawn. Mae'n wybodaeth fanwl a fydd yn rhan o'r broses gynllunio ac adolygu gofal ar gyfer pob plentyn, a bydd ar gael ar lefel awdurdodau lleol. Mae Arolygiaeth Gofal Cymru wrthi'n cynnal adolygiad thematig o wasanaethau i blant sy'n derbyn gofal ledled Cymru, a bydd yn canolbwyntio ar ganlyniadau plant a phobl ifanc, gan gynnwys addasrwydd lleoliadau. Disgwylir iddi gyflwyno adroddiad ym mis Mawrth 2019.

2. Cadarnhau sut y mae'r gwariant ar y Grant Datblygu Disgyblion ar gyfer Plant sy'n derbyn Gofal a'r rhai a fabwysiadwyd yng Nghymru yn Cymharu â'r gwariant yn Lloegr.

Nid yw'n bosibl cymharu'r Grant Datblygu Disgyblion yng Nghymru a'r Premiwm Disgyblion yn Lloegr. Rydym yn buddsoddi symiau na welwyd eu tebyg o'r blaen yn y Grant Datblygu Disgyblion, sef cyfanswm o £93 miliwn yn y flwyddyn ariannol hon, gydag oddeutu £4 miliwn o hynny wedi'i dargedu'n benodol tuag at gefnogi plant sy'n derbyn gofal a phlant mabwysiedig. Mae'r cyllid ar gyfer y Premiwm Disgyblion yn Lloegr oddeutu £2.4 biliwn. Mae'r gwahaniaeth ym maint y cyllidebau yn golygu bod angen inni fod yn fwy creadigol a chraff o ran ein defnydd o'r cyllid yng Nghymru.

Caiff elfen y Grant Datblygu Disgyblion ar gyfer plant sy'n derbyn gofal a phlant mabwysiedig ei rheoli a'i gweinyddu gan y consortia addysg rhanbarthol. Ehangwyd y grant yn 2015 i gynnwys plant mabwysiedig yn benodol. Mae'r buddsoddiad hwn yn cydnabod y bydd llawer o blant mabwysiedig yn profi heriau tebyg ym myd addysg i'r rhai a brofir gan blant sy'n derbyn gofal; ac nad yw gorchymyn mabwysiadu'n golygu nad ydynt bellach yn dioddef yn sgil canlyniadau trawma cynnar a gawsant.

Defnyddir y grant ar lefel strategol i gefnogi strategaethau cyffredinol neu ysgol gyfan sy'n meithrin gallu'r system ac sydd o fudd i garfan ehangach o ddysgwyr; ac fe'i defnyddir hefyd ar gyfer ymyriadau wedi'u targedu i gefnogi anghenion penodol dysgwyr unigol. Er bod dulliau strategol ysgol gyfan o fudd i garfan ehangach, mae'r holl dystiolaeth yn awgrymu bod y rhain yn cael effaith gadarnhaol anghymesur ar grwpiau sy'n agored i niwed, gan gynnwys dysgwyr sy'n derbyn gofal a dysgwyr mabwysiedig.

Enghraifft benodol o brosiect strategol rhanbarthol yw prosiect Ymwybyddiaeth o Ymlyniad Ein Rhanbarth ar Waith (ERW), a ddatblygodd sgiliau gweithwyr addysg proffesiynol fel eu bod yn gallu cefnogi plant sy'n derbyn gofal a phlant mabwysiedig yn well yn ogystal â grŵp ehangach o ddysgwyr sy'n agored i niwed. Defnyddiwyd dull tebyg gan Gonsortium Canolbarth y De ynghylch Profiadau Niweidiol yn ystod

Plentyndod. Gellir ariannu ymyriadau unigol mwy pwrpasol hefyd drwy'r grant; fodd bynnag, mae hyn yn golygu bod angen i wasanaethau addysg fod yn ymwybodol o'u dysgwyr mabwysiedig.

Cyfrifir dyraniadau consortia ar sail nifer y plant sy'n derbyn gofal o fewn eu hardal. Nid yw niferoedd y plant mabwysiedig yn ymddangos yn y cyfrifiad gan na fyddai data gwasanaethau cymdeithasol a gesglir yn genedlaethol ar blant mabwysiedig yn rhoi'r wybodaeth benodol sydd ei hangen, yn arbennig o ran oedran y plant a lle maent yn byw neu'n mynd i'r ysgol.

Rhodddwyd tystiolaeth gan Ysgrifennydd y Cabinet dros Addysg ar y Grant Datblygu Disgyblion i'r Pwyllgor Plant, Pobl Ifanc ac Addysg ym mis Mawrth. Trafodwyd yn benodol sut yr oedd y grant yn cefnogi plant mabwysiedig a chadarnhaodd yr Ysgrifennydd eu bod wrthi'n ystyried casglu data ar blant mabwysiedig drwy'r Cyfrifiad Ysgolion Blynyddol ar Lefel Disgyblion (CYBLD). Roedd Ysgrifennydd y Cabinet yn glir y byddai casglu unrhyw ddata o'r fath yn y dyfodol yn seiliedig yn gyfan gwbl ar ddewis rhieni sy'n mabwysiadu i ddatgelu statws eu plant fel plant mabwysiedig. Fodd bynnag, byddai'n rhoi darlun cenedlaethol nid yn unig o nifer y plant mabwysiedig yn ein hysgolion, ond efallai'n bwysicach eu cyrhaeddiad a'u cynnydd addysgol fel bod modd i wasanaethau asesu a diwallu eu hanghenion addysgol yn well.

Yn ychwanegol at y wybodaeth a ddarparwyd uchod i'r Pwyllgor, efallai y byddwch yn dymuno gwybod am y gwaith ymchwil diweddar a wnaed fel rhan o raglen waith Grŵp Cynghori'r Gweinidog. Gwnaed *Dadansoddiad o ganlyniadau plant a phobl ifanc 4 i 5 mlynedd ar ôl Gorchymyn Gofal terfynol* gan y Sefydliad Gofal Cyhoeddus a gyhoeddwyd ar 15 Mai. Rwy'n atodi dolenni i fersiynau Cymraeg a Saesneg o'r prif adroddiad a'r crynodeb ar wefan Llywodraeth Cymru sy'n nodi casgliadau cadarnhaol ynglŷn â gofal plant sy'n derbyn gofal yng Nghymru.

<https://gov.wales/statistics-and-research/analysis-outcomes-children-young-people4-5-years-after-final-care-order/?skip=1&lang=cy>

<https://gov.wales/statistics-and-research/analysis-outcomes-children-young-people4-5-years-after-final-care-order/?lang=en>

Yn gywir



Alistair Davey MA FCIPD Siartredig
Dirprwy Gyfarwyddwr, Galluogi Pobl
Y Gyfarwyddiaeth Gwasanaethau Cymdeithasol ac Integreiddio

Public Accounts Committee**Inquiry into NHS Informatics Services**

Andrew Griffiths, Director of NHS Wales Informatics Service sent the following information which Members noted on 14 May. As part of that item, Members asked that the figures supplied were checked with the individual health boards. Where the health boards have indicated a different figure, an explanation has been added.

Following the PAC meeting NWIS looked at any double running costs being incurred. The supplier costs are shown in the table below along with the organisations funding them. In addition to telepath costs (awaiting implementation of blood transfusion module) the GP links software requires a software upgrade from one of the GP system suppliers before the legacy system can be fully retired. Those costs (in thousands) are also shown in the table below.

Services:	AB	ABMU	BCU	C&V	CT	HD	Powys	PHW	Vel	Total
Laboratory Information Management System (LIMS)	79	133 151	99	73	42	83 96	0	0	0	509
National GP Links	0	9	9	9	0	9 18.5	0	0	0	36
Total	79	142 160¹	108	82	42	92 114.5²	0	0	0	545

Chamber and Committee Services

6 June 2018

¹ ABMU's situation regarding legacy local LIMS systems is different to most other Health Boards/Trusts. These other organisations have Telepath as their legacy system and each pays a contribution towards a centrally hosted NWIS environment. ABMU previously had Masterlab in place across the organisation and the cost of maintaining it as a single organisation, whilst National LIMS is not complete, is higher than what the other organisations are paying for Telepath. ABMU's actual dual running costs for LIMS is £151k, resulting in a total of £160k (£9k GP Links).

² Hywel Dda UHB has two legacy GP Links systems (Withybush and Bronglais). HDUHB figures are inclusive of VAT.

Vaughan Gething AC/AM
Ysgrifennydd y Cabinet dros Iechyd a Gwasanaethau
Cymdeithasol
Cabinet Secretary for Health and Social Services



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref VG/1287/18

Nick Ramsay, AC
Cadeirydd – Pwyllgor Cyfrifon Cyhoeddus
Cynulliad Cenedlaethol Cymru
Bae Caerdydd
Caerdydd
CF99 1NA

2 Mai 2018

Annwyl Mr Ramsay,

**YMATEB I ADRODDIAD Y PWYLLGOR CYFRIFON CYHOEDDUS AR REOLI
MEDDYGINIAETHAU**

Mae'n bleser gennyf amgáu copi o ymateb Gweinidogion Cymru i'r adroddiad uchod a gaiff ei gyflwyno i'r Swyddfa Gyflwyno.

Ar ran y Cabinet, hoffwn ddiolch i chi a'r Pwyllgor am y ffordd ofalus ac ystyrlon y bu i chi gynnal yr archwiliad a chynhyrchu'r adroddiad.

Yn gywir,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, flowing style.

Vaughan Gething AC/AM
Ysgrifennydd y Cabinet dros Iechyd a Gwasanaethau Cymdeithasol
Cabinet Secretary for Health and Social Services

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Ymateb i'r argymhellion a gynhwysir yn adroddiad Pwyllgor Cyfrifon Cyhoeddus Cynulliad Cenedlaethol Cymru sy'n dwyn y teitl Rheoli Meddyginiaethau

Rydym yn croesawu canfyddiadau'r adroddiad ac yn cynnig yr ymateb canlynol i'r 17 argymhelliad a gynhwysir ynddo.

Argymhelliad 1. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn llunio adroddiad blynyddol yn manylu gwybodaeth am welliannau yn rheoli meddyginiaethau ar draws y Byrddau Iechyd, i gynyddu atebolrwydd a sicrhau bod proffil rheoli meddyginiaethau yn parhau i fod yn uchel ar agenda Byrddau Iechyd.

Derbyn

Nid ydym yn ystyried y broses o gyhoeddi adroddiad blynyddol ychwanegol gan Lywodraeth Cymru fel y dull mwyaf priodol o gyflawni amcanion y Pwyllgor. Fel dewis amgen i gyhoeddi adroddiad blynyddol ychwanegol gan Lywodraeth Cymru, byddwn yn gofyn i Grŵp Strategaeth Meddyginiaethau Cymru Gyfan (AWMSG) gynnal gwaith i lywio a datblygu ei adroddiad blynyddol cyfredol ac adrodd chwarterol ar gynnydd yn erbyn dangosyddion rhagnodi cenedlaethol i sicrhau bod y cynnwys a'r fformat yn fwy perthnasol a hygyrch i aelodau Bwrdd cyrff y GIG.

Caiff y gwaith hwn ei gwblhau mewn pryd ar gyfer cyhoeddi adroddiad blynyddol AWMSG ar gyfer 2018-19.

Yn ogystal, byddwn yn parhau i ddatblygu dangosyddion rheoli meddyginiaethau fel rhan o [Fframwaith Cyflawni GIG Cymru](#) ac yn rhoi'r atebolrwydd o ran perfformiad yn erbyn y fframwaith ar gyrff GIG.

Argymhelliad 2. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn cyhoeddi cyfarwydddeb genedlaethol a bod angen i bob Bwrdd Iechyd ddatblygu ymgyrchoedd i godi proffil rheoli meddyginiaethau. Dylai'r ymgyrchoedd hyn fod yn seiliedig ar enghreifftiau o arfer gorau o'r ymgyrchoedd presennol sydd wedi'u creu yn lleol,

Derbyn

Mae Llywodraeth Cymru yn darparu cyllid i fyrddau iechyd i gefnogi gweithgareddau cyfathrebu sy'n hybu modelau newydd ar gyfer gofal sylfaenol a'r manteision ar gyfer dinasyddion. Mae cyfrifoldeb dinasyddion, gan gynnwys eu cyfrifoldebau mewn perthynas â defnydd darbodus o feddyginiaethau yn elfen graidd o'r gwaith hwnnw.

Rydym yn cydnabod y bu ymgyrchoedd llwyddiannus eisoes sy'n codi proffil rheoli meddyginiaethau, yn arbennig yr ymgyrch *Eich Meddyginiaethau Eich Iechyd* ym Mwrdd

Iechyd Prifysgol Cwm Taf. Yn ogystal â'r cyllid sy'n cael ei roi i fyrddau iechyd ar gyfer gofal sylfaenol, byddwn yn sicrhau bod £50,000 arall ar gael i fyrddau iechyd yn 2018-19 i gynnal gweithgareddau lleol i hybu elfennau mwyaf llwyddiannus yr ymgyrch *Eich Meddyginiaethau Eich Iechyd*.

Argymhelliad 3. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn pennu cynllun i wneud y defnydd gorau o adnoddau fferyllfeydd, gan gynnwys datblygu modiwlau darparu yn Dewis Fferyllfa a galluogi fferyllwyr annibynnol. Dylai'r cynllun hwn adeiladu ar yr argymhellion yn adroddiad y Gymdeithas Fferyllol Frenhinol.

Derbyn

Byddwn yn gweithio gyda Gwasanaeth Gwybodeg GIG Cymru a byrddau iechyd i ddatblygu modiwlau eraill o fewn Dewis Fferyllfa sy'n cefnogi fferyllwyr cymunedol sy'n darparu amrywiaeth gynyddol o wasanaethau clinigol. I'r perwyl hwnnw, mae modiwlau eraill yn cael eu datblygu o fewn Dewis Fferyllfa i gefnogi'r gwasanaeth atal cenhedlu brys cenedlaethol a gwasanaeth profi a thrin dolur gwddf gan fferyllfeydd cymunedol. Bwriedir i'r ddau fodiwl fod ar gael yn ddiweddarach yn 2018-19. Yn ogystal â modiwlau sy'n cefnogi gwaith comisiynu gwasanaethau, mae'r rhaglen Dewis Fferyllfa yn cael ei datblygu i wella cyfathrebu rhwng fferyllfeydd cymunedol a darparwyr eraill y GIG. Ymhlith y datblygiadau hyn mae trosglwyddo llythyrau electronig o fferyllfeydd i feddygon teulu a gofal eilaidd (i'w cyflawni erbyn mis Mawrth 2019), a systemau i ganiatáu i wasanaeth 111 GIG Cymru gyfeirio cleifion priodol at fferyllfa gymunedol.

Mae rhagnodi annibynnol gan fferyllwyr wedi cynyddu'n sylweddol dros y blynyddoedd diwethaf, wedi'i hwyluso gan y cynnydd o ran rolau ym maes meddygon teulu. Ym mis Ionawr 2018 ym maes gofal sylfaenol, rhoddodd 65 o fferyllwyr-ragnodwyr annibynnol 50,484 o bresgripsiynau o 111 o bractisau meddygon teulu. Dyma gynnydd o 150 y cant yn nifer y fferyllwyr-ragnodwyr annibynnol sy'n weithgar, cynnydd o 640 y cant yn nifer y presgripsiynau gan fferyllwyr-ragnodwyr a chynnydd o 171 y cant yn nifer y practisau meddygon teulu sy'n defnyddio fferyllwyr-ragnodwyr annibynnol yn y ddwy flynedd ers mis Ionawr 2016.

Ym mis Ebrill, cadarnhawyd cyllid er mwyn i hyd at 100 o fferyllwyr cymunedol ymgymryd â chysiau rhagnodi annibynnol yn y ddwy flynedd nesaf a darparu cyllid i fyrddau iechyd i gefnogi'r gwaith o sefydlu hyd at 40 o safleoedd braenaru ar gyfer presgripsiynau annibynnol mewn fferyllfeydd cymunedol.

Byddwn yn gofyn i Bwyllgor Fferyllol Cymru weithio gyda rhanddeiliaid, gan gynnwys y Gymdeithas Fferyllol Frenhinol, i ddatblygu cynllun sy'n disgrifio rolau gweithwyr fferyllol proffesiynol yng Nghymru yn y dyfodol a'r camau i'w cymryd gan yr holl rhanddeiliaid er mwyn manteisio i'r eithaf ar y defnydd ohonynt. Caiff y cynllun ei gwblhau ar ddechrau 2019-20.

Argymhelliad 4. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn datblygu system rheoli data i olrhain nifer y fferyllwyr sy'n gweithio yng Nghymru a'r rolau sy'n cael eu cyflawni. Gellir defnyddio hyn hefyd i gynllunio anghenion a gofynion hyfforddiant. Dylid

hefyd ystyried ymestyn hyn i gynnwys gwybodaeth am staff ehangach fferyllfeydd fel technegwyr sydd hefyd â rôl esblygol a allai effeithio ar anghenion hyfforddiant y sector.

Gwrthod

Mae nifer o ffynonellau gwybodaeth eisoes ar gael sy'n darparu sylfaen ar gyfer nodi anghenion hyfforddiant ar gyfer gweithwyr fferyllol proffesiynol yng Nghymru. Ymhlith y rhain mae:

1. Cronfa Ddata Fferylliaeth Cymru Gyfan (AWPD) – sy'n cynnwys gwybodaeth am achredu fferyllwyr a thechnegwyr fferyllol sy'n darparu gwasanaethau clinigol ychwanegol mewn fferyllfeydd cymunedol;
2. Cofnod Staff Electronig (ESR) – sy'n cynnwys gwybodaeth am fferyllwyr a thechnegwyr fferyllol a gyflogir gan sefydliadau GIG;
3. Cofrestri, a gynhelir gan bob corff GIG yng Nghymru, ar gyfer rhagnodwyr anfeddygol a gyflogir gan y cyrff hynny; a
4. Cronfa ddata o weithwyr fferyllol proffesiynol sydd wedi cofrestru gyda Chanolfan Addysg Broffesiynol Fferylliaeth Cymru (WCPPE)

O gofio cyfyngiadau casglu data ynghylch gweithwyr fferyllol proffesiynol sy'n gweithio yn y sector preifat, nid ydym yn credu y byddai manteision system rheoli data newydd yn gorbwyso costau datblygu a chynnal system o'r fath.

Yn y dyfodol, bydd cynllunio i ddiwallu anghenion hyfforddi gweithwyr fferyllol proffesiynol yn swyddogaeth a gaiff ei chyflawni gan Addysg a Gwella Iechyd Cymru (AaGIC). Byddwn yn gweithio gydag AaGIC i sicrhau bod ffynonellau gwybodaeth sy'n bodoli eisoes yn cael eu defnyddio'n llawn, a lle bo angen, y cânt eu datblygu i gefnogi'r swyddogaeth hon.

Argymhelliad 5. Mae'r Pwyllgor yn argymhell y dylai Llywodraeth Cymru gynnal gwerthusiad o fferyllwyr clwstwr, sy'n gwerthuso'r model cyllido a'r model recriwtio ar gyfer fferyllwyr o fewn y model clystyrau.

Gwrthod

Mae'r £10m a ddyrennir gan Lywodraeth Cymru o'r gronfa genedlaethol ar gyfer gofal sylfaenol ar gael i glystyrau ei fuddsoddi fel y dymunant ac mae'r cyllid hwn yn rheolaidd. Felly, gellid ei ddefnyddio i gyllido penodiadau tymor byr neu hirdymor. Mae Llywodraeth Cymru yn disgwyl i glystyrau gynnal gwerthusiad rhesymol a chymesur o'u mentrau. Yna dylai mentrau llwyddiannus gael eu prif ffrydio, gan ryddhau cyllid y clwstwr i'w ail-fuddsoddi mewn mentrau newydd ac arloesol eraill. Gellid prif ffrydio'r swyddi hyn drwy i bractisau meddygon teulu annibynnol yn eu cyflogi'n uniongyrchol ar ran y clwstwr neu drwy gyllid dewisol y byrddau iechyd.

Mae clystyrau wedi bod yn buddsoddi, ar raddfa eang, mewn fferyllwyr ychwanegol fel rhan annatod o weithlu gofal sylfaenol aml-broffesiynol darbodus ac erbyn hyn, caiff yr arfer hwn ei hystyried yn arfer dda ledled Cymru. Felly, nid yw Llywodraeth Cymru yn cefnogi'r angen am werthusiad ffurfiol cenedlaethol o'r rôl hon sydd bellach wedi'i sefydlu'n gadarn.

Argymhelliad 6. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn diwygio'r contract fferyllfa gymunedol i gyflawni'r newidiadau angenrheidiol i wireddu potensial llawn y sector fferyllol a gwireddu'r nod o symud o gyfres o drefniadau yn seiliedig ar nifer i ansawdd, a gweithredu amserlenni.

Derbyn

Ym mis Hydref 2016, cyhoeddais fwriad Llywodraeth Cymru i wneud trefniadau cytundebol newydd ar gyfer fferyllfeydd cymunedol sy'n sicrhau yn y dyfodol y byddant yn darparu amrywiaeth ehangach o wasanaethau sy'n canolbwyntio ar elfennau clinigol ac yn dangos ymrwymiad i wella ansawdd gwasanaethau. Yn 2017-18, cyflwynwyd trefniadau contract newydd a oedd yn cynnwys 1) cyllid cynyddol ac wedi'i neilltuo ar gyfer comisiynu gwasanaethau clinigol ychwanegol yn lleol gan fyrddau iechyd; 2) cyllid i gefnogi cydweithredu rhwng fferyllwyr a gweithwyr gofal iechyd proffesiynol eraill; a 3) cynllun ansawdd a diogelwch newydd ar gyfer fferyllfeydd cymunedol. Cafodd y newidiadau eu cyllido drwy aiddosbarthu £3.5 miliwn o gyllid contract o drefniadau sydd wedi'u llywio gan faint (h.y. rhagnodi) i'r elfennau newydd sy'n canolbwyntio ar ansawdd.

Ar gyfer 2018-19, daethpwyd i gytundeb â Fferylliaeth Gymunedol Cymru i aiddosbarthu £3 miliwn pellach i gefnogi comisiynu gwasanaethau pellach, i gryfhau ac ymestyn cydweithredu a chynlluniau ansawdd a diogelwch ac i ddatblygu'r gweithlu fferylliaeth gymunedol.

Byddwn yn parhau i bontio i'r trefniadau contract newydd ar gyfer fferylliaeth gymunedol drwy negodiadau blynyddol, a bydd y trefniadau newydd ar waith yn llawn erbyn diwedd 2020-21.

Argymhelliad 7. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn cynllunio ar gyfer technolegau newydd mewn pecynnau presgripsiwn gan hwyluso'r defnydd o feddyginiaeth heb ei hagor pan nad yw'n cyfaddawdu diogelwch cleifion gan gynnwys y newidiadau deddfwriaethol angenrheidiol a allai fod ynghlwm, i sicrhau'r manteision mwyaf ar gyfer unrhyw arbedion y gellir eu cyflawni.

Gwrthod

Mae gan fyrddau iechyd bolisïau a gweithdrefnau ar waith eisoes er mwyn manteisio i'r eithaf ar aildefnyddio meddyginiaethau o fewn ysbytai yng Nghymru. Mae'r amgylchedd sydd wedi'i reoli a chyfyngiadau o ran mynediad i feddyginiaethau o fewn ysbytai yn caniatáu i feddyginiaethau gael eu haildefnyddio gyda gradd uchel o hyder nad ydynt wedi cael eu cyfaddawdu naill ai'n fwriadol neu'n anfwriadol. Mae Grŵp Cymheiriaid Prif Fferyllwyr y GIG yn cynnal gwaith i safoni'r polisïau hyn ac i feintioli gwerth y meddyginiaethau a gaiff eu haildefnyddio o fewn ysbytai.

Fodd bynnag, yn y gymuned, ar ôl i feddyginiaeth adael y fferyllfa, ni ellid gwarantu ei diogelwch a'i hansawdd. Er enghraifft, mae perygl bod rhywun wedi ymyrryd â'r cynhwysydd, neu bod y pecyn wedi cael ei adael yn agored i dymheredd eithafol a lleithder, gan olygu nad yw'n effeithiol.

Yn ôl y Gyfarwyddeb Ffugio Meddyginiaethau (FMD) a ategwyd gan Reoliad Dirprwyedig (EU2016/161) Senedd a Chyngor Ewrop sy'n dod i rym ym mis Chwefror 2019, bydd yn ofynnol i becynnau meddyginiaethau sy'n dod i'r gadwyn gyflenwi ar neu ar ôl 9 Chwefror 2019 gael eu ffitio â dyfais gwrth-ymyrryd (ar ffurf sêl diogelwch). Er bod dyfeisiau gwrthymyrryd o'r fath yn ymdrin â phryderon yn ymwneud ag addasu meddyginiaethau yn fwriadol, nid ydynt yn ymdrin â phryderon yn ymwneud â storio meddyginiaethau yn amhriodol a'r posibilrwydd o golli effeithiolrwydd sy'n deillio o hynny. Ar hyn o bryd, mae'r costau sy'n gysylltiedig â pheccynnau sy'n sensitif i dymheredd yn debygol o olygu na ellid

eu defnyddio'n eang, yn arbennig pan ystyrir y gost gymedrig isel a'r gost ganolrifol is sydd ynghlwm wrth feddyginiaethau a ragnodir¹.

At hynny, mae'r FMD yn cyflwyno rhwystrau newydd i aildefnyddio meddyginiaethau. Mae'r FMD yn ei gwneud yn ofynnol i fferyllwyr, ar adeg cyflenwi meddyginiaeth i gleifion, wirio dilysrwydd meddyginiaeth yn erbyn storfa ddata genedlaethol sy'n cynnwys manylion meddyginiaethau cyfreithlon yn y gadwyn gyflenwi. Ar ôl y broses wirio hon, caiff manylion y feddyginiaeth eu dileu o'r storfa ac ni ellid eu mewnbynnu eto. Mae hyn yn golygu pan gaiff meddyginiaeth ei dychwelyd i fferyllfa neu ei hailddosbarthu gan fferyllfa, ni ellid gwirio ei dilysrwydd, gan danseilio manteision FMD.

Yn olaf, byddai'r argymhelliad yn golygu newidiadau i'r ffordd y caiff meddyginiaethau a gweithwyr fferyllol proffesiynol eu rheoleiddio yn y DU. Llywodraeth y DU sy'n cadw'r hawl mewn perthynas â materion o'r fath.

Argymhelliad 8. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn ymchwilio i ffyrdd o harneisio'r arbenigedd academiaidd yng Nghymru i ddeall graddfa Derbyniadau sy'n Gysylltiedig â Meddyginiaeth a sut i'w lleihau.

Derbyn

Ym mis Ionawr 2018, sefydlodd y Prif Swyddog Fferyllol weithgor oes fer (SLWG) sy'n cynnwys arbenigwyr diogelwch meddyginiaethau ledled Cymru i gynghori ar y dull gweithredu cyffredinol a'r rhaglen angenrheidiol i lywio gwelliannau ym maes diogelwch meddyginiaethau yn y GIG yng Nghymru. Cynhaliodd y gweithgor hwn, sy'n dod ag arbenigwyr ynghyd o bractisau a'r byd academiaidd, gyfarfodydd ym mis Ionawr a Mawrth, a bwriedir cynnal cyfarfodydd eraill yn 2018.

Ar hyn o bryd mae'r gweithgor yn archwilio ffynonellau data, gan gynnwys ond heb fod yn gyfyngedig i dderbyniadau i ysbytai, er mwyn pennu cyfres briodol o fesurau ar gyfer niwed sy'n gysylltiedig â meddyginiaethau fel ffocws ar gyfer rhaglen waith i wella diogelwch meddyginiaethau yng Nghymru.

Rydym yn cydnabod bod niwed sylweddol yn deillio o dderbyniadau sy'n gysylltiedig â meddyginiaethau (MRAs) ond rydym yn pryderu y byddai ffocws ar feintioli MRAs *post hoc* yn tynnu oddi wrth gamau i atal niwed cyn iddo ddigwydd. Mae'n anodd canfod MRAs oherwydd presenoldeb ffactorau dryslyd mewn llawer o achosion, ac mae asesiadau cadarn o nifer yr achosion o MRAs wedi bod yn gyfyngedig i astudiaethau ymchwil. Fodd bynnag, mae gennym ddealltwriaeth dda o'r meddyginiaethau a'r sefyllfaoedd a gysylltir amlaf ag MRAs; y flaenoriaeth ar gyfer lleihau niwed sy'n gysylltiedig â meddyginiaethau fyddai ymdrin â hyn.

Bydd y gweithgor yn gorffen ei waith erbyn mis Hydref 2018, ac ar ôl hynny bydd yn cyflawni ei rôl fel grŵp llywio'r rhaglen genedlaethol ar gyfer diogelwch meddyginiaethau.

Argymhelliad 9. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn darparu diweddariad ar y gwaith gwerthuso ar beiriannau gwerthu awtomataidd yr oedd i fod wedi'i gwblhau erbyn mis Mehefin 2017.

¹ Ym mis Ionawr 2018, y gost net gymedrig ym 2018 ym 16 presgripsiwn yng Nghymru oedd £7.28 a'r gost net ganolrifol ar gyfer cynhwysyn oedd £1.59.

Derbyn

Cynhaliwyd archwiliad o'r defnydd presennol o beiriannau gwerthu awtomataidd ar wardiau mewn ysbytai'r GIG yng Nghymru ym mis Chwefror 2017. Ym mis Mai 2017, cytunwyd ar restr wedi'i blaenoriaethu o fuddsoddiadau ar gyfer peiriannau gwerthu awtomatig ar wardiau gyda grŵp cymheiriaid Prif Fferyllwyr y GIG. Byddwn yn ysgrifennu at y pwyllgor gyda manylion yr archwiliad a'r ymarfer blaenoriaethu erbyn diwedd mis Mai 2018.

Argymhelliad 10. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn cydlynu darn o waith i rannu arfer gorau gan Fyrddau Iechyd yn ymwneud â systemau gwerthu awtomataidd i helpu i lywio penderfyniadau yn y dyfodol ar dulliau storio meddyginiaethau.

Derbyn

Cynhaliwyd gweithdy ar systemau gwerthu awtomataidd ar wardiau wedi'i drefnu gan grŵp cymheiriaid Prif Fferyllwyr y GIG ym mis Tachwedd 2017 ac roedd yn cynnwys amrywiaeth eang o randdeiliaid o bob corff y GIG yng Nghymru. Rhoddodd y gweithdy gyfle i gyfranogwyr rannu profiadau o systemau gwerthu awtomataidd ar wardiau mewn ysbytai yng Nghymru ac i drafod dulliau gweithredu yn y dyfodol o ran defnyddio storffeydd meddyginiaethau awtomataidd ar wardiau. Cynhyrchwyd adroddiad cychwynnol o'r gweithdy a chaiff ei rannu gyda'r Pwyllgor fel rhan o ddiweddariad cynhwysfawr ar gynnydd yn erbyn yr argymhellion a wnaed gan Archwilydd Cyffredinol Cymru ym mis Mai 2018. Mae gwaith pellach yn cael ei gynnal nawr i bennu set o egwyddorion ar gyfer cyflwyno dulliau o storio meddyginiaethau awtomataidd. Rhagwelir y caiff y gwaith ei gwblhau erbyn mis Hydref 2018.

Argymhelliad 11. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn nodi p'un a ellir dysgu unrhyw wersi o GIG Lloegr yn ymwneud â chanllawiau ar eitemau na ddylid eu rhagnodi fel arfer a'r arbedion posibl y gallai hyn ei sicrhau.

Derbyn

Mae gan Lywodraeth Cymru bryderon ynghylch dull gweithredu GIG Lloegr i gyfyngu ar ragnodi rhai meddyginiaethau ar sail eu bod ar gael i'w prynu 'dros y cownter' mewn fferyllfeydd. Mae gan fesurau o'r fath y potensial i gyfyngu ar fynediad i driniaeth effeithiol, yn arbennig ymhlith pobl ar incymau isel, ac felly i ymestyn anghydraddoldebau. Bydd y Pwyllgor yn dymuno nodi bod y canllawiau terfynol ar y mater hwn gan GIG Lloegr yn cynnwys nifer o eithriadau i ganiatáu i feddygon teulu barhau i ragnodi'r meddyginiaethau hyn mewn sefyllfaoedd penodol.

Rydym yn annog cyrff y GIG yng Nghymru i gymryd camau i leihau amrywiad heb ei warantu wrth ragnodi a chyfyngu ar yr arfer o ragnodi meddyginiaethau â gwerth clinigol cyfyngedig.

Ym mis Mehefin 2017, ysgrifennodd y Prif Swyddog Meddygol a'r Prif Swyddog Fferyllol [at Gyfarwyddwyr Meddygol y GIG](#) yn gofyn i fyrddau iechyd nodi pob practis meddyg teulu yn eu hardal ac unrhyw faes clinigol o fewn gofal eilaidd, lle roedd co-proxamol yn cael ei ragnodi, ac i gynnal arolwg brys o gleifion gyda'r bwriad o'u symud i driniaethau amgen a mwy diogel.

Yn dilyn hyn, ym mis Hydref 2017, cyhoeddodd AWMSG [ganllawiau](#) yn cefnogi cyfyngiadau i ragnodi pedair meddyginiaeth arall, gyda gwariant blynyddol cyfunol o £5.4 miliwn yn 2016-17 a nodwyd fel blaenoriaeth isel ar gyfer cyllid y GIG Cymru. Caiff y cynnydd o ran

Ileihau gwariant ar y meddyginiaethau hyn ei olrhain gan Grŵp Cymheiriaid Prif Fferyllwyr y GIG a'i adrodd i Grŵp Effeithlonrwydd, Gwerth a Gwella Gofal Iechyd Llywodraeth Cymru.

Yn ystod 2018-19 bydd AWMSG yn gweithio gyda chyrrff y GIG yng Nghymru i nodi cyfleoedd pellach i leihau gwariant ar feddyginiaethau â gwerth clinigol cyfyngedig. Caiff canllawiau GIG Lloegr eu hystyried yn y gwaith hwn.

Argymhelliad 12. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn llunio adroddiad ar arfer gorau ar archebu presgripsiynau amlroddadwy gan grwpiau clwstwr mewn lleoliadau cartrefi gofal i helpu i lywio polisiau a chymau gweithredu ar bresgripsiynau amlroddadwy,

Ac

Argymhelliad 13. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn rhoi'r diweddaraaf am waith y grŵp rhagnodi darbodus mewn perthynas â'i waith ar y modelau amrywiol ar gyfer systemau presgripsiynau amlroddadwy ym mis Medi 2018 er mwyn caniatáu i'r Pwyllgor fonitro cynnydd ar hyn.

Derbyn

Roedd gwaith y grŵp gweithredu rhagnodi darbodus (PPIG) yn hanfodol wrth nodi meysydd lle y gellid gwella systemau rhagnodi amlroddadwy. Ar ôl i swyddogion Llywodraeth Cymru roi tystiolaeth i'r Pwyllgor ym mis Mawrth 2016, disodlwyd PPIG a throsglwyddwyd y cyfrifoldeb dros weithredu argymhellion y grŵp a phrofi'r dulliau amrywiol a argymhellwyd i wella rhagnodi amlroddadwy a lleihau gwastraff i grŵp cymheiriaid Prif Fferyllwyr y GIG.

Bydd Llywodraeth Cymru yn casglu, o bob bwrdd iechyd a Fferyllfa Gymunedol Cymru, tystiolaeth o ganlyniadau darnau amrywiol o waith sy'n cael eu gwneud er mwyn gwella rhagnodi amlroddadwy, gan gynnwys gwaith i wella'r broses o archebu presgripsiynau amlroddadwy o fewn cartrefi gofal, a darparu diweddariad ar y gwaith hwn i'r Pwyllgor ym mis Ionawr 2019.

Argymhelliad 14. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn gwerthuso'r gwaith o gyflwyno'r system Trawsgrifio Meddyginiaeth ac e-Ryddhau er mwyn ystyried cynnydd a manteision y dull hwn.

Derbyn

Mae llawer o dystiolaeth ar gael sy'n dangos bod perygl mawr o gam-gyfathrebu a gwneud newidiadau anfwriadol i feddyginiaethau cleifion pan fyddant yn symud rhwng darparwyr gofal, ac mae hyn yn peri problemau sylweddol. Drwy wella'r broses o drosglwyddo gwybodaeth am feddyginiaethau ar draws pob lleoliad gofal, gellid lleihau nifer yr achosion o niwed y gellid ei osgoi i gleifion, gwella diogelwch cleifion a chyfrannu at leihau nifer y derbyniadau ac aildderbyniadau sy'n ymwneud â meddyginiaethau y gellid eu hosgoi.

Cynhaliwyd gwerthusiadau o fanteision y system o Drawsgrifio ac e-Ryddhau

Meddyginiaethau (MTeD) yn flaenorol gan Wasanaeth Gwybodeg GIG Cymru (NWIS)² a Bwrdd Iechyd Prifysgol Cwm Taf³ a ddangosodd welliannau o ran ansawdd ac amseriad rhannu gwybodaeth am ryddhau gyda meddygon teulu cleifion.

Yn ystod ymchwiliad y Pwyllgor mae argaeledd MTeD ar draws cyrff y GIG yng Nghymru wedi cynyddu'n sylweddol gyda'r system MTeD yn cael ei gweithredu mewn pum bwrdd iechyd a datrysiadau e-ryddhau a oedd yn bodoli eisoes ar waith mewn dau fwrdd iechyd. Mae gwelliannau pellach i'r system MTeD yn cael eu cynllunio a fydd wedyn yn hwyluso'r broses o'i gweithredu yn y ddau fwrdd iechyd sy'n weddill ar ddiwedd 2018-19.

Rydym yn disgwyl i NWIS a'r byrddau iechyd gael trefniadau gwerthuso priodol yn eu lle sy'n sicrhau bod manteision disgwylidig y system MTeD yn cael eu gwireddu. Byddwn yn gweithio gyda NWIS i sicrhau bod y mesurau gwerthuso hyn yn rhan o adroddiadau cynnydd arferol mewn perthynas â chyflwyno MTeD.

Argymhelliad 15. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn rhoi'r wybodaeth ddiweddaraf am gynnydd yn erbyn argymhelliad yr Archwilydd Cyffredinol ar gofnod meddygon teulu a'r argymhellion eraill sydd eu heb eu cyflawni yn adroddiad yr Archwilydd Cyffredinol.

Derbyn

Yn hanesyddol, roedd mynediad i Gofnod Meddygon Teulu Cymru (WGPR) yn gyfyngedig i leoliadau gofal brys megis adrannau damweiniau ac achosion brys. Fodd bynnag, ers mis Tachwedd 2016, mae fferyllwyr a thechnegwyr fferyllol sy'n gweithio mewn ysbytai yng Nghymru wedi cael mynediad llawn i'r WGPR mewn lleoliadau gofal a gynlluniwyd yn ogystal â lleoliadau gofal brys. Mae hyn yn golygu y gall meddygon a fferyllwyr bellach gael mynediad i WGPR ar wardiau dewisol ac mewn clinigau cleifion allanol yn ogystal â mewn lleoliadau gofal heb eu trefnu.

Ym mis Tachwedd 2017, estynnwyd mynediad i'r WGPR yn gyntaf i bedair fferyllfa gymunedol ac yna 11, gan ddarparu'r gwasanaeth cenedlaethol ychwanegol ar gyfer cyflenwad brys o feddyginiaethau. Mae canlyniadau'r cynllun peilot hwn yn cael eu gwerthuso gan NWIS cyn cyflwyno mynediad i'r WGPR i bob fferyllfa gymunedol.

Byddwn yn ysgrifennu at y pwyllgor gyda diweddariad ar gynnydd yn erbyn yr argymhellion sy'n weddill a wnaed yn adroddiad yr Archwilydd Cyffredinol ym mis Mai 2018.

Argymhelliad 16. Mae'r Pwyllgor yn argymhell fel rhan o waith comisiynu a chyflwyno system e-ragnodi newydd Llywodraeth Cymru, ei bod yn datblygu cynllun gweithredu ategol i helpu i gyflawni'r newid diwylliannol sydd ei angen i gyd-fynd â chyflwyno system newydd

Ac

Argymhelliad 17. Mae'r Pwyllgor yn argymhell bod Llywodraeth Cymru yn rhannu ei chynllun gweithredu a cherrig milltir allweddol ar gyfer y system rhagnodi a rheoli meddyginiaethau yn electronig (EPMA) gyda'r Pwyllgor.

² Gwasanaeth Gwybodeg GIG. Adroddiad ar Werthusiad y Prosiect Trawsgrifio ac e-Ryddhau Meddyginiaethau. Ionawr 2014

³ Davies C. Llythyr Cyngor y Prosiect e-Ryddhau a'r Prosiect. Bwrdd Iechyd Prifysgol Cwm Taf, Tachwedd 2017.

Derbyn

Mae NWIS wedi sefydlu prosiect Rhagnodi Electronig, Fferylliaeth a Gweinyddu Meddyginiaethau mewn Ysbytai Cymru (WHEPPMA) i ddatblygu a gweithredu'r cynllun cenedlaethol ar gyfer rhagnodi ym maes gofal eilaidd.

Mae'r tîm prosiect yn gweithio gyda rhanddeiliaid ar hyn o bryd i gwblhau'r achos busnes ar gyfer caffael system fferylliaeth newydd mewn ysbytai a datrysiad rhagnodi electronig a gweinyddu meddyginiaethau. Caiff yr achos busnes ei ystyried gan Lywodraeth Cymru maes o law. Yn amodol ar gwblhau achos busnes boddhaol, disgwylir i'r gwaith o gaffael y systemau hyn gychwyn yn ystod 2018-19 ac y byddant ar waith ar ddechrau 2019. Bydd y cynllun gweithredu, gan gynnwys y camau sydd eu hangen gan gyrrff y GIG i gyflawni'r newid busnes angenrheidiol i fanteisio i'r eithaf ar fanteision e-ragnodi, a'r cerrig milltir, yn cael eu sefydlu gan NWIS drwy'r prosiect WHEPPMA ac yn amodol ar gymeradwyo'r achos busnes, byddwn yn gofyn i NWIS rannu eu cynlluniau â'r Pwyllgor.

Vaughan Gething AC/AM
Ysgrifennydd y Cabinet dros Iechyd a Gwasanaethau
Cymdeithasol
Cabinet Secretary for Health and Social Services



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref VG/1287/18

Nick Ramsay AC
Cadeirydd – Y Pwyllgor Cyfrifon Cyhoeddus
Cynulliad Cenedlaethol Cymru
Bae Caerdydd
Caerdydd
CF99 1NA

31 Mai 2018

Annwyl Mr Ramsay,

**ADRODDIAD RHEOLI MEDDYGINIAETHAU Y PWYLLGOR CYFRIFON CYHOEDDUS –
YMATEB PELLACH**

Yn dilyn fy ymateb i'r adroddiad uchod a gyflwynwyd i'r Swyddfa Gyflwyno ar 2 Mai, mae'n bleser gennyf amgáu diweddariad ar y cynnydd yn erbyn yr argymhellion a wnaed gan Archwilydd Cyffredinol Cymru yn yr adroddiad Rheoli Meddyginiaethau ym Meysydd Gofal Sylfaenol cc Eilaidd.

Yn gywir,

A handwritten signature in black ink that reads "Vaughan Gething". The signature is written in a cursive, flowing style.

Vaughan Gething AC/AM
Ysgrifennydd y Cabinet dros Iechyd a Gwasanaethau Cymdeithasol
Cabinet Secretary for Health and Social Services

Y Pwyllgor Cyfrifon Cyhoeddus / Public Accounts Committee
PAC(5)-16-18 P2

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Ymateb wedi'i ddiweddarau i'r argymhellion a gynhwysir yn adroddiad Archwilydd Cyffredinol Cymru sy'n dwyn y teitl rheoli meddyginiaethau ym meysydd gofal sylfaenol ac eilaidd

Argymhellion Archwilydd Cyffredinol Cymru	Ymateb Llywodraeth Cymru	Y Sefyllfa Bresennol
<p>Dylai Llywodraeth Cymru, Gwasanaeth Gwybodeg GIG Cymru a'r holl gyrrff iechyd gytuno ar gynllun manwl â chyfyngiad amser ar gyfer cyflwyno systemau rhagnodi electronig ym maes gofal eilaidd, ynghyd â phroses eglur ar gyfer monitro darpariaeth y cynllun.</p>	<p>Derbyniwyd.</p> <p>Sefydlodd Gwasanaeth Gwybodeg GIG Cymru brosiect Rhagnodi a Rhoi Meddyginiaethau yn Electronig mewn Ysbytai yng Nghymru er mwyn datblygu a gweithredu'r cynllun cenedlaethol ar gyfer rhagnodi electronig ym maes gofal eilaidd a chynhaliwyd cyfarfod cyntaf bwrdd y prosiect ar 23 Tachwedd 2016.</p> <p>Ar hyn o bryd mae tîm y prosiect yn gweithio gyda rhanddeiliaid i ddiffinio union gwmpas y prosiect a'r anghenion o ran y system. Ar ôl gwneud hyn bydd y Gwasanaeth Gwybodeg yn cwblhau'r achos busnes dros gaffael system fferylliaeth ysbytai newydd a datrysiad i ragnodi a rhoi meddyginiaethau yn electronig, a bydd Llywodraeth Cymru yn ystyried hyn. Yn ddibynnol ar gwblhau'r achos busnes, disgwylir y bydd y systemau hyn wedi'u caffael yn ystod 2018-19 ac y cychwynnir eu rhoi ar waith ar ddechrau 2019.</p>	<p>Cyfeiriaf aelodau'r pwyllgor at yr ymateb a roddais yn fy llythyr at Gadeirydd y Pwyllgor Cyfrifon Cyhoeddus, dyddiedig 2 Mai.</p>

<p>Dylai Prif Swyddog Fferyllol Cymru arwain adolygiadau cenedlaethol i asesu cydymffuriad pob corff iechyd â'r polisi MARRS, i asesu effeithiolrwydd y rhaglen hyfforddiant gorfodol newydd ar reoli meddyginiaethau ac i asesu cynaliadwyedd hirdymor camau a gymerwyd ym mhob corff iechyd i roi sylw i'r holl ganfyddiadau sy'n gysylltiedig â meddyginiaethau o Ymddiried mewn Gofal; a</p> <p>Dylai pob corff iechyd ddatblygu cynllun â chyfyngiad amser ar gyfer gwella storio a diogelwch meddyginiaethau ar wardiau ysbyty, gan gynnwys ystyriaeth benodol o fanteision cyflwyno peiriannau gwerthu awtomatig.</p>	<p>Derbyniwyd.</p> <p>Bydd Prif Swyddog Fferyllol Cymru yn ailgynnull y gweithgor Rhoi, Cofnodi, Adolygu a Storio Meddyginiaethau (MARRS) er mwyn cynnal adolygiad o gydymffuriad pob corff iechyd â'r polisi MARRS. Oherwydd amgylchiadau annisgwyl bu oedi wrth weithredu'r rhaglen e-ddysgu ar roi meddyginiaethau. Bydd y gweithgor felly yn ystyried ymhellach sut y gellir cyflwyno'r rhaglen e-ddysgu yn y modd mwyaf effeithiol. Rhagwelwn y bydd cyfarfod cyntaf y gweithgor MARRS, ar ôl ei ailgynnull, yn cael ei gynnal ym mis Ebrill 2017 ac y bydd yn cwblhau ei adolygiad erbyn mis Mawrth 2019.</p> <p>Cyflwynodd yr Hysbysiad Diogelwch Cleifion PSN 030, a gyhoeddwyd ym mis Ebrill 2016, y safonau disgwyliedig ar gyfer storio meddyginiaethau yn ddiogel ar wardiau ysbytai. Rydym wedi nodi'r angen i adolygu'r gofynion sydd yn yr hysbysiad yng ngoleuni pryderon y byddai'r gost o ddisodli'r cyfleusterau storio ar bob ward ysbyty, waeth beth fo'u cyflwr presennol, yn anghymesur â'r budd a ragwelir yn sgil gwneud hynny; o ystyried y lefel isel o risg sydd i'r cyfleusterau storio ar y rhan fwyaf o wardiau. Bydd y gweithgor MARRS, fel</p>	<p><u>Adolygiad cenedlaethol i asesu cydymffuriad pob corff iechyd â'r polisi MARRS</u></p> <p>Cafodd y gweithgor Rhoi, Cofnodi, Adolygu a Storio Meddyginiaethau (MARRS) ei ailgynnull yn 2017 er mwyn cynnal adolygiad o gydymffuriad pob corff iechyd â'r polisi MARRS Cymru Gyfan.</p> <p>Mae'r gweithgor MARRS wedi datblygu asesiad o gydymffuriad a ddosbarthwyd i bob bwrdd iechyd, Canolfan Ganser Felindre ac Ymddiriedolaeth GIG Iechyd Cyhoeddus Cymru ar ddiwedd 2017; cyflwynwyd yr asesiadau wedi'u cwblhau i'r gweithgor ym mis Ionawr 2018.</p> <p>Mae gweithgor MARRS wrthi'n adolygu'r asesiad a'r dystiolaeth ategol a gyflwynwyd gan bob corff iechyd cyn penderfynu a oes angen unrhyw gamau pellach.</p> <p><u>E-ddysgu MARRS</u></p> <p>Cyflwynwyd y rhaglen e-ddysgu MARRS ar roi meddyginiaethau i holl weithwyr y GIG sy'n ymwneud â rhoi meddyginiaethau drwy'r Cofnod Staff Electronig ym mis Ebrill 2018.</p>
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	<p>rhan o'i waith, yn adolygu PSN 030 a chaiff canllawiau eu diweddarau a'u cyhoeddi cyn diwedd 2017.</p> <p>Bydd y Prif Swyddog Fferyllol, ar y cyd â Phrif Fferyllwyr byrddau iechyd lleol a Chanolfan Ganser Felindre, yn cwblhau archwiliad o'r defnydd presennol o beiriannau gwerthu awtomatig ar wardiau yn ysbytai'r GIG yng Nghymru ac yn datblygu rhestr yn blaenoriaethu'r safleoedd ble y dylid defnyddio periannau gwerthu awtomatig ar wardiau. Caiff y gwaith hwn ei gwblhau erbyn mis Mehefin 2017.</p>	<p><u>Gwella storio meddyginiaethau</u></p> <p>Mae gweithgor MARRS wedi adolygu'r Hysbysiad Diogelwch Cleifion PSN 030, sy'n amlinellu'r safonau disgwylidig ar gyfer storio meddyginiaethau yn ddiogel ar wardiau ysbytai. Mae'r gweithgor yn ystyried a fyddai'r gost sylweddol o adnewyddu'r cyfleusterau storio ar bob ward ysbyty, waeth beth fo'u cyflwr presennol, yn anghymesur â'r budd a ragwelir yn sgil gwneud hynny. Er mwyn blaenoriaethu adnewyddu'r cyfleusterau storio ar wardiau ysbytai, mae'r gweithgor wrthi'n adolygu PSN 030 i gyflwyno'r gofyniad i gyrff y GIG fabwysiadu dull safonedig o gynnal asesiadau risg o gyfleusterau storio.</p> <p>Gwnaed cyfrif stoc o'r defnydd presennol o beiriannau gwerthu awtomatig ar wardiau yn ysbytai'r GIG yng Nghymru ym mis Chwefror 2017. (atodiad A). Yn dilyn hyn lluniodd Grŵp Cymheiriaid Prif Fferyllwyr y GIG restr yn blaenoriaethu'r safleoedd y dylid buddsoddi ynddynt.</p> <p>Yn fy ymateb diweddar, cynghorais aelodau'r pwyllgor i gynnal gweithdy ar beiriannau gwerthu awtomatig ar wardiau, wedi'i drefnu gan Grŵp Cymheiriaid Prif Fferyllwyr y GIG. Digwyddydd hyn ym mis Tachwedd 2017 ac roedd yn</p>
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		cynnwys ystod eang o randdeiliaid o holl gyrff y GIG yng Nghymru. Atodir adroddiad cryno o'r gweithdy gyda'r ymateb yma. (atodiad B).
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<p>Dylai cyrff iechyd sicrhau bod eu Prif Fferylllydd yn gyfarwyddwr gweithredol neu'n atebol i un yn uniongyrchol ac yn rheolaidd; a</p> <p>Dylai fod gan gyrff iechyd eitem agenda flynyddol yn y Bwrdd i drafod adroddiad blynyddol sy'n trafod gwasanaethau fferylliaeth, rheoli meddyginiaethau, rhagnodi gofal sylfaenol, gwasanaethau meddyginiaethau gofal cartref a chynnydd o ran rhoi sylw i'r materion a nodwyd yn Ymddiried mewn Gofal.</p>	<p>Derbyniwyd yn rhannol.</p> <p>Rydym yn cytuno'n llwyr y dylai Bwrdd pob corff iechyd yng Nghymru graffu'n rheolaidd ar bob agwedd ar reoli meddyginiaethau. I'r perwyl hwnnw, a chyn cyhoeddi eich adroddiad, yn 2016-17 cynhwyswyd chwe dangosydd rhagnodi cenedlaethol gennym, yn cwmpasu ystod o feysydd gan gynnwys rhagnodi gwrthficrobaidd, adrodd ar adweithiau niweidiol i gyffuriau, meddyginiaethau risg uchel a defnydd effeithlon o adnoddau, yn Fframwaith Canlyniadau'r GIG.</p> <p>Er mwyn parhau i ganolbwyntio ar wella rheoli meddyginiaethau o fewn GIG Cymru, byddwn yn parhau i ddatblygu dangosyddion rheoli meddyginiaethau fel rhan o'r fframwaith canlyniadau. Byddwn hefyd yn codi materion yn ymwneud â rheoli meddyginiaethau drwy gyfrwng cyfarfodydd y Tîm Gweithredol ar y Cyd rhwng Llywodraeth Cymru a chyrff GIG Cymru.</p> <p>Mae'r rhaglen ail-gydbwysu deddfwriaeth</p>	<p>Mae'r rhaglen ail-gydbwysu deddfwriaeth meddyginiaethau a rheoleiddio fferyllol ar draws y DU, a gefnogir gan yr Adran Iechyd yn Lloegr ar ran y pedair gweinyddiaeth yn y DU, yn ystyried nifer o newidiadau i deddfwriaeth meddyginiaethau sy'n debygol o gael effaith ar rôl Prif Fferyllwyr cyrff iechyd. Rhagwelwn y bydd ymgynghoriad ar y newidiadau deddfwriaethol sy'n berthnasol i'r Prif Fferyllwyr yn cael ei gyhoeddi yn ystod haf 2018. Gan ragweld y newidiadau hyn, cynhaliwyd archwiliad o drefniadau cofnodi Prif Fferyllwyr y GIG yn 2017.</p> <p>Fel yr amlinellais yn fy ymateb diweddar, rydym wedi gofyn i Grŵp Strategaeth Meddyginiaethau Cymru Gyfan ymgymryd â'r gwaith i lywio a datblygu ei adroddiad blynyddol ac i adrodd yn chwarterol ar y datblygiadau yn erbyn dangosyddion rhagnodi cenedlaethol i sicrhau bod y cynnwys a'r fformat yn fwy perthnasol a hygyrch i aelodau o Fyrddau cyrff y GIG. Bydd y gwaith hwn wedi'i gwblhau erbyn i adroddiad blynyddol 2018-19 Grŵp Strategaeth Meddyginiaethau Cymru Gyfan gael ei gyhoeddi.</p>
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	<p>meddyginiaethau a rheoleiddio fferyllol ar draws y DU, a gefnogir gan yr Adran Iechyd yn Lloegr ar ran y pedair gweinyddiaeth yn y DU, yn ystyried nifer o newidiadau i ddeddfwriaeth meddyginiaethau sy'n debygol o gael effaith ar rôl Prif Fferyllwyr cyrff iechyd. Nid ydym yn ystyried y byddai'n briodol inni ymrwymo o ran y trefniadau adrodd ar gyfer Prif Fferyllwyr nes bydd canlyniad y rhaglen honno'n hysbys. Disgwylion y bydd y goblygiadau i Brif Fferyllwyr yn gliriach ar ddechrau 2018. I baratoi ar gyfer hyn byddwn yn cynnal archwiliad o'r trefniadau adrodd ar gyfer Prif Fferyllwyr y GIG yng Nghymru. Bydd hwn wedi'i gwblhau erbyn mis Medi 2017.</p>	<p>At hynny, bydd dangosyddion rheoli meddyginiaethau yn parhau i ffurfio rhan o Fframwaith Cyflawni GIG Cymru gyda chyrrff y GIG yn atebol am berfformiad yn erbyn y fframwaith drwy gyfarfodydd y Tîm Gweithredol ar y Cyd.</p>
<p>Dylai Prif Fferyllwyr geisio cefnogaeth Gwasanaethau Gweithlu, Addysg a Datblygiad Partneriaeth Cydwasanaethau GIG Cymru i gryfhau dulliau mapio adnoddau cyfredol i hwyluso cymariaethau cadarn o lefel staffio fferylliaeth ledled Cymru ac i lunio manyleb gwasanaeth gyffredinol. Dylai'r fanyleb nodi'r adnoddau nodweddiadol sydd eu hangen i ddarparu gwasanaethau fferylliaeth allweddol, fel mewnbwn fferylliaeth glinigol ac addysg</p>	<p>Derbyniwyd.</p> <p>Yn ystod 2017-18 byddwn yn gweithio gyda Gwasanaethau'r Gweithlu, Addysg a Datblygu Partneriaeth Cydwasanaethau GIG Cymru a Phrif Fferyllwyr cyrff GIG Cymru i gynnal asesiad cadarn o'r anghenion ar gyfer y gweithlu fferyllol nawr ac yn y dyfodol. Caiff y gwaith hwn ei gwblhau erbyn mis Mawrth 2018.</p>	<p>Nodaf fod yr argymhelliad hwn wedi'i anelu at Brif Fferyllwyr y GIG a Gwasanaethau'r Gweithlu, Addysg a Datblygu Partneriaeth Cydwasanaethau GIG Cymru.</p> <p>Deallaf fod Grŵp Cymheiriaid Prif Fferyllwyr GIG wedi sefydlu grŵp moderneiddio'r gweithlu i ddatblygu'r argymhelliad a materion eraill yn ymwneud â'r gweithlu fferyllol.</p> <p>Yn ystod 2018-19, bydd y grŵp hwn yn cefnogi'r ymgyrch hyfforddi, gweithio, byw sydd wedi'i cynllunio ar gyfer gweithwyr fferyllol proffesiynol; yn cynhyrchu model gweithlu lefel uchel ar gyfer</p>

<p>cleifion ar y wardiau. Dylai'r fanyleb hefyd fod yn ddigon hyblyg i gydnabod y bydd gwahanol fathau o wardiau angen gwahanol lefelau o adnoddau.</p>		<p>gwasanaethau fferyllol; ac yn cyflawni dadansoddiad o ddata gweithlu fferyllol cyfredol.</p>
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<p>Er mwyn ysgogi gwelliannau pellach i ragnodi, dylai cyrff iechyd sicrhau bod ganddynt gynllun gweithredu wedi'i dargedu i sicrhau gwelliannau i gost ac ansawdd rhagnodi ym meysydd gofal sylfaenol a gofal eilaidd, yn unol ag egwyddorion gofal iechyd darbodus. Dylai'r cynllun gweithredu gael ei hysbysu gan ddadansoddiad rheolaidd o ddata rhagnodi i sicrhau bod sylw'n canolbwyntio ar y meysydd lle ceir y mwyaf o gyfle i sicrhau gwelliannau o ran cost ac ansawdd;</p> <p>Yn unol â'r angen i gynyddu proffil rheoli meddyginiaethau ar lefel y Bwrdd, dylai cyrff iechyd sicrhau bod perfformiad yn erbyn Dangosyddion Rhagnodi Cenedlaethol yn cael ei ystyried yn rheolaidd gan y Bwrdd, ynghyd</p>	<p>Derbyniwyd.</p> <p>Mae'r Grŵp Effeithlonrwydd, Gwerth Gofal Iechyd a Gwella wedi cytuno y bydd dull Cymru gyfan tuag at wella cost ac ansawdd mewn rheoli meddyginiaethau ym meysydd gofal sylfaenol ac eilaidd yn faes allweddol ar gyfer 2017-18.</p> <p>Yn 2017-18 byddwn yn cytuno gyda Phrif Fferyllwyr byrddau iechyd a rhanddeiliaid eraill ar flaenoriaethau allweddol yn y chwe maes canlynol: ysgogi effeithlonrwydd; lleihau niwed yn gysylltiedig â meddyginiaethau; gwella profiad a chanlyniadau i'r claf; moderneiddio'r gweithlu; cydweithredu, gwell defnydd o dechnoleg ac ystadau gwell; a meincnodi. Caiff y blaenoriaethau hyn eu datblygu dros Gymru gyfan a chaiff y cynnydd arnynt ei oruchwyllo drwy gyfrwng cyfarfodydd rheolaidd rhwng y Prif Swyddog Fferyllol a Phrif Fferyllwyr y byrddau iechyd, a</p>	<p><u>Codi proffil rheoli meddyginiaethau ar lefel Bwrdd</u></p> <p>Fel yr amlinellais uchod, yn ystod 2018-2019 bydd Grŵp Strategaeth Feddyginiaethau Cymru Gyfan ymgymryd â'r gwaith o hysbysu a datblygu ei adroddiadau cyfredol gan gynnwys y rheiny sy'n manylu ar berfformiad yn erbyn dangosyddion rhagnodi cenedlaethol i sicrhau eu bod yn cael eu defnyddio gan Fyrddau cyrff y GIG.</p> <p><u>Goruchwlio'r datblygiad i wella effeithlonrwydd rhagnodi</u></p> <p>Yn ystod 2017-18 cymerodd y Grŵp Effeithlonrwydd, Gwerth Gofal Iechyd a Gwella gamau i wella cost ac ansawdd mewn rheoli meddyginiaethau ym meysydd gofal sylfaenol ac eilaidd. Yn benodol hwylusodd y grŵp welliannau sylweddol o safbwynt cyfleoedd o werth mawr gan gynnwys cynnydd yn y defnydd o feddyginiaethau biodebyg, cynyddu</p>
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<p>â chynnydd o ran cyflawni gwelliannau ehangach o ran cost ac ansawdd rhagnodi gofal sylfaenol;</p> <p>Dylai Llywodraeth Cymru sicrhau bod gwaith y Grŵp Effeithlonrwydd, Gwerth Gofal Iechyd a Gwella yn mabwysiadu safbwynt Cymru gyfan ar welliannau cost ac ansawdd y dylai fod modd eu cyflawni trwy ragnodi a rheoli meddyginiaethau gwell, a'i fod yn defnyddio dulliau fel y cyfarfod Tîm Gweithredol ar y Cyd a gynhelir ddwywaith y flwyddyn rhwng swyddogion llywodraeth a phob corff iechyd unigol i i sicrhau bod y cynnydd angenrheidiol yn cael ei wneud o ran cyflawni'r gwelliannau hyn.</p> <p>Dylai Llywodraeth Cymru weithio gyda chyrrff y GIG i ddatblygu a chyflwyno cynllun gweithredu cenedlaethol eglur sydd â'r nod o leihau gwastraff meddyginiaethau, gan adeiladu ar y canfyddiadau o'r gwerthusiad parhaus o ymgyrch Eich Moddion, Eich Iechyd. Mae lleihau gwastraff yn arwain at arbedion cost gan helpu cleifion i gymryd eu meddyginiaethau fel y'u rhagnodwyd ar yr un pryd, sy'n eu</p>	<p>chyfarfodydd y Tîm Gweithredol ar y Cyd.</p> <p>Byddwn yn gweithio gyda chyrrff y GIG i ddatblygu a gweithredu cynllun gweithredu cenedlaethol clir sydd â'r nod o leihau gwastraff meddyginiaethau. Yn anad dim, cyflawnir hyn drwy annog cyrrff y GIG i fabwysiadu'r elfennau hynny o'r ymgyrch <i>Eich Moddion, Eich Iechyd</i> a bydd y gwerthusiad sy'n mynd rhagddo, ar ôl gorffen, yn dangos eu bod yn llwyddiannus. Byddwn hefyd yn annog y byrddau iechyd i roi ar waith dulliau sy'n seiliedig ar dystiolaeth ar gyfer lleihau gwastraff meddyginiaethau. Bydd y rhain yn cynnwys rhoi gwell systemau ar gyfer rhagnodi ailadroddus ar waith, fel y rhai a brofwyd drwy gyfrwng y Grŵp Gweithredu Rhagnodi Darbodus neu a werthuswyd mewn rhannau eraill o'r DU. Rhagwelwn y bydd y gwaith hwn yn cychwyn yn 2017-18 ac y cytunir ar gynllun â chyfyngiad amser erbyn mis Mawrth 2018.</p>	<p>presgripsiynau pregabalin generig a chwtogi'r defnydd o co-proxamol ar draws y byrddau iechyd i gyd.</p> <p>Yn ychwanegol at oruchwyliaeth y Grŵp Effeithlonrwydd, Gwerth Gofal Iechyd a Gwella, mae cyrrff y GIG wedi sefydlu Grŵp Fferyllol a Chyllid Cymru Gyfan ar y Cyd sy'n cwrdd yn fisol i glustnodi, rhannu a datblygu effeithlonrwydd cyfleoedd rhagnodi yn seiliedig ar Gymru gyfan. Mae Grŵp Cymheiriaid Prif Fferyllwyr wedi datblygu, wedi cyrraedd cytundeb ac yn gweithredu'r blaenoriaethau allweddol a nodwyd yn ymateb Llywodraeth Cymru i argymhellion yr Archwilydd Cyffredinol.</p> <p><u>Ymgyrch Genedlaethol i leihau gwastraff meddyginiaethau</u></p> <p>Mae adroddiad <i>Rheoli Meddyginiaethau'r Pwyllgor Cyfrifon Cyhoeddus</i> yn cynnwys argymhellion tebyg, ac rwyf wedi ymateb drwy gadarnhau y bydd arian ar gael i'r byrddau iechyd yn 2018-19. Bydd y cyllid yn cefnogi gweithgareddau lleol i hybu elfennau mwyaf llwyddiannus ymgyrch Eich Moddion Eich Iechyd. Yn fy ymateb i'r Pwyllgor rwy'n amlinellu fy ymrwymiad i ddarparu diweddariad ar y gwaith a wneir gan y byrddau iechyd i wella archebu rhagnodi ailadroddus, yn 2019.</p>
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<p>helpu i sicrhau'r budd mwyaf posibl o'r feddyginiaeth; ac Yn gysylltiedig â'r pwyntiau uchod, dylai Llywodraeth Cymru sicrhau bod cynllun eglur â chyfyngiad amser ar waith i gyflwyno systemau gwell ar gyfer rhagnodi ailadroddus sy'n cael eu profi gan y Grŵp Gweithredu Rhagnodi Darbodus.</p>		
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<p>Dylai Llywodraeth Cymru ddatblygu cynllun, mewn partneriaeth â'r Grŵp Strategaeth Meddyginiaethau Cymru Gyfan, cyrff iechyd a meddygon, i esblygu'r Dangosyddion Rhagnodi Cenedlaethol fel eu bod yn dechrau ystyried mesurau o ba un a yw'r cleifion priodol yn derbyn y meddyginiaethau priodol a pha un a yw meddyginiaethau yn gwneud gwahaniaeth i ganlyniadau pobl.</p>	<p>Derbyniwyd.</p> <p>Rydym yn cytuno bod y Dangosyddion Rhagnodi Cenedlaethol ar hyn o bryd yn canolbwyntio'n ormodol ar faint o feddyginiaethau a ragnodir a'u cost, a bod yr ystyriaeth a roddir i briodoldeb clinigol a chanlyniadau yn annigonol. Mae argaeledd data i gefnogi dangosyddion mwy sensitif wedi bod yn rhwystr sylweddol.</p> <p>Er bod gwelliannau sylweddol wedi'u gwneud i leihau amrywiadau mewn rhagnodi, mae'r gwelliannau wedi arafu yn y blynyddoedd diwethaf yn rhannol o ganlyniad i'r dull hwn o weithio. Byddwn yn gweithio gydag Uned Cymorth Presgripsiynu Dadansoddol Cymru i sefydlu prosiect yn 2017-18 a fydd â'r diben o ddiffinio cyfres newydd o Ddangosyddion Rhagnodi Cenedlaethol</p>	<p>Yn unol â'r ymrwymadau a gafwyd mewn ymateb i adroddiad Archwilydd Cyffredinol Cymru, gwahoddwyd Uned Cymorth Presgripsiynu Dadansoddol Cymru i gychwyn prosiect yn 2017-18 fydd â'r diben o ddiffinio cyfres newydd o Ddangosyddion Rhagnodi Cenedlaethol gan ddefnyddio ffynonellau data ychwanegol.</p> <p>Yn dilyn y gwaith hwnnw, cymeradwyodd Grŵp Strategaeth Meddyginiaethau Cymru Gyfan 12 o ddangosyddion diogelwch rhagnodi newydd sy'n cyfuno gwybodaeth o systemau practisiau meddygon teulu, yn y cyfarfod ar 14 Chwefror 2018. Ceir manylion am y dangosyddion hyn yn atodiad C.</p>
	<p>gan ddefnyddio ffynonellau data ychwanegol. Caiff y dangosyddion hyn eu datblygu yn 2017-18 gyda'r bwriad y cânt eu cymeradwyo gan Grŵp Strategaeth Meddyginiaethau Cymru Gyfan cyn dechrau eu defnyddio yn Ebrill 2018.</p>	

<p>Dylai Pwyllgor Prif Fferyllwyr Cymru Gyfan arwain archwiliad cenedlaethol o gydymffurfiaid â'r mesurau a nodir yn llawlyfr Cymru gyfan ar ddiogelwch a darpariaeth effeithiol gwasanaethau gofal cartref.</p>	<p>Derbyniwyd.</p> <p>Nodwn fod yr argymhelliad hwn wedi'i anelu at Bwyllgor Prif Fferyllwyr Cymru Gyfan. Byddwn yn sicrhau bod gwaith i wella darpariaeth ddiogel ac effeithiol gwasanaethau gofal cartref, gan gynnwys archwiliad o gydymffurfiaeth â'r meysydd a nodir yn llawlyfr Cymru gyfan, yn rhan o'r blaenoriaethau allweddol y cytunir arnynt gyda Phrif Fferyllwyr y byrddau iechyd a rhanddeiliaid eraill yn 2017-18.</p>	<p>Nodaf fod yr argymhelliad hwn wedi'i anelu at Brif Fferyllwyr y GIG.</p> <p>Deallaf fod Grŵp Cymheiriaid Prif Fferyllwyr y GIG wedi sefydlu ffrwd waith gofal cartref o dan ei Grŵp Cynghori ar Gaffael a Logisteg Meddyginiaethau. Mae'r grŵp wedi gweithio gydag arweinwyr i roi'r gwelliannau i reolaeth gofal cartref ar waith gan fynd i'r afael â'r bylchau a glustnodwyd yn erbyn safonau gofal cartref y byrddau iechyd unigol.</p> <p>Er mwyn gwella'r ddarpariaeth ddiogel ac effeithiol o wasanaethau gofal cartref ymhellach datblygwyd y camau isod ar lefel genedlaethol:</p> <ul style="list-style-type: none"> • Cwblhawyd cytundeb fframwaith Cymru Gyfan ar gyfer gwasanaethau gofal cartref meddyginiaeth technoleg Isel a Chanolig a'i roi ar waith ym mis Mai 2018; • Datblygwyd cytundeb lefel gwasanaeth sengl ar draws GIG Cymru ar gyfer cynlluniau gofal cartref a ariennir gan y diwydiant fferyllol; a • Datblygwyd cymorth rheoli contractau,
		<p>gan gynnwys dangosyddion perfformiad allweddol gan Bartneriaeth Cydwasaethau GIG Cymru</p>

<p>Dylai Llywodraeth Cymru, gyda chymorth gan 1000 o Fywydau a Mwy, weithio gyda thimau fferyllol, staff codio clinigol a chlinigwyr ledled Cymru i ddatblygu rhaglen sydd â'r nod o nodi ac atal derbyniadau sy'n gysylltiedig â meddyginiaeth.</p>	<p>Derbyniwyd.</p> <p>Bydd cwmpas y gwaith hwn yn cael ei bennu ar y cyd â 1000 o Fywydau - Gwasanaeth Gwella yn rhan gyntaf 2017-18 gyda'r bwriad o sefydlu rhaglen diogelwch meddyginiaeth yn 2018-19.</p>	<p>Mae gweithgor oes fer sy'n cynnwys arbenigwyr diogelwch meddyginiaethau o bractisau a'r byd academiaidd ledled Cymru wedi cwrdd â mi i'm cyngori am y dull gweithredu cyffredinol a'r rhaglen fydd eu hangen i ysgogi gwelliannau ym maes diogelwch meddyginiaethau yn y GIG yng Nghymru. Byddaf yn gwneud penderfyniad yn seiliedig ar eu cyngor yn ddiweddarach yn 2018.</p>
<p>Dylai Llywodraeth Cymru a Gwasanaeth Gwybodeg GIG Cymru barhau i weithio gyda chynrychiolwyr meddygol teulu i sicrhau y rhoddir sylw i'w pryderon am lywodraethu gwybodaeth;</p> <p>Hwyluso mynediad ehangach at y Cofnod Meddygon Teulu fel y gall yr holl fferyllwyr a thechnegwyr fferyllol sy'n darparu gwasanaethau clinigol ar y wardiau gael mynediad at y system ar gyfer cleifion a dderbynnir ar gyfer triniaeth ddewisol, yn ogystal â'r rhai a dderbynnir fel achosion brys; a</p> <p>Hwyluso mynediad ehangach at y Cofnod Meddygol Teulu, a defnydd</p>	<p>Derbyniwyd.</p> <p>Rydym yn parhau i weithio gyda Gwasanaeth Gwybodeg GIG Cymru i sicrhau mynediad ehangach i Gofnod Meddygon Teulu Cymru. Ar 21 Tachwedd 2016, cyhoeddodd y Gwasanaeth Gwybodeg y câi mynediad i Gofnod Meddygon Teulu Cymru ei ehangu i fferyllwyr ysbytai a thechnegwyr fferyllol mewn lleoliadau gofal wedi'i gynllunio, gan gynnwys adrannau cleifion allanol. Mae hyn yn adeiladu ar y mynediad mewn lleoliadau gofal brys sydd ar gael ers peth amser.</p> <p>Mae'r Prif Swyddog Fferyllol yn gweithio'n uniongyrchol gyda'r Cyfarwyddwr Meddygol yn y Gwasanaeth Gwybodeg i roi trefniadau llywodraethu gwybodaeth briodol ar waith a</p>	<p>Ers mis Tachwedd 2016, mae'r fferyllwyr a'r technegwyr fferyllol sy'n gweithio yn ysbytai Cymru wedi cael mynediad llawn i Gofnod Meddygon Teulu Cymru mewn lleoliadau gofal wedi'i gynllunio a gofal brys.</p> <p>Ym mis Tachwedd 2017, cyhoeddais y câi'r mynediad i Gofnod Meddygon Teulu Cymru ei ehangu i ddechrau i'r fferyllwyr cymunedol sy'n darparu gwasanaeth cyflenwi meddyginiaethau brys i'r GIG. Cwblhawyd cynllun peilot o fynediad i Gofnodion Meddygon Teulu Cymru ar gyfer fferyllfeydd cymunedol ac mae cynlluniau ar waith i'w gyflwyno i bob fferyllfa erbyn diwedd 2018-19.</p>

<p>ehangach ohono, mewn fferyllfeydd cymunedol, fel y gellir rheoli meddyginiaethau cleifion yn y gymuned heb fod rhaid iddynt fynd at feddyg teulu neu wasanaethau GIG eraill, pan fo hynny'n glinigol briodol.</p>	<p>fydd yn caniatáu i fferyllwyr cymunedol ddefnyddio'r Cofnod Meddygon Teulu mewn amgylchiadau penodol i gefnogi gofal i'r claf. Rhagwelwn y bydd Partneriaeth Cydwasanaethau GIG Cymru yn cwblhau'r gwaith ar ddechrau 2019.</p>	
<p>Pan fydd Llywodraeth Cymru yn gwneud penderfyniad i wneud meddyginiaeth newydd ar gael y tu allan i'r broses werthuso genedlaethol bresennol, dylai esbonio'n eglur y rhesymeg sy'n sail i'w phenderfyniad a sicrhau y rhoddir digon o amser i gyrrff iechyd gynllunio ar gyfer y goblygiadau ariannol a'r newidiadau i wasanaethau sy'n gysylltiedig â chyflwyno'r meddyginiaethau newydd hynny.</p>	<p>Derbyniwyd. Rydym yn falch bod Archwilydd Cyffredinol Cymru yn cydnabod y gallai fod yn anghenrheidiol, o bryd i'w gilydd, i Lywodraeth Cymru sicrhau bod meddyginiaethau ar gael y tu allan i'r broses werthuso genedlaethol bresennol. Cydnabyddwn mai dan amgylchiadau eithriadol y dylai hyn ddigwydd a hynny'n unig pan fo'r sail resymegol dros wneud hynny'n glir. Yn yr un modd â gyda chytundebau hyd yma, disgwyliwn y bydd cytundebau'n parhau i gael eu gwneud dim ond pan fo cefnogaeth gref gan glinigwyr a chleifion ledled Cymru y dylai'r feddyginiaeth/meddyginiaethau fod ar gael. Fodd bynnag byddwn, o hyn allan ac ar gyfer pob cytundeb yn y dyfodol, yn sicrhau bod cyrff y GIG yn ymwneud yn fwy â'r trefniadau cynllunio ac yn cael</p>	<p>Gallaf gadarnhau nad oes dim trefniadau o'r fath wedi'u gwneud ers i'r Archwilydd Cyffredinol Cymru gyhoeddi ei adroddiad.</p>

	amser priodol i baratoi ar gyfer goblygiadau i wasanaethau a'r goblygiadau ariannol.	
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Y Pwyllgor Cyfrifon Cyhoeddus / Public Accounts Committee
PAC(5)-16-18 P2

Tudalen y pecyn 39

Health Board	Hospital site	Total number of wards on site	assessment of the total automated vending required	wards with automated vending number of wards where (Feb 2017)	to have automated ward automated vending vending by April 2017	of wards with automated vending (April 2017)	locations with automated vending currently required (e.g. ED, MAU, Theatres etc)	ward) locations planned to other (non ward) have automated vending	
								by April 2017	locations with automated vending (April 2017)
Betsi Cadwaladr University	Wrexham Maelor	34	34	15	5	20	9	2	4
Betsi Cadwaladr University	Chirk Hospital	1	1	0	0	0	0	0	0
Betsi Cadwaladr University	Deeside Hospital	2	2	0	0	0	1	0	0
Betsi Cadwaladr University	Mold Hospital	2	2	0	0	0	0	0	0
Betsi Cadwaladr University	Glan Clwyd Hospital	29	27	10	14	24	9	8	9
Betsi Cadwaladr University	Bryn Hesketh	1	1	0	1	1	0	0	0
Betsi Cadwaladr University	Ruthin Community Hospital	1	1	0	0	0	0	0	0
Betsi Cadwaladr University	Holywell CH	2	2	0	0	0	0	0	0
Betsi Cadwaladr University	Denbigh CH	2	2	0	0	0	1	0	0
Betsi Cadwaladr University	Abergele	1	1	0	0	0	0	0	0
Betsi Cadwaladr University	Colwyn Bay CH	2	2	0	0	0	1	1	2
Betsi Cadwaladr University	Ysbyty Gwynedd	28	28	13	1	14	4	2	4
Betsi Cadwaladr University	Ysbyty Penrhos Stanley	2	2	0	2	2	1	0	0
Betsi Cadwaladr University	Ysbyty Bryn Beryl	2	2	0	0	0	1	0	0
Betsi Cadwaladr University	Cefni Hospital	1	1	0	0	0	0	0	0
Betsi Cadwaladr University	Dolgellau Hospital	2	2	0	0	0	1	0	0
Betsi Cadwaladr University	Eryri hospital	2	2	0	2	2	0	0	0
Betsi Cadwaladr University	Llandudno Hospital	4	4	1	0	1	1	0	0
Betsi Cadwaladr University	Tywyn Hospital	1	1	0	0	0	0	0	0
Betsi Cadwaladr University	Ysbyty Alltwen	1	1	0	0	0	1	0	0
Velindre NHS Trust	Velindre Cancer Centre	2	2	1	2	3	4	1	1
Aneurin Bevan University	Nevil Hall Hospital	16	16	5	2	7	6	3	7
Aneurin Bevan University	Ysbyty Ystrad Fawr	8	8	1	1	2	4	2	2
Aneurin Bevan University	Royal Gwent Hospital	34	34	9	6	15	19	9	15
Aneurin Bevan University	County	4	4	1	0	1	3	0	0
Aneurin Bevan University	Chepstow	4	4	0	0	0	4	0	0
Aneurin Bevan University	Llanfrecchfa Grange Hospital	0	0	0	0	0	0	0	0
Aneurin Bevan University	St Cadocs	9	9	0	0	0	9	0	0
Aneurin Bevan University	St Woolos	8	8	1	0	1	8	1	1
Aneurin Bevan University	Ysbyty Aneurin Bevan	3	0 All wards have access to central cabinet		0	0	0	1	1
Cardiff and Vale University	University Hospital Wales	46	Not yet determined	0	0	0	Theatres	1	1
Cardiff and Vale University	University Hospital Llandough	28	Not yet determined	0	0	0	Theatres	1	1
Cardiff and Vale University	St Davids	3	Not yet determined	0	0	0	0	0	0
Cardiff and Vale University	Rookwood	4	Not yet determined	0	0	0	0	0	0
Cardiff and Vale University	Barry	2	Not yet determined	0	0	0	0	0	0
Cwm Taf University	Prince Charles Hospital	17	16	0	0	0	6	2	4
Cwm Taf University	Royal Glamorgan Hospital	19	19	0	0	0	0	1	4
Cwm Taf University	Ysbyty Cwm Rhondda	4	4	0	0	0	0	0	0
Cwm Taf University	Ysbyty Cwm Cynon	6	6	0	0	0	0	0	0
Hywel Dda University	Prince Phillip Hospital	12	12	0	2	2	7	0	3
Hywel Dda University	Glangwili General Hospital,	19	19	0	4	4	8	1	1
Hywel Dda University	Withybush General Hospital	13	13	0	3	3	3	0	0
Hywel Dda University	Bronglais General Hospital	12	12	0	4	4	2	0	0
Hywel Dda University	Mental Health Services	10	8	0	4	4	7	0	3
Abertawe Bro Morgannwg University	Princess of Wales	21	21	1	0	1	10	3	4
Abertawe Bro Morgannwg University	Neath Port Talbot	8	8	0	0	0	6	1	1
Abertawe Bro Morgannwg University	Tonna Hospital	4	1	0	1	1	0	0	0
Abertawe Bro Morgannwg University	Glanrhyd Hospital	10	1	0	1	1	0	0	0
Abertawe Bro Morgannwg University	Morrison Hospital	37	37	2	2	4	8	3	3
Abertawe Bro Morgannwg University	Singleton Hospital	16	16	1	1	2	3	1	1
Powys teaching	Ystradgynlais	3	3	2	0	2	2	1	1
Powys teaching	Brecon	3	2	0	0	0	2	0	0
Powys teaching	Bronllys	2	2	0	0	0	0	0	0
Powys teaching	Llandrindod Wells	2	2	0	0	0	2	0	0
Powys teaching	Newtown	2	2	0	0	0	1	0	0
Powys teaching	Welshpool	1	1	0	0	0	1	0	0
Powys teaching	Knighton	1	1	0	0	0	0	0	0
Powys teaching	Llanidloes	1	1	0	0	0	0	0	0
<u>Powys teaching</u>	<u>Machynlleth</u>	<u>2</u>	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>	<u>0</u>	<u>0</u>

Total	516	412	63	58	121	156	45	28	73
	Health Board/Trust	Current number of	Additional wards planned	Expected total number	Total number of other	locations where	Number of other (non ward)	Number of other (non	Expected total number of

Notes from the Technology Workshop On Automated Storage for Medicines

Held on 23rd November 2017 at Morriston Hospital, Swansea SA6 6NL

Introduction

Over the last few years Health Boards within NHS Wales have implemented ward medicines automation systems to highly varying degrees. Some Health Boards have been the early pioneers within Wales (and indeed across the NHS). These initiatives have been largely led by individual senior pharmacists within pharmacy services enthusiastic for their adoption rather than on any coordinated and cohesive approach or development plan across the Health Boards within Wales. The current systems in situ have largely been funded from capital bids against pharmacy modernisation funds within Welsh Government.

The main but not sole drivers for implementation has been the desire to improve security of medicines and improve the efficiency of medicines management in clinical areas. By their very design automated systems significantly improve security and accountability of use of medicines and support adherence to the Welsh Patient Safety Notice 030, April 2016.

However, in practice, the implementation and development of these systems has been challenging and time-consuming for pharmacy staff in those Health Boards where there have been installed. Additionally, whilst these initiatives may have been led by pharmacy personnel, ward automated systems will largely beneficially impact on the working of nursing staff who use them, and, on the patients, who receive medicines from them directly. These factors may have led to some disparity in ownership and organisational leadership and a detrimental impact on the capacity to develop meaningful and specific research into beneficial (or otherwise) outcome measures.

As such, despite much anecdotal evidence and obvious design benefits of these technologies, there remains a dearth of robust evidence or published research papers within NHS Wales to further support their wide-scale implementation. This situation is largely mirrored and recognised within the rest of the NHS.

In recognition of this lack of meaningful outcome data and the variation in use across NHS Wales, the Chief Pharmaceutical Officer for Wales, Andrew Evans requested the Chief Pharmacist Committee to consider the development of a strategic framework and development plan for the use and evaluation of automated storage systems across NHS Wales.

The workshop was designed for key stakeholders within Health Boards to include senior nursing staff, chief and senior pharmacists, estates personnel and academic representatives to consider and initiate this development plan.

Objectives

- To gain appreciation to how ward automation has been applied and developed in NHS England
- To gain an understanding of the Medicines Automation Evaluation Framework developed for the HPMOP group
- To review the current applications in Health Boards and consider current benefits realisation and difficulties identified in practice.
- To consider a cohesive research strategy to support the development of business cases.

Workshop Content

The workshop commenced with an introduction from the **Chair, Dr Berwyn Owen** and then an opening address from **Andrew Evans, Chief Pharmaceutical Officer** appraising the variation in deployment of automation, the need for a robust strategy for automation amid the tight fiscal environment in NHS Wales. There then followed a number of brief presentations and case studies from around Wales to provide the attendees with better insight into potential research/evaluation projects and some key examples of current applications.

Don Hughes, retired Chief Pharmacist, BCUHB provided some detail of the Medicines Automation Evaluation Framework developed for the Hospital Pharmacy and Medicines Optimisation programme (HoPMOp) in NHS England during 2016. (The HoPMOp programme was set up to support the implementation of the recommendations of Lord Carter's review). The framework contains five principal domains in which automation may benefit including: -

- Safety
- Governance
- Operational productivity and efficiency
- Patient and staff experience
- Data and information

Details of specific attributes in each domain were provided to assist Health Boards to prioritise any research or evaluation projects as deemed appropriate to support any considered strategy.

Case studies/Vignettes from Health Boards

Chris Moore from the Welsh Ambulance Service NHS Trust described the WAST experience the ongoing project of replacing existing drug cupboards with 20 customised Omnicell cabinets across the region. The software has been designed to facilitate drug selection for each vehicle, is intuitive and easy to use and has been well received by WAST staff. The project has been an excellent collaboration between WAST, pharmacy and estates. Challenges include securing non WAST locations, estates work and differing drug codes between hospitals. Thus far the systems have improved security, accountability with better stock management and auditable assurance. Post implementation tasks include the need to focus on efficient stock levels and producing meaningful reports.

Colin Powell, Chief Pharmacist, acute services at Aneurin Bevan University Health Board described their experiences of automation in acute and community hospitals within the Health Board. Since 2011, 42 Omnicell units have been installed across a whole range of admission areas, acute wards, critical care units, GP out of hours, mental health, theatre suites and for WAST use. Their use has significantly improved security of medication storage and accountability. Colin shared a number of key lessons that they have learnt. These include: -

- The need for nursing staff buy-in at all levels

- Their installation can be time-consuming and protracted due to factors such as enabling works and their associated costs
- Certainly, do not use these systems to correct poor practice
- Need to consider maintenance costs
- Staff do not have time to develop the systems to their full potential – need a systems manager

Adam Griffiths, Head of Nursing for Medicine, Glan Clwyd Hospital described his experience of the development and use of automation in the A&E from a position as a charge nurse through his current role as head of nursing. He described some of the safety and governance benefits including reductions in serious incidents and how he works with pharmacy staff to gain detailed usage reports, which have been invaluable to him in a management role to provide information impossible to generate with existing manual systems.

Karen Pritchard, Patient Safety Lead Pharmacist, Wrexham Maelor Hospital detailed the wider use across BCUHB including critical care units, admission areas and acute wards and concurred with ABUHB experience regarding the pharmacy staffing issues and the need for ward ownership. She provided some examples of how security had improved with medicines of potential abuse and how staff have utilised the systems to improve safety e.g. allergy alerts and patient safety notices. Queuing can be problematical particularly on wards with high medication usage e.g. admission areas. Karen also raised concerns about the use of live stock control at ward level – a “blessing and a curse!” There are cultural issues to overcome relating to understanding with emphasis on ownership.

Workshop

Break-out sessions took place with mixed three groups of attendees to consider the next steps in NHS Wales including: -

- To develop a vision for the development of automated storage of medicines across NHS Wales.
- To consider a multi-disciplinary evaluation/research strategy to support the vision and further implementation and development.
- To consider the management arrangements to support the vision and evaluation strategy

The groups provided several key themes to provide some basis of a structured strategy and development plan for use of automated systems. These included: -

Vision

There needs to be some consolidation and developments required in what is currently in situ. The systems work better in some areas and there are several challenges to be overcome to effect better use. Lack of ownership is common problem and this is not helped by the level of bank and agency staff at ward level which can lead to poor use. The strategy should consider priority clinical areas where the systems work well and where clear benefits are accrued. On-going training and support need to be considered within Health Boards, particularly in pharmacy services.

Any developed vision should be undertaken jointly with nursing and estates. These systems are now well established and provide a more modern secure platform and will continue to evolve and improve. Any new builds in NHS Wales should now include provision for automated storage and Welsh Government need to be aware of this. There needs to be some collaboration with HIW to consider the safe location of systems within buildings and whether there are secure enough for placements in “open” areas

Pharmacy services in Wales need to develop a vision for application of technologies supporting better medicines management to include ePMA, ward automation and use of bar-coding to deliver better quality, efficiency and production. Needs to a strong focus on quality and less focus on financial management. The vision should include local management arrangements in pharmacy services perhaps consideration of system manager with a joint role in any EDS replacement.

Evaluation/research strategy

The vision and strategy should include an appropriate research and evaluation strategy to support this major medicines management development over the coming years. Need to feed into all Wales research staff and academia and be conscious of similar work within the wider NHS and to gain wider learning and potential collaborative with universities etc.

Quite strong views were held regarding the areas to focus on e.g. workforce and not stocks productivity – focus on effectiveness and time releasing

Management arrangements

A number of potential arrangements were discussed with no definitive conclusion at this stage but included: -

To consider a management consensus steering group with webinar.

Exert from [National Prescribing Indicators 2018–2019](#)

1.0 SAFETY INDICATORS

1.1 PRESCRIBING SAFETY INDICATORS

Purpose: To identify patients at high risk of adverse drug reactions and medicines-related harm in primary care.

Unit of measure:

1. Number of patients with a peptic ulcer who have been prescribed NSAIDs without a PPI as a percentage of all patients.
2. Number of patients with asthma who have been prescribed a beta-blocker as a percentage of all patients.
3. Number of patients with concurrent prescriptions of verapamil and a betablocker as a percentage of all patients.
4. Number of female patients with a past medical history of venous or arterial thrombosis who have been prescribed combined hormonal contraceptives, as a percentage of all female patients.
5. Number of female patients with a current prescription of oestrogen-only hormone replacement therapy without any hysterectomy READ/SNOMED codes, as a percentage of all female patients.
6. Number of patients with concurrent prescriptions of warfarin and an oral NSAID as a percentage of all patients.
7. Number of patients under 12 with a current prescription of aspirin, unless due to a specialist recommendation, as a percentage of all patients.
8. Number of patients aged 65 years or over prescribed an NSAID plus aspirin and/or clopidogrel but without gastroprotection (PPI or H2 receptor antagonist), as a percentage of all patients aged 65 years or over.
9. Number of patients aged 65 years or over prescribed an antipsychotic, as a percentage of all patients aged 65 years or over.
10. Number of patients aged 75 and over with an Anticholinergic Effect on Cognition (AEC) score of 3 or more for items on active repeat, as a percentage of all patients aged 75 and over.
11. Number of patients on the CKD register (CKD stage 3–5) who have received a repeat prescription for an NSAID within the last 3 months, as a percentage of all patients on the CKD register.
12. Number of patients who are not on the CKD register but have an eGFR of < 59 ml/min and have received a repeat prescription for an NSAID within the last 3 months, as a percentage of all patients who are not on the CKD register but have an eGFR of < 59 ml/min.

Target for 2018–2019: No target set

Background and evidence

There were 2,330 Yellow Card reports submitted in Wales in 2016–2017, an increase of 28% on the previous year. In the UK, it is estimated that around 6.5% of hospital admissions are related to adverse drug reactions³. Adverse drug reactions can often be predictable, making it possible to identify and address them before actual patient harm occurs. Therefore, a process of identifying patients electronically could enable intervention and help to avoid harm.

In 2012, The Lancet published a paper entitled “A pharmacist-led information technology intervention for medication errors (PINCER): a multicentre, cluster randomised, controlled trial and cost-effectiveness analysis”. This study investigated

the differences in a series of outcomes between intervention and control groups. It demonstrated that such an approach is an effective method for reducing a range of medication errors⁴. Some of the prescribing measures utilised in the PINCER trial have been incorporated as measures in this NPI. In addition, other measures have been added to make a series of 12. Some brief explanation for these is provided below. No target has been set for this NPI for 2018–2019 as data from this year can provide a baseline for future years.

NSAIDs in peptic ulcer patients without a PPI

NSAIDs have been shown to be the medicine group most likely to cause an adverse drug reaction requiring hospital admission due to such events as gastrointestinal bleeding and peptic ulceration. A PPI can be considered for gastroprotection in patients at high risk of gastrointestinal complications with an NSAID e.g. previous peptic ulcer.

Beta-blockers in asthma patients

Beta-blockers should be avoided in patients with asthma due to the potential to precipitate bronchospasm. If the benefits of using a beta-blocker in an asthma patient are justified the patient should be monitored closely.

Verapamil in combination with beta-blockers

Beta-blockers are associated with adverse drug reactions such as bradycardia and atrio-ventricular conduction disturbances. A co-prescription of a calcium channel blocker, such as verapamil, with a beta-blocker is generally not recommended due to an increased negative effect on heart function compared with beta-blocker therapy alone.

Combined hormonal contraceptives in thrombosis patients

There is an increased risk of venous thromboembolic disease and a slight increase in the risk of arterial thromboembolism in people using combined hormonal contraceptives⁵. Any patients with a history of venous or arterial thrombosis who have been prescribed combined hormonal contraceptives are therefore at an increased risk.

Oestrogen-only hormone replacement therapy without a record of hysterectomy

Where hormone replacement therapy is indicated, hysterectomy status of the woman will determine which type is appropriate. All women with an intact uterus need a progestogen component in their hormone replacement therapy to prevent endometrial hyperplasia, which can occur after as little as six months of unopposed oestrogen therapy. Conversely, women who have undergone a hysterectomy should not receive a progestogen component. However there may be instances where patients with an intact uterus may be prescribed oestrogen-only HRT in conjunction

with a levonorgestrel containing IUD (e.g. Mirena®) for the prevention of endometrial hyperplasia during oestrogen replacement therapy.

Warfarin and oral NSAIDs

Anticoagulant medicines such as warfarin can cause haemorrhage. NSAIDs can reduce platelet aggregation, which can worsen any bleeding event in warfarin treated patients. Therefore, wherever possible, in patients taking warfarin, NSAIDs should be avoided.

Aspirin in under 12s

Reye's syndrome is a very rare disorder that can cause serious liver and brain damage. If it is not treated promptly, it may lead to permanent brain injury or death. Reye's syndrome mainly affects children and young adults under 20 years of age. Owing to an association with Reye's syndrome, aspirin should not be given to children under the age of 16, unless specifically indicated e.g. for Kawasaki disease.

NSAIDs in combination with aspirin or clopidogrel without gastroprotection

Based upon work by NHS Scotland two additional measures have been included within this NPI due to their focus on patient safety. The first of these will look at the use of gastroprotection in patients aged 65 years or over and prescribed an NSAID plus aspirin and/or clopidogrel. Hospital admission due to gastrointestinal bleeding has been associated with aspirin and clopidogrel, as well as NSAIDs. The harmful consequences of bleeds due to antiplatelet therapy increase with age. PPIs are recommended in older patients undergoing antiplatelet treatment. PPIs are preferred to H2-receptor antagonists because there is less evidence to support use in conjunction with low dose aspirin.

Over 65s prescribed an antipsychotic medicine

A second measure that has been based on work by NHS Scotland will consider the use of antipsychotics in patients aged 65 years or over. In 2009 the Banerjee report called for a review of the use of antipsychotic medicines in elderly patients with dementia. These medicines have only a limited benefit in treating behavioural and psychological symptoms of dementia and carry significant risk of harm.

Over 75s with AEC score of 3 or more

A high proportion of the older population are exposed to multiple medicines with low anticholinergic activity and the cumulative burden of these medicines over many years may be associated with accelerated cognitive decline and mortality. The AEC scale (see Appendix 1) was developed to illustrate the negative anticholinergic effects of drugs on cognition. It is good practice to use medicines with AEC scores of zero and to avoid those scored 1, 2 or 3. The clinician should discuss with the patient and carer the benefits and potential risks of continued use of these medicines with the aim of either stopping them or switching to an alternative drug with a lower AEC score (preferably zero)

Use of NSAIDs in patients with renal impairment

The final two measures in this NPI consider the use of NSAIDs in patients with renal impairment.

The first of these considers NSAID use in known CKD patients. The aim is to identify patients on the CKD register (CKD stage 3–5) who have received a repeat prescription for an NSAID within the last three months. NICE Clinical Guideline (CG) 182 highlights that in patients with CKD, the long-term use of NSAIDs may be associated with disease progression. NICE recommends caution, and monitoring of the effects on GFR, when using NSAIDs in people with CKD over prolonged periods of time.

The second measure will consider patients not on the CKD register but who have renal impairment identified via their estimated glomerular filtration rate (eGFR) and who have received a repeat prescription for an NSAID within the last three months. NSAIDs may precipitate renal failure, and vulnerable (particularly elderly) patients may be at increased risk. Regular review of the ongoing need for an NSAID and reassessment of the risk versus benefit is appropriate and processes for this should be in place.

Y Pwyllgor Cyfrifon Cyhoeddus / Public Accounts Committee
PAC(5)-16-18 P4

Inquiry into 21st Century Schools and Education Programme

Response of the Association of School and College Leaders (Cymru)

1. The Association of School and College Leaders (ASCL) represents nearly 19,000 education system leaders, heads, principals, deputies, viceprincipals, assistant heads, business managers and other senior staff of state-funded and independent schools and colleges throughout the UK. ASCL Cymru represents school leaders in more than 90 per cent of the secondary schools and an increasing proportion in the primary phase in Wales. This places the association in a strong position to consider this issue from the viewpoint of the leaders of Welsh schools and colleges of all types.
2. ASCL Cymru has been fully supportive of the Welsh Government's principle of providing a specific funding stream to address the issues around poor school building stock, and welcomes the opportunity to contribute to this inquiry.

With reference to your specific areas of focus:

Setting expectations and targets

3. From a school's perspective, the information about expectations has come via local authorities, and has always been couched in very specific terms. Schools have therefore relied upon information from local authorities about the programme and may not have sought out further detail on the anticipated wider benefits from Welsh Government.
4. Information from schools that have benefitted from new buildings indicates that there is some inconsistency over environmental standards. We have had reports that some schools have been very pleased with the outcomes, but some others less so. Specific concerns have related to the

effectiveness of solar generation not meeting expected levels and other forms of alternative energy falling short of what was anticipated. We would be happy to seek out more detailed information about specific concerns if that would be helpful.

The Funding Model

5. We are delighted that the Welsh Government has committed to £640m of capital funding for the next five years. We would point out though, that this is a comparatively small amount given the scale of the problem with school buildings, and means that significant number of schools will be left with no prospect of improvements and have to deal with ever-increasing maintenance costs until the middle of the next decade.
6. ASCL Cymru has some concerns about the Mutual Investment Model. Whilst it is encouraging that the Welsh Government are seeking out ways to increase the amount of funding that can be made available for school building projects, there are potential dangers associated with the model. In particular we are concerned that the service charge should not be passed on to individual school budgets. There are still cases where schools built under previous PFI systems have been placed in an impossible financial position because of having to pay service charges from school budgets. This has impacted upon staffing levels and therefore the quality of education the school has been able to offer. We would rather see a system under which the local authority takes responsibility for the service charge with a proportionate reduction in the maintenance budget allocation to the school.

Standardising build elements and costs

7. There are clearly considerable potential advantages to standardising elements of building programmes. Our experience is that some architects employed to design new school buildings have not necessarily been those with expertise in this area. This has, in the past, resulted in some buildings not always meeting the needs of the school. Utilising architects who have a proven track record of providing high quality, fit for purpose school buildings would seem eminently sensible.
8. Whilst there might be advantages to have other standardised elements in new builds, care needs to be taken that it does not lead to a “one-size-fitsall” approach that does not take account of the specific context and needs of the individual school. Any such approach would need to have built-in flexibilities that allowed for the specific requirements of individual schools.

Welsh Government Consultation

9. We have not been a part of any Welsh Government consultation on this matter to date.

Areas to consider in the next phase

10. We believe that in the next phase of investment, careful consideration must be given to re-assessing the condition of all school premises, particularly taking into account the amount of asbestos that is present in many older school buildings. We would suggest that this needs to be a priority to ensure the health and safety of both students and staff.
11. There are many schools in which our members have serious concerns about other factors impacting on health and safety, particularly in relation to rotting timber in window frames and doors and the presence of mould. Whilst we appreciate that the “funding pot” is limited, it is vital that young people and school staff have a safe and weatherproof environment in which to work. Currently this is not always the case.

Conclusion

12. I hope that this is of value to your inquiry, ASCL Cymru is willing to be further consulted and assist in any way that it can.

Tim Pratt
Director of ASCL Cymru May
2018



DESIGN
COMMISSION
FOR WALES
COMISIWN
DYLUNIO
CYMRU

18 May 2018

Dear Colleagues

National Assembly for Wales Public Accounts Committee: Enquiry Into 21st Century Schools and Education Programme

Thank you for your invitation to provide views on the findings of the Auditor General's Report, reflections on the Welsh Government's initiative, and any general comments we may have on the 21st Century Schools and Education programme. In addition we include a note on the role of the Design Commission for Wales which we trust is helpful.

Overall as we approach the next investment round we have the following general comments which stem from our experience as the body established by the Welsh Government to promote and scrutinise quality in the built environment:

- We generally experience a firm reluctance to consult with DCFW sufficiently early in the process to maximise value and quality.
- We regularly observe late or insufficient liaison between education departments and planning and property departments in local authorities. On more than one occasion consultation with the Commission only occurs on the brink of or just after a planning application is submitted and planning officers are new to the proposals.
- This pattern leads to insufficient examination of sustainability strategies with directly impact upon function and performance - in terms building layout, energy needs and likely performance. This has a further impact on revenue/running costs that will be borne by the school community and on the learning attainment outcomes that are directly affected by both CO2 levels and daylight which affect the learning environment.
- We have previously commented on the outline and strategic case assessments, where some fundamental design strategies such as those noted above cannot be sufficiently tested to ensure the highest environmental quality and performance which should be expected, given the scale of public investment. There are some areas that simply cannot be tested with sufficient design work

having taken place. We have not so far been convinced that the stages in business case presentation afford this opportunity to add public value.

- Sufficient site and context analysis is lacking, as is explicit and demonstrable commitment to the objectives of the Well-being of Fatter Generations Act Wales and Planning Policy Wales.
- There is little or no relationship with the Welsh Government departmental officials responsible for the programme and the Design Commission for Wales.
- There are too few projects drawing on the expertise of the Commission via its Design Review Service.
- There is insufficient skill and resource available in local authorities to identify and secure the benefits of good design and a persistent, misleading assumption that good quality escalates cost.
- The Design Commission for Wales has published its findings on those projects it has been able to assess and make public all its Design Review Reports arising from direct dialogue about specific projects. These are available via our website. <https://dcfw.org/?s=School&cat=3&x=0&y=0>
- Where there is genuine collaborative and consultative ethos, some projects can be very good. This does not however characterise the approach to the programme, in our experience. Our contributions to various reviews of the programme have been managed in what is to us a very odd manner.
- The wider public benefits of all such projects should be clearly articulated and secured throughout the investment and procurement process. We are not yet convince that this is the case. Objectives and outcomes would perhaps be more sophisticated means of achieving this than targets and standards.
- The approach taken so far to 'standardised' elements lacks sophistication and sets minimum standards that do not in our experience drive or stimulate quality and longevity and therefore value for the public purse.
- Use of the MIM (Mutual Investment Model) as we have seen in healthcare, needs to be carried out in such a manner that the client/Government can be certain of the quality of the asset it will inherit.
- Anecdotally we are aware of head teachers who find it difficult to manage the demands of such projects, given their different skills and experience. It is our view that they need more support to do so.
- The 21st Century Schools website could be improved by greater openness and transparency as to personnel contact for enquiries and how the whole programme is managed and communicated and how the site is updated to ensure currency. This may have changed recently and we are aware of the difficulties of maintaining such public platforms.
- The Auditor General Report did not sufficiently explore these wider qualitative elements and no contact was made by the Auditor General's team with DCFW. The Commission initiated contact following publication of the report to ensure the WAO could make contact in future reviews of this nature.

We would be pleased to share more detail of the broad concerns outlined above and to play our role in ensuring the education in estate in Wales is the best it can be in order that it is able to serve the needs of future generations.

Carole-Anne Davies
Chief executive
cad@dcfw.org
dcfw.org

For and on behalf of the Board of Directors

Further information about the Design Commission for Wales

The Design Commission for Wales is a company limited by guarantee (DCFW LTD), without share capital and incorporated in 2002 as a wholly owned subsidiary of the National Assembly for Wales, now Welsh Ministers, pursuant to the Government of Wales Act 2006. The Commission receives funds from the Welsh Government for its activities, carried out in pursuit of the Objects of the Company as set out in its Memorandum of Association. These are:

- *To champion high standards of design and architecture to the public and private sectors in Wales through promoting wider understanding of design issues and the importance of enhancing the built environment across all sectors, including the organisation of exhibitions, meetings, seminars and conferences.*
- *To promote design practice that is compatible with the scheme made by the National Assembly for Wales under Section 121 of the Government of Wales Act 1998 ("the Sustainable Development Scheme"), promoting best practice in energy efficiency, waste disposal and access to public transport.*
- *To promote design practice compatible with the highest standards in relation to the promotion of equality of opportunity and social inclusion.*
- *Whilst promoting excellence in prestige projects to have due regard also to the promotion of excellence in day to day developments such as residential estates and industrial units*

In addition to the company Objects the Commission responds to a number of requirements set out annually by its Sponsor department, the Planning Directorate of the Welsh Government. These are agreed annually as part of the annual planning process and reflected in DCFW's Annual Plan each year. DCFW may also respond to

requirements from other Welsh Government portfolio areas, major projects or Ministerial requirements. DCFW responds to legislation and policy requirements pursuing its Objects through Client support and training; the National Design Review Service and through events, publications and networks. DCFW operates throughout Wales with all 22 Local Authorities and 3 National Parks and across private, public and third sectors.

End.



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Nick Ramsay AM
National Assembly for Wales
Chair, Public Accounts Committee
Cardiff Bay,
Cardiff
CF10 4PZ

18 May 2018

Dear Mr Ramsey,

Public Accounts Committee: Inquiry into the 21st Century Schools and Education Programme

The Catholic Education Service is the education agency of the Catholic Bishops' Conference of England and Wales. The Bishops' Conference is the permanent assembly of the Catholic bishops of England and Wales and the CES, as an agency of the Bishops' Conference, is charged with promoting and securing education on behalf of the bishops.

The Catholic Education Service welcomes this inquiry into the 21st Century Schools and Education Programme not least because, despite the fact that capital funding for the voluntary aided sector was included within the funding envelope, no Catholic schools were included in the initial rounds of the Band A phase. We welcome the increased engagement with our sector that has taken place in preparation for the Band B phase.

In terms of the areas specified for this inquiry, the Catholic Education Service has concerns regarding the suggested **Funding Model**, in particular the development of the Mutual Investment Model (MIM).

Catholic schools are provided by their Trustees for the purposes set out in the Trustees' governing documents, known collectively in education law as their "Trust Deed", which will set out the Trustees' charitable objects and other parameters within which they may allow their property to be used. The Trustees will have established the school under charitable trusts in furtherance of their charitable objects, and the governing documents of the school will also contain parameters within which the Church school is to be conducted: these will be compatible with the Trust Deed of the Trustees.

Tudalen y pecyn 56

The Catholic Education Service is an agency of the Catholic Bishops' Conference of England and Wales
Chairman: The Most Reverend Malcolm McMahon OP KC*HS, Archbishop of Liverpool

Director: Paul Barber

Company Number: 4734592 Charity Number: 1097482

The governing body of the school occupies and conducts the school on behalf of the Trustees as the occupier of the premises, the proprietor of the undertaking and the employer of the staff. The governing body occupies the premises subject to the Trustees' objects, Trust Deed and any other parameters laid down by the Trustees. Whilst the Trustees permit the school to occupy their site for the time being, they do not give the school any right to occupy and ultimate control of the site and any decisions relating to the land and buildings rest with the Trustees.

The Trustees can give notice to terminate the occupation by the governing body of the school at any time. Legislation provides that the period of notice given by the Trustees must be not less than 2 years in circumstances where the termination of occupation would have the result that it is not reasonably practicable for the school to continue to be conducted on its existing site.

The Trustees are entitled to set out parameters governing the use of the land. This can include, but is not limited to, ensuring that the use is compatible with the charitable trusts, for example, restricting the use of the premises to prevent certain activities which they consider to be incompatible with their charitable trust, or where such activities would not be in keeping with the teachings of the church.

In addition, the Trustees control any dealings with the land and buildings. The Trustees' consent is required for any works, including capital works. Most Trustees will not even permit the submission of any capital grant application without the Trustees' consent having been provided.

All Catholic schools are voluntary aided and, therefore, the responsibility for work to the school premises is shared between the school's governing body and the local authority. It is clear from the legislation in relation to voluntary aided schools, that the responsibility for discharging any liability in connection with the provision of the premises for the purposes of the school, lies with the governing body or the local authority.

For Catholic schools, any buildings currently on the land, or that might subsequently be built on it, are part of the land. The land and buildings are assets of the Trustees. They are not public assets, but charitable assets which the Trustees, under charity law, have a duty to protect.

The documents that the Catholic Education Service has seen regarding the MIM are clearly generic and intended for use across all government departments. They appear to have been developed on the assumption that the buildings that will be the subject of these agreements, are in public ownership. They do not in any way envisage dealing with land and buildings where the land and buildings are provided by the voluntary sector such as in this case, where the Catholic Church provides schools as a result of the long standing partnership between Church and State.

Because the only available documentation to us is generic, it is our assumption that the Agreement is drafted on the basis that the "Authority" entering into it is a local authority. If that

is the case, the Agreement provides for the Authority to grant certain rights in relation to the land that, for land and buildings occupied by Catholic schools, are not the Authority's to give. These include rights of access over the site and rights in relation to the ongoing maintenance of the building which is to be constructed.

Since the documentation has been drafted entirely on the basis that the building is a public asset, there is no indication of the intentions of the Welsh Government in relation to how Trustee land could possibly be included in this model of funding. It is not, for example, clear whether in order to participate in the Model, it would be necessary for the Trustees to grant a lease to a third party. Since the expiry date in the Agreement is blank it has not been possible, from a perusal of the Agreement and the User Guide, to determine the period of the Agreement. It is our experience that this type of arrangement would normally include a third party contractor having responsibility for ongoing maintenance of a building for a considerable period, e.g. 25 years.

Even if the Trustees agreed to participate in the Model, the existing documentation would be totally unsuitable. A different set of documentation would be required including an agreement that recognises that the land and buildings that would be the subject of the agreement are not public buildings, that the land on which they are to be constructed is not public land and that would protect the interests of the Trustees, including the ability for them to terminate the occupation of the premises on the same basis as currently exists. Any costs, including legal costs, would have to be met.

The Trustees would, however, be extremely concerned about providing rights to a third party. This is because it is likely to have the effect of impeding the Trustees ability to terminate the school's occupation of the site. As stated previously, the Trustees are able to give notice to terminate occupation at any time, without cause, subject to the statutory provision requiring two years notice in certain circumstances. The Trustees' require the unfettered ability to do so to ensure that the school continues to be conducted in accordance with the Trust Deed, and to meet the estate planning requirements of the Diocesan Bishop. The Diocesan Bishop is responsible for ensuring the provision of Catholic education across his diocese in accordance with canon law.

In addition, certain actions on the part of the Trustees, such as the grant of a lease to a third party, would in law be a disposal. Since the Trust is a charitable trust, the consent of the Charity Commission would be required. The CES is not aware that any discussions have taken place with the Charity Commission to ascertain the view of the Charity Commission about the risks to the charitable land in the event that the Trustees were to agree the use of this funding model.

The Trustees are required to safeguard their assets, and to ensure that they continue to be used for the charitable purposes for which they established their schools. They are able to give notice to terminate the occupation by the governing body at any time, subject to the legislative provision requiring two years' notice. The Trustees must have an unfettered ability to do so.

We assume, similar to the arrangements for other types of schools where the land and buildings are owned by a local authority, that any agreement would involve a long-term arrangement giving rights over the land and buildings to a third party. This would interfere with the Trustees legal obligations in relation to the use of the land and buildings, and their ability to terminate that use. It might also provide rights for a third party to deal with the land, e.g. to carry out works to the land and buildings, without the consent of the Trustees.

In the circumstances, it is unlikely that the Trustees of any Catholic school would be prepared to agree to the use of the MIM model of funding for any capital works to their premises. This is because any such arrangement would cut across the legal obligations of the Trustees in dealing with their land and premises which are essential to ensure that their charitable objects are fulfilled.

As co-providers of maintained schools in Wales, the Catholic sector very much welcomes the implementation of the 21st century schools programme. Our understanding is that our diocesan officers have been working very constructively with the Welsh Government and with Local Authorities on planning for Phase B. However, our advice is that they do so, for the reasons outlined above, without recourse to the Mutual Investment Model of funding.

The Catholic Education Service, alongside representative diocesan officers, if appropriate, would be happy to continue this conversation with the Public Accounts Committee if it is considered helpful.

Yours sincerely,

A handwritten signature in black ink that reads "pp. R. Hayward". The signature is written in a cursive, slightly slanted style.

Philip Manghan
Education Adviser (Wales)



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18 Mai 2018

I sylw:

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Cadeirydd
Pwyllgor Cyfrifon Cyhoeddus
Cynulliad Cenedlaethol Cymru
Bae Caerdydd
Caerdydd
CF99 1NA

Annwyl Mr Ramsay

Pwyllgor Cyfrifon Cyhoeddus: Ymchwiliad i'r Rhaglen Addysg ac Ysgolion ar gyfer yr 21ain Ganrif

Dymunwn gyflwyno'r sylwadau canlynol fel rhan o'r ymchwiliad dan sylw.

Rydym yn croesawu'r cyfle i gyflwyno barn ac yn falch bod y Pwyllgor Cyfrifon Cyhoeddus yn cynnal yr ymchwiliad er mwyn cynnig argymhellion i wella'r rhaglen cyn i gyllid Band B ddechrau ym mis Ebrill 2019.

Mae cyrraedd nod uchelgeisiol y Llywodraeth o filiwn o siaradwyr erbyn 2050 yn gwbl ddbynnol ar gynyddu'r niferoedd sy'n derbyn eu haddysg drwy gyfrwng y Gymraeg. Felly mae agor mwy o ysgolion cyfrwng Cymraeg yn elfen anhepgorol o'r siwrnai at y miliwn. Ni ellir cyflawni hynny heb sicrhau cyllid ychwanegol sylweddol i ehangu Addysg Gymraeg.

Mae RhAG eisoes wedi galw ar Awdurdodau Lleol i weithredu'n arloesol i ehangu addysg Gymraeg wrth iddynt lunio ceisiadau am gyllid cyfalaf gan Lywodraeth Cymru.

Cynhaliodd RhAG waith ymchwil er mwyn dadansoddi beth fu lefelau gwariant Awdurdodau Lleol ar addysg Gymraeg ers sefydlu Rhaglen Ysgolion 21ain Ganrif yn 2011 (gw. y ddogfen atodedig).

Daeth hynny yn sgil argymhellion adolygiad annibynnol Aled Roberts o'r Cynlluniau Strategol y Gymraeg mewn Addysg 2017-20, sy'n argymhell:

- y dylid cyhoeddi canllawiau pendant o ran dyraniad buddsoddiad cyfalaf i'r gyfundrefn addysg cyfrwng Cymraeg;
- y dylid adolygu amserlen y CSGAau i gyd-fynd â Rhaglen Cyfalaf Ysgolion 21ain Ganrif, Llywodraeth Cymru

Mae'r ymchwil a gynhaliwyd gennym yn dangos bod nifer o siroedd, gan gynnwys Merthyr, Wrecsam, Fflint, Mynwy, Rhondda Cynon Taf a Blaenau Gwent, wedi gwario bron dim ar ysgolion Cymraeg ers sefydlu'r rhaglen yn 2011.

Rydym yn cydnabod bod nifer o siroedd erbyn hyn wedi cyflwyno ceisiadau am gyllid Band B a bod sawl ysgol cyfrwng Cymraeg newydd arfaethedig yn rhan o'r cynigion. Serch hynny, mae'r darlun cenedlaethol yn gymysg ac mae cryn anghysondeb yn parhau. Yn wir, mae'n ofid nad oedd rhai Awdurdodau Lleol wedi cyflwyno cais oedd yn cynnig unrhyw brosiectau cyfalaf yn ymwneud â'r sector cyfrwng Cymraeg.

Ar ben hynny, ymddengys na fyddai sawl Awdurdod Lleol wedi cyflwyno cynigion ar gyfer ehangu'r sector cyfrwng Cymraeg yn ystod y blynyddoedd nesaf, heb ymyrraeth swyddogion Llywodraeth Cymru fel rhan o'r trafodaethau i dderbyn Cynlluniau Strategol y Gymraeg mewn Addysg.

Rydym yn croesawu'r ffaith bod cronfa ychwanegol gwerth £30 miliwn wedi ei chreu, yn benodol i hyrwyddo amcanion polisi Cymraeg 2050, a bod hynny wedi cynorthwyo rhai siroedd i gyflwyno ceisiadau gan nad oes rhaid canfod unrhyw arian cyfatebol, fel sy'n orfodol ar gyfer cyllid Rhaglen Ysgolion 21 Ganrif.

Ar sail hyn, mae RhAG o'r farn bod angen adolygu'r rhaglenni cyllid cyfalaf sy'n ymwneud ag ysgolion, er mwyn sicrhau bod yr amcanion yn cyd-fynd â pholisi'r Llywodraeth mewn perthynas a'r iaith Gymraeg.

Mae angen eglurder o ran blaenoriaethau'r rhaglen ar gyfer y cyfnod ariannu nesaf ac awgrymwn y dylid cynnwys maen prawf penodol sy'n ei gwneud yn ofynnol i Awdurdodau Lleol i gynyddu darpariaeth addysg Gymraeg.

Credwn hefyd fod angen eglurder ynglŷn â'r sefyllfa o ran yr agenda gwaredu lleoedd gweigion. Mae'n deg i nodi na fu blaenoriaethau y rhaglen flaenorol o unrhyw gymorth i Addysg Gymraeg ac mae'n rhaid ymateb i hynny.

Diolch ymlaen llaw am ystyried y sylwadau hyn.

Yn gywir

Ceri McEvoy

www.rhag.net

Rhif elusen gofrestrdig Registered charity number **1153403**



YSGOLION CYFRWNG SAESNEG (ENGLISH MEDIUM SCHOOLS)
 YSGOLION CYFRWNG CYMRAEG (WELSH MEDIUM SCHOOLS)



Gwariant cyfalaf ar Raglen Ysgolion yr 21ain Ganrif Capital spending on the 21st century Schools Programme

Cyfarfaleddau

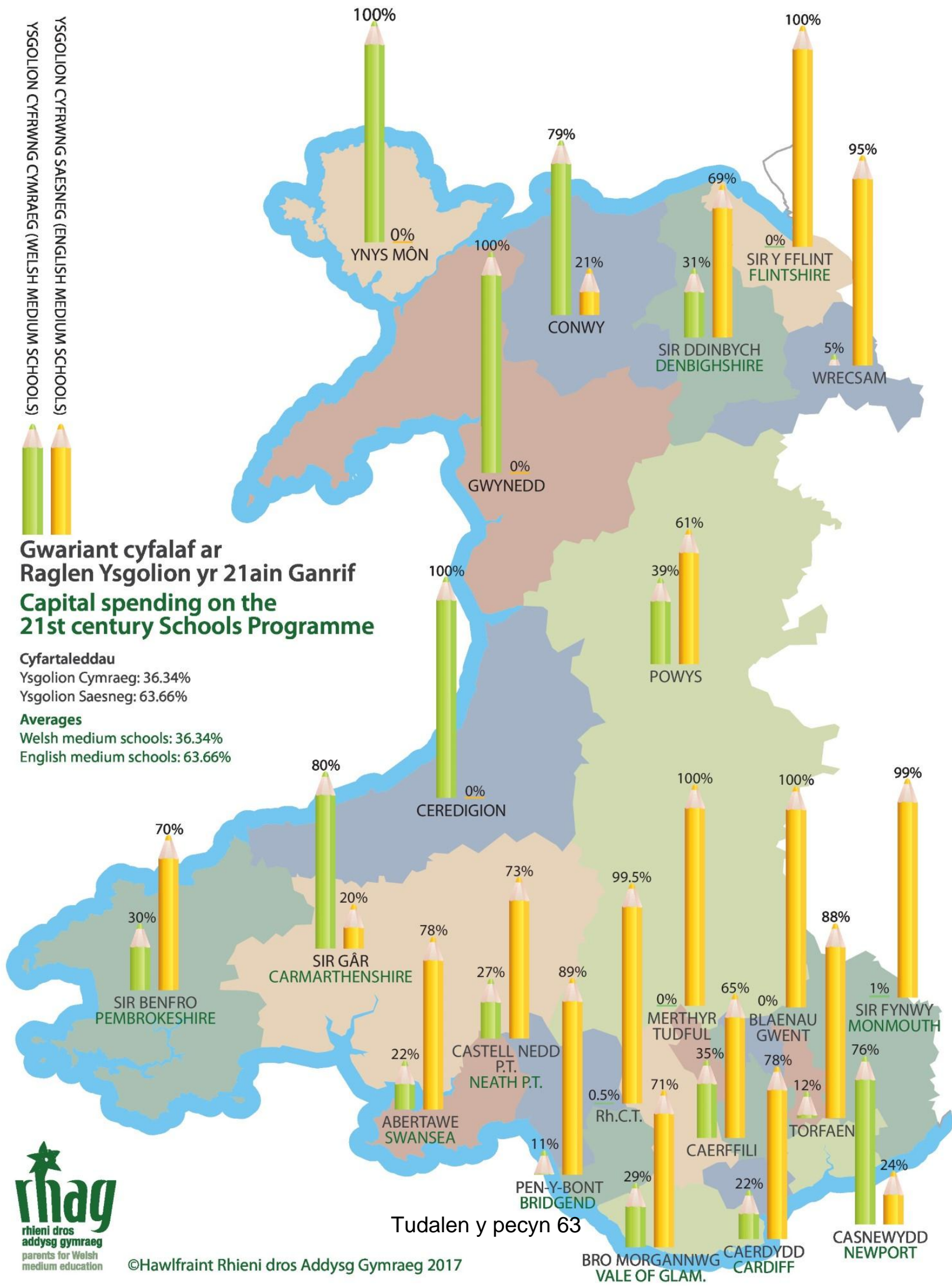
Ysgolion Cymraeg: 36.34%

Ysgolion Saesneg: 63.66%

Averages

Welsh medium schools: 36.34%

English medium schools: 63.66%



Tudalen y pecyn 63



The Public Accounts Committee
Inquiry into 21st Century Schools and Education Programme
18 May 2018

1. The NASUWT welcomes the opportunity to submit views to the Public Accounts Committee (PAC) Inquiry into 21st Century Schools and Education Programme.
2. The NASUWT is the largest teachers' union in Wales, representing exclusively teachers and school leaders, and has drawn on comments and observations made by members to inform this submission.

GENERAL COMMENTS

3. The NASUWT maintains that the mechanism by which state schools are funded, including the provision of school buildings, is critical to securing a world-class education system and a just and inclusive society, and that there is a positive correlation between the quality of school buildings and student attainment. Education should meet the needs of all children and young people on a fair and equitable basis, irrespective of where they happen to live or be educated. The capital funding arrangements should guarantee learner entitlements, irrespective of the institution at which they are on roll.
4. A National Foundation for Educational Research study found that moving to new buildings improved pupils' outlooks regarding experiences of school and expectations for the future.¹

¹ National Foundation for Educational Research (May 2008): *The effects of the school environment on young people's attitudes towards education and learning*

5. The NASUWT also asserts that the funding methodology must be clear and transparent, and must ensure that there is good provision of places for all pupils.
6. The Union believes that there should also be a fair, transparent and appropriate distribution. The mechanisms for distributing funding to local authorities and schools should be fit for purpose, taking account of local circumstances and needs and the expectations on schools. The funding mechanism should promote public and professional confidence in the system and enable fair comparisons to be made.

SPECIFIC COMMENTS

7. The NASUWT comments and observations which follow address the five main areas the PAC has identified as the focus for this Inquiry.

Setting Expectations and Targets

8. The NASUWT notes that the guidance from the 21st Century Schools and Education Programme Team states that local strategies should '*Focus on improving outcomes for children*'. The Union notes, however, that one of the main priorities has been to reduce the number of 'surplus places' in the school system.
9. The NASUWT has never agreed with this strategy, because the Union has argued that there is little to gain from the process as schools are, by and large, funded on a per pupil basis. The strategy reduces capacity without the full knowledge and understanding of the future demand.
10. The NASUWT is very concerned that the number of pupils in Wales has fallen by only 633 from 467,141 in 2010 to 466,508 in 2017, whereas the number of full-time equivalent teachers has fallen over the same period by 1,377 from 25,286.6 to 23,909.8.²

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² Welsh Government, Pupil Level Annual School Census 2017

11. The NASUWT is, therefore, pleased to note that the main emphasis in Band B of the programme is to be changed to focus on the condition of buildings rather than on surplus places.
12. However, the NASUWT is alarmed at the nature of the suggestions contained in the CADE/RIBA document available on the 21st Century Schools website. The Union would have expected to see the concepts for the education estate based on sound evidence that supports the main principle of improving the education of learners, rather than the experimental and untested concepts that appear to be works of science fiction contained within the document.
13. The Union also notes that the 21st Century Schools webpage 'Transforming the Learning Environment' states that there is 'Increasing interest in the use of larger flexible project spaces'.³ The NASUWT is also aware that many of the projects agreed and built under Band A were for 'all-through' 3-16 or 3-18 provision. In general, the latter were in the circumstance where a secondary school and a primary school previously either shared a site or were in close proximity. The NASUWT is not aware of any evidence to show how these models contribute to the improvement of outcomes for children and young people.
14. The Union has received information that recently completed projects have had mixed reviews from staff, pupils, parents, employees and members of the local community. Issues have been raised about quality of fittings and fixtures, with walls easily scuffed, stair handrails working loose, and poor heating and ventilation. In some cases, the emphasis on open-plan design has led to complaints of noise and a lack of privacy and accommodation, particularly regarding classroom size, connected to increased class size, and canteen facilities. These complaints reflect the findings of research that highlight the detrimental impact on learning and

³ <http://21stcenturyschools.org/guidance/teachinglearningict/?lang=en>

pupil behaviour of poorly designed and organised open-plan learning environments.⁴

15. The increasing use of the all-through model appears to have been perpetuated simply because projects of this type had succeeded in gaining approval for funding by the Welsh Government. Other local authorities then appear to have followed this model in order to gain access to 21st Century Funding rather than considering carefully the educational merit of their proposals or the impact on the workforce affected by them.
16. Indeed, the Union believes that, in many cases, such proposals have been used cynically as a device to cut revenue costs, reduce the number of places and secure 'efficiencies' by reducing the number of teachers and support staff.
17. The NASUWT is dismayed that too many good teachers have lost their livelihoods as a result of these changes.
18. The NASUWT is also concerned about the potential impact on primary school children from feeder primary schools who would have expected to attend one of the secondary schools involved in the reorganisation proposals, but find that they are not included in the transformed provision.
19. Much has been made about the transition between primary and secondary schools and this is often cited as a reason for moving to allthrough provision. However, in the all-through establishments, the intake at the Foundation Phase at the beginning of primary education is often far smaller than the intake at the beginning of secondary education. Other primary pupils enter the school at the beginning of Key Stage 3. Concerns about this practice have been raised in some consultations on transformed provision, but there has been no research into the impact on those pupils joining the school at this stage, when there are already

⁴ Shield, B; Conetta, R; Dockrell, J.E.; Connolly, D.; Cox, T. and Mydlarz, C.A. 'A survey of acoustic conditions and noise levels in secondary school classrooms in England': *The Journal of the Acoustical Society of America*. 137 (1) (2015), pp. 177-188.

primary pupils on the site. Similarly, there are no studies on whether there is an impact on the pupils that are already part of the school.

20. The Union believes that the PAC should make recommendations to the Welsh Government and the 21st Century Schools Unit that different forms of education provision should only be agreed if there is clear evidence to support their use. Pupils should not be used as guinea pigs or be subject to fads and fashions.

The Funding Model

21. Whilst the NASUWT acknowledges that the policy of austerity adopted by the Westminster Government has had a significant effect in reducing the levels of capital funding available in Wales, the Union is nevertheless disappointed that this appears to be accepted by the Welsh Government and used in mitigation over inadequate provision.
22. Despite this, the NASUWT welcomes the Welsh Government's commitment to improving school estate, which is vital for the life chances of learners and essential to improve the working conditions of staff.
23. The NASUWT believes that the Mutual Investment Model (MIM) is an improvement on previous Private Finance Initiatives and public-private partnerships and acknowledges the considerable effort that the Welsh Government has put in to gain approval for the scheme from the Office for National Statistics and others. The Union nevertheless will continue to have concerns regarding revenue used to provide capital funding. The PAC and the Welsh Government will be aware that the NASUWT has calculated that the on-average, per-pupil funding gap between maintained schools in Wales and those in England stood at £678 for 2015-16 (the last year for which full figures on expenditure were available). This means that there is a total shortfall in funding of £306 million going into school budgets in Wales compared with those in England. The Union notes that the revenue element of the MIM is proposed to be £500 million.

The Welsh Government plans to get better value for money by encouraging more standardised elements to the new builds and by standardising costs.

24. The NASUWT believes that there are significant differences between schools and between communities in different parts of Wales. The Union, therefore, maintains that a 'one size fits all' policy could not be adopted universally and recognises that education provision should take account of local needs. However, the NASUWT is clear that this does not mean that elements of provision cannot be standardised or that economies of scale should not be pursued wherever possible.

Welsh Government consultation on the programme to date and in planning for the future roll out

25. The NASUWT considers that it is most regrettable that the Union has not been party to any direct consultation by the Welsh Government or the 21st Century Schools Unit on any aspect of the programme to transform the school estate. The Welsh Government appears to have focused on local authorities and the construction industry as its consultation partners and has ignored other stakeholders. This is despite the welcome partnership approach developed elsewhere, particularly around workforce issues through the Workforce Partnership Council.

26. The NASUWT was very critical at the time of the introduction of the School Standards and Organisation (Wales) Act 2013 and the School Organisation Code (the Code) and continues to be so. The Union believes that changes that were brought forward at the time were misconceived and based on a false premise and is alarmed and dismayed by the total disregard for the needs of the workforce.

27. The NASUWT maintains that the previous arrangements for making changes to school reorganisation provided a structure that was democratic, afforded sufficient time for schools, governing bodies, local communities and other interested parties to consider carefully any proposals and to formulate detailed responses, and allowed sufficient

time for the proper consideration of proposals and objections by those charged with making decisions.

28. The NASUWT is aware that there is a mixed picture across Wales regarding the nature and detail of consultations at a local level. Some local authorities involve the trade unions at an early stage with detailed proposals and consideration of views before formal proposals are made. With others, there is cursory consultation: only that which is required by the Code, with little or no regard to the views of staff or the trade unions that represent them.
29. The process that many local authorities follow when amalgamating or merging schools is to close the existing schools formally and to open a new one in their place. This is claimed to be an approach that ensures that the staff of all schools involved in the process are given equal and fair consideration when the recruitment process for the new school is undertaken. In practice, the NASUWT has found this not to be the case and some staff are left unplaced and redundant. On several occasions, the Union has had to resort to industrial action in order to protect the jobs and livelihoods of its members. There should not be any need to recruit new staff as the staff already exist in the schools involved. Equally, the Union will not accept redundancy by way of non-appointment and believe that the staffing structures of the new provision should be designed to ensure that all existing staff are retained.
30. The NASUWT is most concerned that the recent drivers for reorganisation are more often centred on management restructuring, reducing recurrent staffing costs and an ideological assault on curriculum design and pedagogy by linking the programme to the uncertainties of the new curriculum stemming from the Donaldson reforms. The NASUWT believes this to be both short-sighted and illconceived.
31. The impact of The Staffing of Maintained Schools (Wales) (Amendment No. 2) Regulations 2009 and The Staffing of Maintained Schools (Wales) (Amendment) Regulations 2014 is that, whilst protecting the employment

of headteachers and deputy headteachers, the remaining staff have no security in employment. The NASUWT finds this to be a wholly unacceptable, unfair and intolerable situation.

Areas to consider in the next phase of investment

32. The NASUWT insists that the Welsh Government takes all reasonable steps in order to manage the risks of the new type of funding in relation to the MIM.
33. The Union maintains that, as well as ensuring that the good collaborative working between Welsh Government and local government continues, there must be involvement with the trade unions at national level over the nature and principles of the programme.
34. In particular, whilst welcoming in part the change of principles from a focus on reducing surplus places to one of prioritising the condition of schools, the NASUWT insists that the most pressing issue in relation to the condition of schools is the safe and effective removal of asbestos.
35. The PAC will be aware that public buildings in Wales still contain millions of tonnes of asbestos. Over 75% of schools contain asbestos, with up to 90% of schools in certain areas affected.^{5/6}
36. Whilst in general it is accepted that good management of asbestos reduces the risks, the NASUWT is firmly of the belief that the only way to ensure the future health of staff and pupils is to remove all asbestos. Nevertheless, whilst it is undoubtedly the case that some schools will manage asbestos effectively, the Union is concerned that there have been numerous serious instances of poor asbestos management, which indicate inadequate management in too many schools.

⁵ 'Asbestos time bomb in Wales classrooms' 27, Jul 2009, *Western Mail*, <http://www.walesonline.co.uk/news/wales-news/2009/07/27/asbestos-time-bomb-in-wales-classrooms91466-24245398>

⁶ BBC Inside Out: 'Asbestos in majority of schools', 27 Jan 2009.

37. This was demonstrated by a recent Department for Education survey of schools in England, which found that nearly two fifths of responding schools containing asbestos were not compliant with asbestos

regulations, and 4% were sufficiently concerning to require urgent intervention.⁷

38. Given that this was a voluntary survey, and assuming that non-compliant schools would not have responded, the NASUWT believes that the true level of non-compliance is likely to be much higher.
39. Further, although these figures relate to England, the Union maintains that it is reasonable to assume similar levels of non-compliance exist in Wales.
40. Given the lack of data pertaining to asbestos compliance in Welsh schools, the NASUWT urges the PAC to press the Welsh Government to undertake a mandatory asbestos compliance survey of all schools in Wales.
41. The NASUWT has long campaigned for the safe and effective removal of asbestos from school buildings. The Union believes that successive governments have not paid sufficient attention to the asbestos problem in schools, preferring short-term policies rather than embarking on a long-term strategy of asbestos removal.
42. Whilst understanding that the costs of removal are very high, the Union has always accepted that this could be a gradual process aligned to the renovation and/or rebuilding of schools. It should be noted, however, that the costs of removal can be less than the costs of long-term management and removes all risk, rather than simply minimising the risks on a short-term basis.
43. The NASUWT acknowledges that the health and safety concerns of asbestos removal are dealt with in guidance from the 21st Century School Unit, but that this is only in regard to the generality of the legislation to protect construction staff during renovation or demolition.⁸

The guidance neither acknowledges nor recognises the need to prioritise

⁷https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/594042/Asbestos_management_in_schools_data_collection_report.pdf ⁸
<http://21stcenturyschools.org/guidance/statutoryrequirements/?lang=en>

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the protection of the school workforce and children and young people from the long-term effects of exposure to asbestos.

44. The Committee on Carcinogenicity recently reported that children were at a significantly higher risk of contracting asbestos-related diseases than adults, given their longer lifespan and the long latency period for these diseases.⁷
45. The NASUWT therefore insists that Band B of the 21st Century School building programme prioritises not only schools in poor condition but also those with significant amounts of Asbestos Containing Materials in their fabric and construction.



Rex Phillips

National Official for Wales

For further information on this written evidence, contact Rex Phillips, National Official for Wales.

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⁷ http://www.iacoc.org.uk/statements/documents/Asbestosinschoolsstatement_000.pdf

Nick Ramsay AM
Chair
National Assembly for Wales
Public Accounts Committee

16th May 2018

Dear Chair,

Public Accounts Committee: Inquiry into 21st Century Schools and Education Programme

I hope that you don't mind my writing to you as I have been informed of the inquiry being carried out by the Committee. My letter relates only to matters regarding asbestos in schools and colleges in Wales.

As you may recall from when you were Chair of the Cross Party Group on Asbestos in Schools, I am the secretary of that CPG, (which is now chaired by Dawn Bowden AM).

For completeness you may also recall that I am an observer member of the Joint Union Asbestos Group. My petition on asbestos in schools continues to be scrutinised by the Petition's Committee <http://senedd.assembly.wales/ielIssueDetails.aspx?Id=8437&Opt=3>

The Public Accounts Committee may find the presentation given by John Evans of Santia Asbestos Management Ltd to the CPG in January 2018 to be of assistance on the issue of asbestos in schools in Wales. This is dealt with in particular from slide 10 onwards and includes reference to the information obtained by Lucie Stephens (who lost her mother, a school teacher, to mesothelioma) and in particular can be set out at slides 13 and 14. The FOI responses can be seen in full at https://www.whatdotheyknow.com/user/lucie_stephens/requests

The main purpose of my letter was to highlight the scrutiny by the House of Commons Public Accounts Committee and also the positive responses to the Public Accounts Committee from the UK Government. I have previously highlighted this with the Petitions Committee.

I refer firstly to the House of Commons Public Accounts Committee of the 26th April 2017 (attached) and section 5.

"5. The Department still does not know enough about the state of the school estate, meaning that it cannot make well-informed decisions about how best to use its limited resources. The Department now has a better understanding of the condition of school buildings after completing a survey of the estate in 2014. This property data survey estimated that it would cost £6.7 billion to return all school buildings to satisfactory or better condition, and a further £7.1 billion to bring parts of school

buildings from satisfactory to good condition. Much of the school estate is over 40 years old, with 60% built before 1976. The Department estimates that the cost of dealing with major defects will double between 2015-16 and 2020-21, even with current levels of investment, as many buildings near the end of their useful lives. The property data survey did not assess the safety or suitability of school buildings or the extent of asbestos. Over 80% of schools responding to a separate survey by the Department had asbestos, with 19% reporting that they were not complying with asbestos management guidance. However, only a quarter of schools responded to the survey, meaning that the Department does not have a complete picture. The Department estimates that it would cost at least £100 billion to replace the entire school estate which it believes would be the only way to eradicate asbestos from school buildings. The Department is undertaking a second property data survey but, until this is complete, it cannot assess reliably how the school estate is changing and does not know the extent to which its funding is helping to improve the condition of school buildings.

Recommendation: The Department should set out a plan by December 2017 for how it will fill gaps in its knowledge about the school estate in areas not covered by the property data survey. Specifically it needs to understand the prevalence, condition and management of asbestos, and know more about the general suitability and safety of school buildings.”

In October 2017 HM Treasury responded (and this response is also attached) agreeing with the recommendations of the Public Accounts Committee,

“5 : Committee of Public Accounts conclusions : The Department still does not know enough about the state of the school estate, meaning that it cannot make well – informed decisions about how best to use its limited resources .

Recommendation: The Department should set out a plan by December 2017 for how it will fill gaps in its knowledge about the school estate in areas not covered by the property data survey. Specifically it needs to understand the prevalence, condition and management of asbestos, and know more about the general suitability and safety of school buildings .

5.1 The Government agrees with the Committee’s recommendation.”

More recently the House of Commons Public Accounts Committee on 30th March 2018 <https://publications.parliament.uk/pa/cm201719/cmselect/cmpubacc/760/76005.htm> has stated as follows:-

"6. The Department does not have enough information about the extent of asbestos in schools to ensure that the risks are being properly managed. Asbestos is a significant, and potentially dangerous, problem in many schools. In April 2017, we found that the Department did not have a complete picture of the extent of asbestos in school buildings. The Department's first property data survey did not assess the extent of asbestos. Only a quarter of schools responded to its second survey, in 2016, which aimed to collect data on this issue. We recommended that the Department should set out a plan by December 2017 for how it would fill gaps in its knowledge about the school estate in areas not covered by the property data survey. The Department's latest property data survey is currently taking place and will provide more information on the presence and management of asbestos. The Department accepted that information on asbestos in school buildings should be available locally and easily accessible to parents and local communities. ESFA told us that it expected information on asbestos to be available locally for parents to view, and without recourse to Freedom of Information requests. We were concerned to hear of an example where this had not been the case and local communities could not easily access this information.

Recommendation: The Department should publish the results of its ongoing exercise to collect data on asbestos; and make clear to Local Authorities and academy trusts that information should be made available by the end of June 2018."

In a separate although not necessarily unconnected development at the beginning of March 2018 (in respect of which I wrote to the Petitions Committee on 5th March 2018) the Department for Education at Westminster (DfE) launched its Asbestos Management Assurance Process (AMAP) summarised by one of my JUAC colleagues as follows:-

"The DfE has now launched its Asbestos Management Assurance Process (AMAP), which requires 'Responsible Bodies', via an online portal, to provide an electronic declaration that their schools are compliant with legislation on the management of asbestos in their education estate. 'Responsible Bodies' are the main employer of staff at maintained schools and academies (academy trusts, LAs and in some cases governing bodies). Although it is not described as compulsory, Responsible Bodies are 'expected' to comply and the DfE has stated that it intends to publish data which shows which Responsible Bodies have provided assurance declarations. The AMAP will not apply to non-maintained nursery schools or early years providers, FE and HE institutions, sixth form colleges and independent schools.

Although it is the duty of each Responsible Body to ensure that the form is submitted on behalf of all its schools, it can ask individual schools to provide it with the relevant information. However, the Responsible Body remains ultimately responsible for validating

and ensuring the accuracy of information submitted by individual schools, and for providing the overall assurance declaration to the DfE.

The AMAP will be open for 3 months (the deadline for submitting assurances is 31 May 2018). During this time the DfE will remind Responsible Bodies of the expectation that responses are submitted.”

The DfE user guide is here <https://www.gov.uk/government/publications/asbestos-management-assurance-process-amap-user-guide> The AMAP online portal is at https://onlinecollections.des.fasst.org.uk/onlinecollections_ns/

It will be noted that it is stated on the introductory page.

“The AMAP meets the department’s commitments set out in the March 2015 review of Asbestos Management in Schools, enhancing scrutiny on those responsible for managing asbestos in schools.

You are expected to complete the AMAP if you are a Responsible Body.

- *Responsible Body: the main employer of staff at State-Funded Schools and Academies.*
- *State-Funded Schools and Academies : maintained nursery schools, maintained schools (including primary, secondary and middle schools), maintained special schools and academy special schools, pupil referral units, academies and free schools and non-maintained special schools.*

This guidance is for anyone who is responsible for the management of asbestos in the education estate and compliance with the Control of Asbestos Regulations 2012.”

Seemingly the DfE is providing an online solution for data collection which thus far Welsh Government has been reluctant to embrace.

I am highlighting these matters and drawing them to the attention of the Public Accounts Committee as it can be seen that overall that there is a direction of travel being taken by UK Government which is one of increasing its knowledge regarding the extent and condition of asbestos in schools and colleges in England. That direction of travel is an increasingly transparent one.

There is of course a significant cost implication associated with the management of asbestos in schools and increased knowledge of the extent and condition of asbestos is essential when looking at the overall issues of funding of schools whether they in Wales or England. Frankly without detailed central knowledge of the extent and condition of the asbestos, it is impossible to assess the cost of maintenance and renovation of the school stock in Wales. It is self-evident that the presence of asbestos can have considerable impact the costs of any such works. I attach with my letter to illustrate the issues, the report of JUAC “Why unsafe asbestos may still be in our schools in 2050”

I am attaching a number of letters from the Cabinet Secretary for Education, which whilst illustrating that there is some information gathering from local authorities in Wales, there is a lack of transparency as to what information is being sought and what will be done with it. Furthermore there does not appear to be any willingness to share the data with key stakeholders.

I would be grateful for consideration of the Public Accounts Committee of these issues and wonder whether the Committee, as a start, would be prepared to make a recommendation similar to that made by the House of Commons Committee in April 2017.

“Recommendation: The Department should set out a plan by December 2017 for how it will fill gaps in its knowledge about the school estate in areas not covered by the property data survey. Specifically it needs to understand the prevalence, condition and management of asbestos, and know more about the general suitability and safety of school buildings.”

In short when issues of funding relating to schools and colleges in Wales falls to be considered, it essential that cost of maintaining and where appropriate removal be taken into account, particularly in light of the fact that approximately 85% of our schools and colleges are said to contain asbestos.

Yours in anticipation

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Eitem 5

Yn rhinwedd paragraff(au) vi o Reol Sefydlog 17.42

Mae cyfyngiadau ar y ddogfen hon

Tystiolaeth – Ymchwiliad y Pwyllgor
Cyfrifon Cyhoeddus i'r Rhaglen
Addysg ac Ysgolion ar gyfer yr
21ain Ganrif
MAI 2018



CLILC • WLGA

Cyflwyniad

1. Mae Cymdeithas Llywodraeth Leol Cymru (CLILC) yn cynrychioli 22 awdurdod lleol Cymru. Mae awdurdodau'r tri pharc cenedlaethol ac awdurdodau'r tri gwasanaeth tân ac achub yn aelodau cyswllt.
2. Nod y Gymdeithas yw darparu cynrychioliad ar gyfer awdurdodau lleol o fewn fframwaith polisi sydd wedi'i seilio ar ymrwymiad i ddemocratiaeth lleol ac atebolrwydd. Wrth wneud hyn rhaid bodloni blaenoriaethau ein haelodau a sicrhau bod gwasanaethau cyhoeddus lleol yn flaenllaw yn y drafodaeth ar ddatblygu datganoli yng Nghymru a'r cymunedau yr ydym yn eu gwasanaethu.
3. Mae CLILC yn croesawu'r cyfle i ymateb i ymchwiliad y Pwyllgor Cyfrifon Cyhoeddus i Raglen Ysgolion yr 21ain Ganrif ac i ddod i gyfarfod o'r Pwyllgor ar 11 Mehefin. Mae'r Gymdeithas hefyd yn cydnabod gwerth ffocws y Pwyllgor ar adroddiad yr Archwilydd Cyffredinol, *Rhaglen Addysg ac Ysgolion ar gyfer yr 21ain Ganrif* a gyhoeddwyd yn 2017. Ffocws y dystiolaeth hon fydd croesawu'n gyffredinol lawer o gasgliadau adroddiad yr Archwilydd Cyffredinol.
4. Mae CLILC wedi bod yn rhan o raglen Ysgolion yr 21ain Ganrif o'r cychwyn cyntaf a chyfrannodd yn ddiweddar at adroddiad yr Archwilydd Cyffredinol. Y mae felly'n briodol ac yn addas bod CLILC yn cael gwahoddiad i gyfrannu at yr ymchwiliad hwn. Credwn yn gryf ei fod yn enghraifft bwysig o sut y mae cynghorau a Llywodraeth Cymru, gan weithio mewn partneriaeth ddiffiniedig, wedi creu gwelliannau sylweddol ar gyfer plant ar draws Cymru.

Cefndir

Mae Rhaglen Ysgolion yr 21ain Ganrif yn rhaglen buddsoddiad cyfalaf hirdymor, strategol a ddatblygwyd mewn partneriaeth rhwng CLILC, Llywodraeth Leol a Llywodraeth Cymru. Mae'r rhaglen wedi'i chydabod yn eang o fewn Llywodraeth Leol fel un o'r enghreifftiau mwyaf llwyddiannus o ddatblygiad a gweithrediad polisi yn y blynyddoedd diweddar. Mae'r Archwilydd Cyffredinol yn nodi yn ei adroddiad ei bod:

"yn glir o'r dystiolaeth a welsom fod ymagwedd y rhaglen yn welliant aruthrol ar yr hyn a fu'n flaenorol."

Datblygwyd y rhaglen mewn ymgais i fynd i'r afael â'r diffygion yn yr ymagwedd flaenorol o ran buddsoddi mewn adeiladau ysgolion - y Grant Gwella Adeiladau Ysgolion (GGAY) - ac mae'n bwysig deall yr ymagwedd flaenorol er mwyn gwerthfawrogi maint y gwelliant sydd wedi digwydd.

Roedd y GGAY yn ddyraniad cyllid cyfalaf blynyddol, seiliedig ar fformiwla, i awdurdodau lleol a oedd yn gwneud ymdrin â buddsoddiad cyfalaf mewn adeiladau ysgolion bron yn amhosibl. Nid oedd Awdurdodau yn gallu cynllunio ar gyfer ysgolion newydd nac adnewyddu eu hysgolion presennol oherwydd nad oeddent yn gwybod faint o arian y byddent yn ei gael o un flwyddyn i'r llall. Roedd yr amgylchiadau hyn yn gwneud ad-drefnu ysgolion - ymarfer heriol ynddo'i hun, fwy neu lai yn amhosibl. Yn anorfod roedd ffocws ar brosiectau ysgolion cynradd bychan yn hytrach nag ar rai ysgolion uwchradd mwy. Bwriad Gweinidogion ar y pryd, a hynny o bosibl yn or-uchelgeisiol, oedd y byddai ysgolion 'yn addas i'r diben erbyn 2010'. Mewn system lle'r oedd agwedd 'clytio a thrwsio' tuag at fuddsoddiad cyfalaf yn nodweddiadol, roedd yn annhebygol iawn y byddai'r dyhead dilys hwn a chanddo'r bwriadau gorau yn cael ei wireddu.

Y canlyniad oedd ystâd addysg wedi dyddio ac yn dirywio gyda nifer cynyddol o lefydd dros ben. Nid oedd y newidiadau economaidd-gymdeithasol a demograffig a ddigwyddodd yng Nghymru yn ystod yr ugeinfed ganrif wedi eu hadlewyrchu mewn newidiadau cyfatebol i'r ystâd addysg. Newidiodd syniadau am addysgedd yn arwyddocaol ond roedd nifer fawr o blant a phobl ifanc ar draws Cymru yn dal i gael eu haddysgu mewn ysgolion a ddyluniwyd ac a adeiladwyd yn yr oes Fictoraidd ac Edwardaidd. Ar draws Cymru roedd adeilad ysgol hen a dadfeiliedig, yn aml heb y mynediad angenrheidiol ar gyfer plant ag anabledau, fwy neu lai yn nodweddiadol o'r dirwedd.

Datblygwyd Rhaglen Ysgolion y 21ain Ganrif felly i fynd i'r afael â'r anghysonderau hyn gyda'r nod o greu amgylcheddau dysgu a fyddai'n darparu gwell deilliannau ar gyfer ein plant a'n pobl ifanc a gwell addysgu a dysgu o fewn fframwaith partneriaeth a oedd yn economaidd ac amgylcheddol gynaliadwy.

Sefydlwyd y Rhaglen gychwynnol mewn cydweithrediad rhwng Llywodraeth Cymru, CLILC a'r Awdurdodau Lleol: roedd yn un o'r enghreifftiau cynharaf a, hyd yma, y mwyaf llwyddiannus o gyd-lunio diffuant a pherthnasau canolog-leol aeddfed. Mae'r bartneriaeth hon wedi ehangu i gynnwys Awdurdodau Addysg Esgobaethol a chynrychiolwyr y sector Addysg Bellach ond mae'r ymdriniaeth gydweithredol wedi parhau. Lle daethpwyd ar draws anawsterau, mae'r partneriaid bob amser wedi mabwysiadu ymagwedd datrys problemau a bu ffocws ar ddysgu gwersi yng nghyd-destun rhaglen o hunan welliant.

Rhaglen Ysgolion yr 21ain Ganrif

O ran trosolwg a chynllunio mae Llywodraeth Leol wedi cydnabod erioed rôl Llywodraeth Cymru mewn gosod strategaeth yn genedlaethol. Ond, mae Llywodraeth Leol hefyd yn credu y dylid gwneud penderfyniadau ynglŷn â sut y dylid trefnu a rheoli gwasanaethau mor agos at y pwynt darparu â phosibl, a hynny o fewn fframwaith democrataidd o atebolrwydd lleol.

Yn y cyd-destun hwn, yr hyn y mae'n ei olygu yw bod Llywodraeth Cymru yn gosod y strategaeth ar gyfer buddsoddiad cyfalaf mewn ysgolion yn genedlaethol ond bod awdurdodau lleol yn dehongli'r strategaeth honno ac yn cymryd cyfrifoldeb dros drefniant ysgolion yn lleol yn unol â'r amgylchiadau lleol. Datblygir cynlluniau ar gyfer ad-drefnu

ysgolion gan awdurdodau lleol ond rhaid eu cymeradwyo gan Lywodraeth Cymru o fewn cyd-destun strategol ehangach. Drwy'r Rhaglen Ysgolion yr 21ain Ganrif mae CLILC, llywodraeth leol a phartneriaid eraill yn gallu siapio a hysbysu polisi. Mae trefniadau llywodraethu Ysgolion yr 21ain Ganrif yn golygu fod yr holl bartneriaid yn cael mewnbwn sylweddol ac ystyrlon i'r rhaglen ond yn y pen-draw bod penderfyniadau ynglŷn â chymeradwyo a chyllido yn cael eu gwneud gan y Gweinidog perthnasol.

Band A

Lansiwyd y rhaglen yn ffurfiol ym Mawrth 2010 a chychwynnodd Band A yn 2014 a bydd yn rhedeg tan fis Mawrth 2019. Mae'r ffocws ar gyfer buddsoddiad Band A wedi bod ar wella cyflwr adeiladau ysgolion ar draws Cymru; lleihau llefydd dros ben ac aliniad rhwng galw lleol â darpariaeth; a defnydd mwy effeithiol ac effeithlon o adnoddau yn seiliedig ar ddeilliannau dysgwyr a darpariaeth gynaliadwy.

Drwy gydol y cyfnod hwn bu cryn gefnogaeth wleidyddol i'r rhaglen o fewn llywodraeth leol a Llywodraeth Cymru er gwaethaf yr amgylchiadau newidiol a'r cyd-destun economaidd cythryblus. Mae'r argyfyngau ariannol byd-eang a pholisi cynni cyllidol parhaus Llywodraeth y DU wedi cael effaith arwyddocaol ar y rhaglen. Ar y cychwyn rhagwelwyd y byddai Llywodraeth Cymru yn darparu 70% o'r cyllid gyda'r awdurdodau lleol yn darparu 30%, fodd bynnag arweiniodd y cyd-destun ariannol ehangach at oedi mewn rhoi'r rhaglen ar waith a gostyngiad yn y gyfradd ymyrraeth, i lawr i 50%. Roedd hyn yn golygu fod yn rhaid i awdurdodau lleol ddarparu 50% o'r costau buddsoddi ar adeg pan fo'u cyllidebau yn heriol ac yn gostwng o ganlyniad i gynni cyllidol. Mae CLILC yn credu y bydd yn rhaid ailedrych ar y gymhareb hon os bydd rhagor o doriadau llym yn angenrheidiol dros y cyfnod adolygu gwariant nesaf.

Band B

Bydd Band B yn cychwyn yn 2019-20 gyda'r pwyslais yn symud oddi ar lefydd dros ben i wella cyflwr yr ystâd addysg.

Mae CLILC yn dal i ddadlau dros gyfradd ymyrraeth uwch, a byddai'n well ganddo weld Band B yn cael ei ariannu'n seiliedig ar y rhaniad 70-30 gwreiddiol. Mae yna hefyd bryderon o fewn llywodraeth leol ynghylch elfen cyllid refeniw Band B - y Model Buddsoddi Cydfuddiannol (MBC). Mae CLILC yn cydnabod y datblygwyd y MBC gan Lywodraeth Cymru i ariannu prosiectau cyfalaf mawr o ganlyniad i brinder nawdd cyfalaf ond mae pryderon ynglŷn â hyn o fewn llywodraeth leol o ganlyniad i brofiadau blaenorol gyda chynlluniau PFI (Mentrau Ariannu Preifat). Yn fwy cyffredinol mae cynghorau'n bryderus ynglŷn â fforddiadwyedd modelau a ariennir drwy refeniw a chyfalaf yng nghyd-destun cyllidebau sy'n lleihau, cynni cyllidol a chronfeydd wrth gefn sy'n gwacáu. Mae trafodaethau ynglŷn â'r MBC ac agweddau eraill ar Band B yn parhau ac un o gryfderau'r rhaglen hyd yma fu'r gallu i ddatrys problemau a dysgu o brofiad. Nodwyd y pryderon hyn gan Archwilydd Cyffredinol Cymru.

Rhaglen Addysg ac Ysgolion ar gyfer yr 21ain Ganrif

Mae Archwilydd Cyffredinol Cymru, yn ei adroddiad, Rhaglen Addysg ac Ysgolion ar gyfer yr 21ain Ganrif yn rhoi asesiad teg a chywir o'r Rhaglen Ysgolion yr 21ain Ganrif. Mae'r ymchwil y tu ôl i'r adroddiad i'w weld yn dda ac mae'n rhoi cyfrif clir a dealladwy o ddatblygiad a gweithrediad y rhaglen. Mae'r adroddiad yn talu sylw penodol a phriodol i'r cyd-destun y datblygwyd y Rhaglen ynddo ac mae'n rhoi cryn sylw i safbwyntiau a phrofiadau rhanddeiliaid y Rhaglen. Mae'r adroddiad yn cydnabod cryfderau a llwyddiannau Rhaglen Ysgolion yr 21ain Ganrif hyd yma ond hefyd yn adnabod ychydig o feysydd gwan neu fannau lle gellid gwneud rhagor o welliannau.

At ei gilydd mae'r sylwadau hyn i'w gweld yn rhai teg ac yn y rhan fwyaf o achosion trafodwyd y materion y tynnwyd sylw atynt gyda Bwrdd Rhaglen Ysgolion yr 21ain Ganrif ac maent yn cael sylw. Mae trefniadau llywodraethu'n cael eu hadolygu; mae trafodaethau ar y gweill ynglŷn â Band B gan gynnwys sut yr ariennir ac y rheolir y rhaglen, felly hefyd drafodaethau ynghylch cydbwysedd rhwng canolbwyntio ar gyflwr yn hytrach na llefydd dros ben. Mae Awdurdodau Lleol hefyd yn alinio eu Rhaglenni Ysgolion yr 21ain Ganrif â'u Cynlluniau Strategol y Gymraeg Mewn Addysg (CSGMA). Maen nhw'n gweithio'n agos â Llywodraeth Cymru er mwyn sicrhau eu bod yn ymateb i'r galw am addysg Gymraeg yn eu hardaloedd.

Mae'r Rhaglen o'r cychwyn cyntaf wedi gosod targedau effeithlonrwydd ynni a chynladwyedd uchelgeisiol ar gyfer awdurdodau, ac mae llywodraeth leol wedi derbyn yr ymagwedd hon yn llwyr, ond un o'r problemau gyda thechnoleg arloesol yw nad yw bob amser yn darparu'r manteision a ragwelwyd.

O ran argymhellion eraill yr Archwilydd Cyffredinol, mae ymwybyddiaeth gynyddol o fanteision y Model Adeiladu Gwybodaeth ymysg yr holl bartneriaid, ac mae manteision trefniadau caffael gwell, rhannu arfer da a chynyddu gallu technegol wedi'u derbyn yn gyffredinol.

Mae ffocws wedi bod erioed ar uchafu manteision cymunedol ehangach y rhaglen a gwasgu cymaint o werth â phosibl allan o bob buddsoddiad. Mae rhwystredigaeth gyffredinol nad yw hyn bob amser yn cael ei wireddu. Mae grŵp wedi'i sefydlu i ystyried sut y gellir goresgyn unrhyw rwystrau a gallai hyn fod yn rhywbeth sydd a wnelo â llywodraethiad ysgolion yn hytrach na'r Rhaglen Ysgolion yr 21ain Ganrif ei hun. Mae CLILC mewn trafodaethau gyda Chwaraeon Cymru gyda'r nod o ddatblygu ymdriniaeth fwy strategol tuag at rai agweddau ar ddarpariaeth.

Casgliad

Mae CLILC yn cefnogi ac yn croesawu barn Archwilydd Cyffredinol Cymru fod Rhaglen Ysgolion yr 21ain Ganrif yn cael ei rheoli'n dda ac yn welliant sylweddol ar yr hyn a fu'n flaenorol. Mae i'r rhaglen ei heriau a'i beiau ond mae'n lleihau llefydd dros ben ar yr un pryd â chreu ystâd addysg llawer gwell a mwy cynaliadwy.

Mae'r amgylchedd ariannol presennol yn heriol dros ben i lywodraeth leol a does fawr ddim arwydd fod pethau'n debygol o wella. Ar y cychwyn y disgwyliad oedd y byddai Llywodraeth Cymru yn darparu 70% o'r cyllid cyfalaf ac y byddai'r awdurdodau yn darparu 30% ond

newidiodd y sefyllfa a thorrwyd cyfraniad Llywodraeth Cymru i 50%. Mae hyn wedi bod yn gryn her i'r cynghorau a bydd yn parhau i fod yn her.

Am ragor o wybodaeth cysylltwch â:

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Eitem 6

Yn rhinwedd paragraff(au) vi o Reol Sefydlog 17.42

Mae cyfyngiadau ar y ddogfen hon