

# Agenda – Y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau

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Lleoliad:	I gael rhagor o wybodaeth cysylltwch a:
Committee Room 5 – Tŷ Hywel	Naomi Stocks
Dyddiad: Dydd Llun, 2 Tachwedd 2020	Clerc y Pwyllgor
Amser: 13.15	0300 200 6565
	<a href="mailto:SeneddCymunedau@senedd.cymru">SeneddCymunedau@senedd.cymru</a>

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## Rhag-gyfarfod (13.15 – 13.45)

Yn unol â Rheol Sefydlog 34.19, mae'r Cadeirydd wedi penderfynu gwahardd y cyhoedd o gyfarfod y Pwyllgor er mwyn diogelu iechyd y cyhoedd. Bydd y cyfarfod hwn yn cael ei ddarlledu'n fyw ar [www.senedd.tv](http://www.senedd.tv)

### 1 Cyflwyniad, ymddiheuriadau, dirprwyon a datgan buddiannau

### 2 Ymchwiliad i COVID-19 a'i effaith ar y sector gwirfoddol – sesiwn dystiolaeth 1

(13.45 – 14.30)

(Tudalennau 1 – 54)

Ruth Marks, Prif Weithredwr, Cyngor Gweithredu Gwirfoddol Cymru

Fiona Liddell, Rheolwr, Helpforce Cymru

Noreen Blanluet, Prif ymgynghorydd, Rhwydwaith Cydgynhyrchu Cymru

### Egwyl (14.30 – 14.45)

### 3 Ymchwiliad i COVID-19 a'i effaith ar y sector gwirfoddol – sesiwn dystiolaeth 2

(14.45 – 15.30)

(Tudalennau 55 – 70)



Kate Griffiths, Cyfarwyddwr Cymru, y Groes Goch Brydeinig  
Jas Bains, Prif Weithredwr, Hafod

**Egwyl (15.30 – 15.45)**

#### **4 Ymchwiliad i COVID-19 a'i effaith ar y sector gwirfoddol – sesiwn dystiolaeth 3**

(15.45 – 16.45)

(Tudalennau 71 – 91)

Carol Mack, Cadeirydd, Fforwm Cyllidwyr Cymru

Rebecca Watkins, Cyfarwyddwr y Sefydliad, Moondance Foundation

Richard Williams, Prif Weithredwr, y Sefydliad Cymunedol yng Nghymru

John Rose, Cyfarwyddwr Cymru, Cronfa Gymunedol y Loteri Genedlaethol

#### **5 Papur(au) i'w nodi**

(Tudalennau 92 – 93)

##### **5.1 Tystiolaeth ychwanegol gan Gymorth i Ferched Cymru ynghylch yr ymchwiliad i COVID-19**

(Tudalennau 94 – 100)

##### **5.2 Llythyr oddi wrth Gadeirydd y Pwyllgor Economi, Seilwaith a Sgiliau at Weinidog yr Economi, Trafnidiaeth a Gogledd Cymru ynghylch effaith COVID-19**

(Tudalennau 101 – 103)

##### **5.3 Gohebiaeth oddi wrth Gomisiynydd Pobl Hŷn Cymru ynghylch effaith COVID-19**

(Tudalennau 104 – 105)

##### **5.4 Papur briffio gan y Comisiwn Cydraddoldeb a Hawliau Dynol ar ofal preswyl yng Nghymru a'r pandemig COVID-19**

(Tudalennau 106 – 136)

##### **5.5 Llythyr oddi wrth Gadeirydd y Pwyllgor Deddfwriaeth, Cyfiawnder a'r Cyfansoddiad at y Llywydd ynghylch rheoliadau COVID-19**

(Tudalennau 137 – 139)

- 5.6 Gohebiaeth oddi wrth Gymorth i Ferched Cymru ynghylch y Bil Cam–drin Domestig**  
(Tudalennau 140 – 142)
- 5.7 Llythyr gan y Dirprwy Weinidog a'r Prif Chwip at y Cadeirydd a Chadeirydd y Pwyllgor Deddfwriaeth, Cyfiawnder a'r Cyfansoddiad ynghylch y Bil Cam–drin Domestig**  
(Tudalennau 143 – 144)
- 5.8 Llythyr oddi wrth Gadeirydd y Pwyllgor Cyfrifon Cyhoeddus ynghych cysgu allan**  
(Tudalen 145)
- 5.9 Llythyr gan Ganolfan Llywodraethiant Cymru ynghylch anghydraddoldeb yn y system cyfiawnder troseddol yng Nghymru**  
(Tudalennau 146 – 150)
- 6 Cynnig o dan Reol Sefydlog 17.42(ix) i benderfynu gwahardd y cyhoedd o weddill y cyfarfod**
- 7 Ymchwiliad i COVID–19 a'i effaith ar y sector gwirfoddol – trafod y dystiolaeth a ddaeth i law**  
(16.45 – 17.00)

Mae cyfyngiadau ar y ddogfen hon

## **Equalities, Local Government and Communities committee inquiry:**

### **The impact of COVID-19 on the voluntary sector**

#### Contents:

1. [The voluntary sector in Wales](#)
2. [the impact of the pandemic on the sector, in terms of funding and service delivery](#)
3. [the effectiveness of support from the UK and Welsh government and local authorities](#)
4. [volunteering and community resilience](#)
5. [good practice, future opportunities and challenges](#)

## 1. The voluntary sector in Wales

The coronavirus pandemic has shown that the voluntary sector has never been more needed. Wales has a long-standing history of volunteering, mutual aid and voluntary action, especially at a community level. This has been reinforced throughout the last six months during the coronavirus pandemic (and the flooding as a consequence of Storm Dennis in February).

The voluntary sector has responded incredibly. It has been swift, agile and made a huge difference to individuals and communities across Wales.

This is an incredibly challenging time for many voluntary organisations – we will see deep and permanent change to sector landscape in Wales. Future is hugely uncertain. There are opportunities to create better future in the longer term in the way we respond now. We need a strong and resilient sector if we are to do this.

### *Background*

The voluntary sector in Wales is a vibrant and diverse sector, which can be hard to categorise:

- The voluntary sector includes registered charities, but also social enterprises, community groups, unincorporated voluntary organisations, and, recently, mutual aid groups.
- Education/training, health, and sport are the largest areas of work for voluntary organisations. However, the sector covers a wide range of areas and activities.

Charities based in Wales are smaller than their counterparts in England and Scotland:

- There are 32,000 voluntary organisations, of which 7300 are charities.
- Wales has the highest percentage of micro charities in the UK (53%). A further 32% are small charities.<sup>1</sup>
- Charitable income per head is half what it is for charities based in England and Scotland. (approx. £400 per head in Wales and £800 in England and Scotland.) However, this is partly due to the location of registered offices of major charities who operate UK-wide, and are registered outside of Wales.<sup>2</sup>

Volunteers contribute to the economic, social and cultural fabric of Wales:

- Prior to COVID-19, it was estimated that approximately 938,000 volunteers contribute 145 million hours, each year, which is worth £1.7 billion. This is equivalent to around 3.1% of the Wales GDP<sup>3</sup>.
- Volunteering also has significant value, which is less easily defined in monetary terms, in terms of individual wellbeing, social cohesion, inclusion, economic regeneration, and the development of social capital.

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<sup>1</sup> Micro: less than £10,000, Small: less than £100,000

<sup>2</sup> DataHub, WCVA website

<sup>3</sup> Welsh Government Third Sector Scheme Report 2017 -18)

## 2. The impact of the pandemic on the sector, in terms of funding and service delivery

WCVA wishes to see a resilient voluntary sector. We define this as a sector which can continue to deliver benefits despite a significant shock, such as the COVID-19 pandemic. This includes being agile in its provision of services, being able to meet increased need, and being financially secure.

### *Increased hardship*

The Coronavirus pandemic has increased hardship in Wales, and this has led to an increased demand on the voluntary sector. Some areas where the sector has seen increased demand include:

- Support for those in self-isolation or shielding due to the pandemic (including people no longer required to adhere to specific regulations but who lack the confidence to routinely leave their house).
- Support for people with medical conditions.
- Support for people who have experienced challenges due to the lockdown, such as those suffering from abuse or family estrangement.
- Mental health support and befriending services.
- Support for people who have lost income due to the lockdown or the resulting pandemic, especially those who are now destitute.
- Home-based cultural, arts and education provision during the lockdown.

For example, PAVO's Community Connectors scheme rose from having an average of 220 referrals a month to 1,632 at the height of the spring 2020 Covid-19 outbreak. This has resulted in redeployment of staff into the service and moving to a seven-day-a-week operation.

All of these services are vital to people with whom charities work. The lockdown created a surge in demand that would have been difficult for the sector to manage, especially given the need to develop newer digital ways of working, in normal times. The financial uncertainty being faced by many organisations at this time has made this need for new and adapted service delivery methods especially challenging.



## *Impact of COVID-19 on service delivery*

The pressures on individuals and communities relating to COVID-19 are seeing increasing demand on voluntary sector services.

These pressures disproportionately affect some groups. This includes the elderly, those with underlying health conditions, people with disabilities, many BAME communities, refugees and asylum seekers, people with mental health challenges and those vulnerable to domestic violence.

Initially, the physical lockdown restrictions made it harder to respond to these. Vital services that demand face-to-face contact have new concerns around safeguarding and huge pressures in accessing PPE.

Ongoing services have been reduced or stopped in the short term whilst resource is redirected towards COVID-19. Those services are a lifeline for some and will have an immediate impact (for example, for people with substance misuse issues). Re-engaging when services open will be hard.

Organisations are adapting to deliver activities digitally. However, not everybody has access to the technology needed or space at home to talk in private. This disproportionately affects some groups. One organisation told us about its concerns on the impact on young people in respect of mental health, isolation, loneliness, and education.

Despite these challenges, organisations are stepping up and adapting the way they work to deliver new and existing activities. Digital is helping people to reach out, engage, organise, deliver activities, and even fundraise. Overnight, people are discovering digital solutions that previously would have been seen as impossible. A whole range of services are going online creating possibilities for the longer term. We have seen collaboration across organisational and sectoral boundaries – people working together to focus on the immediate crisis, putting traditional barriers aside.

## *Impact of COVID-19 on finances*

The sector is experiencing significant financial losses. As a consequence, the sector is less able to help those people it works with at exactly the

time when the demand for the services and activities it provides is greatest.

UK-wide, charities are estimated to lose 24% of their total income for the year<sup>4</sup>. We estimate that this would be approx. £620m for charities with headquarters in Wales, and a further loss to UK-wide charities which operate in Wales.

Welsh charities are smaller than their counterparts in England and Scotland and Wales has the highest percentage of micro charities in the UK (53%). A further 32% are small charities. (Micro: less than 10k, Small: less than 100k). For smaller charities like those in Wales, significant changes in fundraising income can be particularly problematic. The Centre for Social Justice estimates that 24% of charities with an income of less than £1m have NO reserves, making their ability to survive and adapt during this time less likely.

It is not yet clear how many redundancies there will be – many are waiting to re-assess at the end of the Coronavirus Job Retention Scheme – but we know:

- 33% of charities said they expected to have to make job cuts in the next 12 months.
- A further 36% of charities said they were unsure if they would have to make redundancies.<sup>5</sup>

Opportunities for future income-generation are also reduced. For example, mass participation events, an important fundraising income stream, are likely to continue to face restrictions even as other restrictions are lifted. Many organisations also rely on hospitality, leisure or retail facilities which continue to face financial challenges (and may not be eligible for business support as total income may not be reduced significantly, but project-restricted funding cannot be used to make up the balance).

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<sup>4</sup> Research on a UK-wide basis by NCVO, Charity Finance Group, Institute of Fundraising and supported by PricewaterhouseCoopers.

<sup>5</sup> Research by Acevo and the Centre for Mental Health.

### 3. The effectiveness of support from the UK and Welsh government and local authorities

#### *Background*

The Welsh Government was quick off the mark in releasing funds for the voluntary sector, primarily though funds administered by the Wales Council for Voluntary Action. These consist of:

- Voluntary Sector Emergency Fund. This ran from April until August and supported enabled those providing vital support to groups such as: people in isolation, the elderly, carers, people struggling to access food etc so that they can be supported during this time. It distributed £7.5 million.
- Voluntary Sector Recovery Fund. This is the successor to the Voluntary Sector Emergency Fund, and focuses on reducing inequalities across society as a result of the Covid-19 pandemic and will provide the resources for the voluntary sector to embed safe practises to carry on delivering essential services across Wales.
- Third Sector Resilience Fund. This is a blended loan and grant scheme to support voluntary sector organisations' ongoing revenue costs and has provided over £4.7 million to voluntary organisations. It is now in phase 2, which includes three strands: survive, improve, and diversify.

In addition to this, we note Welsh Government has provided more targeted funding at specific sectors, including directly to hospices and for organisations tackling domestic violence, and through funds to support the cultural and sports sectors, for example, which can be accessed by voluntary sector organisations.

The total amount of funding available to the sector in Wales appears to be broadly comparable to the amounts delivered to the voluntary sector in England by the UK Government, although comparisons are difficult due to the way these grants were delivered in the two nations. Scotland provided higher levels of funding. The voluntary sector also made use of both Welsh Government-provided schemes (such as the business rates grant scheme) and UK Government-provided schemes (such as the

Coronavirus Job Retention Scheme) which were not specifically aimed at the voluntary sector.

However, there is still a significant gap between the total amount of funding provided by government and the substantial losses expected by the sector.

### *Effectiveness*

The sector has made good use of the funds provided by the Welsh Government<sup>6</sup>. We also appreciate that the Welsh Government has made additional funding available to enable the voluntary sector to support the wider recovery.

This funding has often been roughly equivalent to Westminster funding, although we note that there are gaps, for example in direct grants to frontline services. Equivalent grants would be

It is clear to us that the Welsh Government was quicker at releasing this funding to the sector than elsewhere in the UK and that this meant that organisations were quicker to respond to the crisis than would otherwise have been the case.

A combination of the funding available from various governments has meant that many voluntary sector organisations have been able to 'weather the storm' until now, especially in relation to staff losses.

This can be a mixed picture due to the diversity of the sector. Some organisations will have had significant income reduction, especially those who rely on their own income generating activity. Other micro organisations, and informal groups, have very little funding. Some will have accessed additional funding to support the emergency response. This can often be based on individual organisations' ways of working than on any particular sector.

However, in the medium-term, here is a significant likelihood of charity closures, or mergers. For larger organisations, reductions in funding may not mean closure, but will mean having to reduce their work with people.

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<sup>6</sup> A list of Voluntary Services Emergency Fund recipients is available here: <https://wcva.cymru/wp-content/uploads/2020/06/VSEF-recipients.pdf>

The Welsh Government has also recently released funds to support the recovery. Every area of the recovery can be supported by the voluntary sector. However, this will come at a time when the sector's resources are significantly strained.

**Recommendation:** Building on the Third Sector Resilience Fund, the Welsh Government should provide funding increase resilience of sector and its ability to play its part in immediate support for communities during the recovery. Given the length of the crisis, consideration should be given to extending this beyond the current financial year.

## 4. Volunteering and community resilience

The sense of community spirit is, a positive outcome from the crisis. Although many volunteers and communities have witnessed hardship in their communities, they have also come together to support each other. WCVA believes that this spirit will be important to support the recovery.

Notably, there has been a surge in volunteering since the start of the pandemic:

- Since the start of the coronavirus outbreak, 18,000 people have signed up on Volunteering-Wales.net – Wales’s website for volunteering.
- There is a more consistent volunteering infrastructure in Wales than elsewhere in the UK. Third Sector Support Wales (consisting of WCVA and local CVCs) has been ready to start supporting volunteers in their communities. This was supported by the all-Wales volunteering database volunteering-wales.net.
- Early analysis suggests 40% of new volunteers would like to continue to volunteer after coronavirus pandemic.
- Some volunteering opportunities pre-Covid-19 have ceased due to self-isolation and/or impact of requests from employers to do more (i.e. frontline staff). Consequently, vulnerable beneficiaries are no longer in receipt of volunteer support.
- All sectors recognise that volunteers will not all return immediately when restrictions are lifted and that there may be a shortfall. Organisations may need to recruit again after the outbreak and support with this may be required.
- There have also been a significant number of local community-based mutual aid groups, largely co-ordinated online. These are informal and unofficial so it can be hard to map their size and scale.

Likewise, we have seen the value of resilient communities throughout this pandemic. This includes existing community groups, many of whom were able to respond quickly and are working to continue to provide support to their community in this crisis. For example, MaesNi in Maesgeirchen, Bangor, provided food and emergency cash support to people during the first lockdown<sup>7</sup>.

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<sup>7</sup> See [further work](#) from the Bevan Foundation.

Likewise, may people also become more engaged with their community, and especially local nature spots, during the pandemic.

WCVA believes there is a real opportunity to sustain this volunteer and community response following the pandemic, both to support the recovery and to promote wellbeing in Wales more widely. With the recent interest in volunteering, we believe that there is scope to build on this response.

**Recommendation:** The Welsh Government should work with the voluntary sector to identify areas across its work where volunteering can support the recovery, public services, or well-being. This should include an active leadership role for the sector in working with the Welsh Government to identify new areas, beginning with key areas where investment can lead to volunteering opportunities which support wellbeing in the recovery. Specific proposals include upgrading volunteering-wales.net to address inequality of volunteering across different groups; and funding for programmes related to nature, young people, and moving people back to the labour market.

**Recommendation:** The Welsh Government should develop a programme of empowering communities across Wales, acting as an enabling state for community action. This should include a Community Wealth Fund and legislation to provide greater ability for communities to be involved in local action.

## 5. Good practice, future opportunities and challenges.

WCVA has been listening to the sector to gather insight into which practices have worked well, and which haven't. We have also looked worked with organisations to explore what this might mean for the future – both good and bad<sup>8</sup>. WCVA is supporting IWA's initiative to develop a Sensemaker tool to support voluntary organisations across Wales to continue to capture learning.

Looking at the future, Covid-19 should be seen in the context of wider events and change. This includes leaving the EU, responding to the nature and climate crisis, transforming service models including in health and social care and adapting to digitally driven change. As well as a specific health crisis, Covid-19 is driving other change which will be hugely challenging for health and wellbeing, the economy and employment, poverty and inequality.

Our diverse voluntary sector has an essential role to play in supporting people's current and future wellbeing during this time.

Despite these enormous challenges, there are positive lessons to learn. Across the sector, we have been forced to do things differently – often at a scale and speed thought impossible pre-pandemic. Whilst there are plenty of things that organisations would not want to maintain, we've also seen change that has worked well. The need to innovate has forced us to find new solutions. This includes new collaborations and more inclusive digital services. We saw more agile commissioning and data-sharing that allowed better joint responses.

Opportunities to create a better future in the long term have also been created. The enormous disruption created by Covid-19 has created opportunities to change established systems and behaviours that were driving inequality, environmental damage and disempowered communities. There is a strong ambition across our 'build back better'. Our value-driven sector has a vital role to play in shaping and delivering this. WCVA is working to support organisations to influence a positive future.

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<sup>8</sup> [How we can prepare for different futures](#), August 2020



If we are to achieve this collectively, Wales needs to maintain and resilient voluntary sector, able to adapt to the considerable challenges ahead.

### *Good practice*

The crisis has shown the difference that can be made by people coming together voluntarily. This was particularly in response to an emergency, something that was seen earlier in the year during the floods.

The community response has been essential to many people's wellbeing. New and informal groups sprung up across the country, including mutual aid groups. The local community action was able to work at speeds and in ways that other parts of society were not. They often led the way.

Certain things helped those groups to get going quickly and to make a bigger difference:

- It helped where community infrastructure was already in place – both in terms of relationships and physical infrastructure
- Good relationships with local business and public bodies
- The huge need and ability to respond quickly motivated thousands

We need to do more work to explore what worked and what didn't to inform future practice.

The swift informal response also gave rise to questions on how to sustain motivation, keep everyone safe and supported and encourage appropriate governance. These are issues infrastructure bodies are working on.

We saw a great deal of good practice within our sector, including rapid changes to service models and creative ways of maintaining vital support to people<sup>9</sup>. This includes new ways of delivering digitally. Many organisations reported how they were able to increase and diversify engagement through new digital approaches.

Throughout this crisis, voluntary and community organisations have been responding alongside public and private sector partners. Both the

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<sup>9</sup> See *Preparing for Different Futures – final report*

voluntary sector and its partners have benefited from this engagement. It has often led to the voluntary sector being able to reflect the views of its services users into pandemic planning, and to the public sector enabling the voluntary sector to deliver more effectively.

However, this collaboration has been variable across Wales. There are examples of excellent collaboration within and across sectors. There are also examples of poor practice, with top-down decision-making within public bodies excluding voluntary sector and citizen involvement. We must take this opportunity to learn and strengthen this collaboration and to make sure it is universal. Some of the examples of what worked well included more agile commissioning and data sharing.

There is a wide-range of areas where the voluntary sector can be involved in supporting the recovery. These include: support for health and mental health of people who have been adversely affected by the pandemic, helping children and young people who fell behind during the pandemic due to lost hours, addressing inequalities which were exacerbated by the crisis, supporting communities which have been adversely affected, relief of poverty following the recession, and providing support for people to return to the labour market.

In each of these cases, the voluntary sector can reach specific people who may not always benefit from other public services equally. They can also improve services by more effectively reflecting the views of the people and communities they work with into the policy-making process.

**Recommendation:** In future recovery work, the Welsh Government should ensure that all parts of the public sector engage with the voluntary sector in policy-making and service delivery. This should also lead to greater partnership beyond the recovery and include the voices of the voluntary sector as well as the people with whom they work.

### *Future opportunities and challenges*

While the sector faces a significant period of upheaval and challenge, there are some opportunities. As outlined in section four, this includes in the volunteering and community sectors. There is an opportunity for the sector to support the current and next Welsh Government's recovery plans. There is likely to be a significant investment from the Welsh

Government in the next few years in economic recovery. This provides an opportunity to develop policy and programmes in which the voluntary sector can add value to the Welsh Government's programme.

In particular, we would draw the committee's attention to the following areas in which the voluntary sector can play a role in supporting a green and just recovery:

- Preventative health care to reduce strain on the formal health service, such as through social prescribing.
- Investment in community nature and conservation projects.
- Supporting young people, either through the youth services, or through investing in youth volunteering.
- Community and voluntary sector-led employability programmes.

Many across the sector are clear that they see this as an opportunity to more fundamentally restructure systems and behaviours to create a more sustainable future. There are ideas and energy across different parts of the sector around this. This is reflected in national movements such as the emerging Wellbeing Economy Alliance in Wales. Voluntary and community groups also provide models that provide the seeds of how things could be done differently – and better -in the future. Examples include community energy and food initiatives, through to alternative ways of providing social care.

The huge uncertainty and speed of change that is taking place currently creates significant opportunities for change for the better, as well as threats. The voluntary sector, made up of value-drive organisations, has a critical role to play in shaping responses that lead to positive futures.

If we are to take opportunities to shape a positive future, Wales will need an active and resilient voluntary sector. This is not something we can take for granted. As well as the considerable financial challenges, our sector is facing challenges to adapt to different ways of leadership, governance and service delivery. Whilst many organisations have adapted swiftly to digital working, it is clear now that voluntary organisations will need support in building skills, capacity, culture and infrastructure to work digitally. Infrastructure bodies have a key role to play here, something which should be supported by government.

**Recommendation:** The Welsh Government should work with the voluntary sector to identify areas across its work where the sector can support the recovery, public services, or well-being. Some are highlighted above.

**Recommendation:** The Welsh Government should invest in voluntary sector programmes which support the recovery, in a similar manner to the Voluntary Services Recovery Fund. Given the length of the crisis, consideration should be given to extending this beyond the current financial year

## **Submission to the Equality, Local Government and Communities Committee inquiry into the impact of Covid-19 on the Voluntary sector.**

**Fiona Liddell. Helpforce Manager Wales**

### **Helpforce perspective**

[Helpforce](#) aims to develop the potential of volunteering in health and care services, working in England mainly with NHS organisations and across the UK through national partnerships.

In Wales, [Helpforce Cymru](#) is hosted by Wales Council for Voluntary Action, part funded by Welsh Government, informed by Wales own policy context and supported by a Wales steering group.

During Covid-19 the work broadened to engage with all aspects of the volunteering response to the pandemic.

### **Volunteering and community resilience - themes and issues**

Conversations and meetings during the first three months of Covid-19 have been analysed to distil key themes and issues. These are presented diagrammatically in Annexe 1, under the headings of a) volunteer response, b) volunteering through Covid-19 and c) Volunteering post Covid-19.

A presentation at a UK research conference of the Voluntary Sector Studies Network, delivered jointly with Wales Centre for Public Policy, explored the preconditions for effective volunteer response, based on analysis of over 50 collected case studies. These fell under four broad headings:

- Local knowledge
- Resourcefulness and flexibility
- Relationships
- Infrastructure and support in place

The presentation is included in Annexe 2 and a blog (not yet published) based on this work in Annexe 3.

## **Future opportunities and challenges**

The spectrum of volunteering includes a very wide range from informal, community action to more formally managed and focussed roles and tasks. (The presentation in Annexe 2 highlights examples which fall between these extremes).

In considering the strategic opportunities to be gained from volunteering, these need to be considered separately; a few comments therefore are offered on each below.

### **Informal community volunteer response**

This unprecedented response proved to be speedy, creative and effective, bringing existing resources and initiatives together locally and attracting new support.

There is a challenge to build on this by:

- Supporting the sustainability and the independence of local groups
- Connecting with other local provision by statutory and voluntary sector partners, to enable joined-up services
- Conversation and better mutual understanding about appropriate levels of risk associated with different activity and context

### **Formal volunteering eg to support the NHS**

It was notable that during Covid-19:

- a) no local CVC or Health Board experienced a lack of volunteers
- b) formal opportunities for volunteering were in short supply, largely because of the need to reassess and redefine or adapt existing roles and processes, or to develop new ones.
- c) health boards took very different approaches to volunteer involvement, including pausing all volunteering, focussing on patient welfare and developing frontline roles in field hospitals.

d) some effective working partnerships with local County Voluntary Councils and voluntary organisations were demonstrated.

There is a challenge to build on this by:

- Promoting cross sector working between statutory and voluntary organisations in order to enable more rapid and flexible involvement of volunteers
- Encouraging conversations at strategic levels about the role of volunteering, including risk and governance issues, the planning and investment required and benefits to be gained
- Building up a trained and flexible volunteer base in order to complement ongoing clinical care and to meet future unexpected demands.

# **Volunteering & Covid-19**

## **key themes**

**a digest from conversations with local authorities,  
Health Boards, CVCs and third sector  
March - June 2020**

**Fiona Liddell**

**Helpforce Cymru Manager, WCVA**



# volunteer response

*maintaining individuals interest*

30 - 40 % want to continue to volunteer

individuals experience difficulty in volunteering

*potential to develop ESV schemes / opps targeted at employers*

**new interest in volunteering**

*value to staff of grassroots engagement*

Tudalen y pecyn 37

*variable links with eg Town and CCs LAs, CVCs*

*need for guidance*

*management and safeguarding issues*

**spontaneous community response**

*service gap if groups disband?*

*'organic' engagement style*

*sustainability post Covid?*

*speedy, informal response to community need*

*local collaboration to help supply of and demand for volunteers*

*generic Covid 19 opportunity created in every county*

*improving infrastructure for future emergency response*

*website 'a godsend'*

*signposting to CVCs and to Volunteering Wales website*

**volunteering brokerage**

*many normal opportunities closed and insufficient new opps*

*Good Sam scheme confusion in Wales*

*increased profile of volunteering*

*Volunteers Week, #power of youth #nevermoreneeded*

**impact of campaigns**

*data reporting from Volunteering Wales*

*data collection and management systems*

*alternative recruitment platforms promoted in some areas*

*overall picture unknown*

# volunteering through Covid



# volunteering post Covid 19

## new patterns of volunteering

*training to support digital approaches*

*need to be based on good practice eg WCVA/Wales TUC Charter and IIV*

*minimise red tape*

*more online volunteering*

*micro volunteering*

*more Employer supported volunteering?*

*increased poverty and unemployment*

*changed community needs*

*changed volunteer demographic*

*new partnerships*

## new opportunities/needs

*clarity needed about who does what (eg CVC/Council)*

*co-production of volunteer solutions*

*embedding new relationships between third sector and statutory partners*

*strategic vision for volunteers in workforce and operational planning*

*kindness in public policy*

*capture learning to inform developments*

*more permissive; less bureaucracy*

*new narrative around risk - recognising 'ordinary vulnerability'*

## culture of public services

*need for guidance*

*confusion caused by UK differences on easing restrictions*

*improving infrastructure for future emergency response*

*access to PPE - who pays*

## emerging from lockdown

*transport issues*

*community transport volunteer shortage*

*less use of public transport*

Tudalen y pecyn 39

*mental health/confidence needs*





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# Pandemic recovery and volunteering in Wales

Challenges, opportunities,  
and a research agenda

Tudalen y pecyn 41

Emma Taylor-Collins, Wales Centre for Public Policy (presenting)  
Dr Fiona Liddell, Wales Council for Voluntary Action (presenting)  
Dr Hannah Durrant, Wales Centre for Public Policy  
*7 September 2020, Voluntary Sector & Volunteering Research e-Conference*

# Our approach and theme

Analysis of conversations, research, events, between March-July 2020 led us to the question:

Tudalen y pecyn 42

**What pre-conditions seem to have aided the volunteer response to the pandemic in Wales?**

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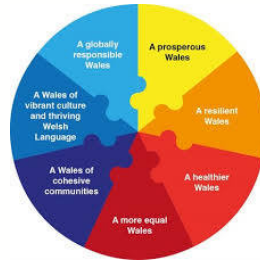


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# Policy and practice context

## Wales-wide

Well-being of  
Future Generations  
(Wales) Act 2015



Prosperity for All:  
the national  
strategy

Taking Wales Forward

Gwirfoddoli Cymru  
Volunteering Wales

WcVA  
CgGC

Cymru Iachach:  
ein Cynllun Iechyd a Gofal Cymdeithasol  
A Healthier Wales:  
our Plan for Health and Social Care

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## Local coordination

- Local authorities
- County Voluntary Councils (CVCs)
- Town and community councils

# Volunteering to support statutory services

Tudalen y pecyn 44



Denbighshire County Council



Blood Bikes Wales



NHS Health Boards

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# Community-based response



Tudalen y pecyn 45

Nanny Biscuit, Flintshire



Briton Ferry Covid-19  
volunteer response,  
Neath Port Talbot



Llandegla Community  
Shop, Wrexham

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# What pre-conditions seem to have aided this volunteer response?

- **Local knowledge** (see Taylor and Wilson, 2020; Alakeson and Brett, 2020).
- **Resourcefulness and flexibility of existing volunteers/volunteer services**
  - 'Resourcefulness' rather than 'resilience' (see McCabe et al, 2020)
- **Effective working relationships**
  - Mobilisation of existing networks (Macmillan, 2020a; Taylor and Wilson 2020)
  - Pooling of resources and signposting
  - Five Ways of Working (Well-being of Future Generations Act)
- **Infrastructure and support**
  - Digital tools (Volunteer Wales)
  - Volunteer support infrastructure

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# Thoughts on a research agenda

- What other factors might have facilitated the volunteer response to the pandemic? What might have hindered it? What about other kinds of volunteer response not covered here (e.g. Mutual Aid)?
- How have the preconditions for effective working between the voluntary sector and statutory public services enabled or undermined:
  - Effective and equal sharing of power, responsibility and roles
  - Service and user experience
  - Accountability and safeguarding
- How effective has the response been? What needs have gone unmet during the crisis, and what might we put in place now to address anticipated need during future lockdowns or pandemics?

Tudalen y pecyn 47

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# **Building on strong foundations: the volunteer response to the pandemic in Wales**

*Emma Taylor-Collins, Fiona Liddell, and Hannah Durrant*

Over the past few months we've heard a lot about the significant volunteer response to the pandemic. As in the rest of the UK, volunteers and the third sector in Wales have responded nimbly and innovatively. In May 2020, [over a third \(35%\) of people](#) in Wales looked after or gave help or support to family members, friends, neighbours or others – an increase from 29% in the previous year.

But it is unlikely that this response has sprung out of nowhere. Keen to understand what the pre-conditions might be that made this response possible in Wales, we examined a range of case studies on volunteering and Covid-19, collected by WCVA. We looked for the enabling factors which seem to lie behind them.

## **Support for statutory provision**

Several volunteering schemes were set up to provide intentional support to statutory services. The local County Voluntary Council (CVC) in many cases appeared to be a vital link between the local authority, community organisations, and volunteers.

For example, early in the pandemic Denbighshire County Council recognised its need for additional capacity to meet the needs of shielded and vulnerable people. From the outset it discussed with its local CVC how volunteers could help, with the CVC setting up and running a referral scheme for coordinating a community volunteer response.

Volunteers were recruited via the Volunteering Wales website, and either referred to other organisations or matched with requests for support, such as shopping, prescription collection, and dog walking.

In this way the community response was organised in line with safe practice for volunteers and those they supported, and linked in with local voluntary and statutory provision, aiming to ensure the most effective use of volunteer resources.

## **Bringing the community together**

In Briton Ferry several community organisations came together to form a coordinated network in response to the pandemic, drawing on their particular services and expertise.

Just before lockdown, the conductor of a local choir instigated a meeting with representatives of local community groups including elected members, businesses, social services and the local CVC. They put in place systems aiming to help the most vulnerable community members through the crisis and help to 'take the strain off the NHS' if the situation worsened.

Individual organisations offered their resources and engaged volunteers to provide services. For example, the community hub became the distribution point for essential supplies; the foodbank expanded its service to include weekly deliveries; another set up activities to support women's mental and emotional wellbeing; and the Boys and Girls Club developed and distributed activities for children.

## **Adapting to meet new needs**

**Llandegla Community Shop** and café has been run by volunteers and two part-time paid staff for several years. The café had to close during the pandemic, the shop operated reduced hours and there was risk of using up financial reserves just to keep running. Since the nearest shopping town is a round trip of 18 miles, the shop is vital to the local community and especially so during lockdown.

A small emergency grant from a local business, administered by the CVC, enabled them to continue and to develop their service, including providing home delivery to isolated individuals and a prescription collection service. The group is looking at how to sustain these newly developed services in the future.

### **What might have made this response possible?**

From these and other case studies collected we identified four factors which seem to have been especially important in enabling the volunteer response to the pandemic in Wales.

- **Local knowledge**

Place-based organising, with knowledge of the local area, was important for identifying local needs and for understanding how those needs changed in relation to the pandemic. [Recent literature](#) on community organising in the pandemic suggests local knowledge has enabled a speedy community response in other parts of the UK.

- **Resourcefulness and flexibility**

Having a strong volunteer base already in place – with the capacity to be flexible in terms of the services they provide – enabled a rapid pivot from existing to new activity in response to the pandemic. [Angus McCabe and others](#) refer to this as ‘resourcefulness’ rather than resilience to shift focus away from the idea that communities are responsible for ‘coping’ with a crisis and towards the idea that with limited but essential resources communities can respond effectively.

- **Relationships**

Most of our case studies showed that effective working relationships between bodies seemed to result in a joined up and speedy response. We saw these relationships manifest through, for example, joint calls for volunteer recruitment between councils and CVCs and joint or coordinated delivery of services. These demonstrated an ability to pool resources and signpost to redirect support where it was needed and could be accommodated.

- **Infrastructure and support in place**

Digital infrastructure was already in place to support voluntary activity through the all Wales website [www.volunteering-Wales.net](http://www.volunteering-Wales.net). Existing infrastructure in the form of local authorities, health boards, CVCs, town and community councils was also important in coordinating and facilitating the response.

### **What can this tell us?**

Our review of the case studies in Wales suggests that across different geographies, types of activity, and stakeholders, there are some similarities in the existing networks and practice which may have helped enable the volunteer response to the pandemic. We also saw some of this earlier in the year, before the pandemic. The community response to the floods in Wales at the start of 2020, though reacting to a different kind of crisis, also drew on the established local knowledge, relationships, and infrastructure, and demonstrated flexibility in responding to local need (see for example [stories](#) on the Storm Dennis response in Rhondda Cynon Taf). This suggests that maintaining these conditions will be important not just in responding to future lockdowns or pandemics, but also in responding to the increasingly common environmental crises we’re likely to experience in future.

What we don't yet know is what other factors might have facilitated the volunteer response to the pandemic or crises such as the floods, or what might have hindered it. We also don't know enough about how effective the response has been, and what needs might have gone unmet over the past seven months. Greater understanding of this might help to identify what we might put in place now to address anticipated need in the future.

[Emma Taylor-Collins](#) is Senior Research Officer at the [Wales Centre for Public Policy](#).

[Fiona Liddell](#) works for WCVA as [Helpforce Cymru](#) Manager.

[Hannah Durrant](#) is Senior Research Fellow at the [Wales Centre for Public Policy](#).





## **Impact of the pandemic on the voluntary sector**

### **The view from the Co-production Network for Wales**

Collated by: Noreen Blanluet, noreen@copronet.wales

#### **1. Shift in relationship between statutory sector and third sector**

- There has been increased recognition from public bodies (and local authorities especially) of the value and the role that the third sector plays.
- The third sector and community organisations are more flexible to respond to need; they apply no or low eligibility criteria based on trust and community relationships (“if you say you need help, we believe you”), and as a result provide often small scale, but creative and immediate support.
- Public bodies and local authorities have been recognising this strength, putting more trust in the third sector, and sharing information more readily.
- We need to be able to hold on to this ability to be more open with sharing information, and being able to ask and offer help (reciprocal relationship between third and statutory sector).
- Organisations must play an enabling role (and be supported to do so, it’s a new thing for many). They should play to their strengths, provide help and coaching to the third sector where useful, but also “get out of the way” and let the third sector and community groups do what they do best. Organisations must not take over or institutionalise (and crush) things that seem to work well in the community.

#### **2. Resourcing the third sector in the short and long term**

- The third sector was already stretched and dealing with increasing referrals from local authorities due to austerity (this was already a concern pre-lockdown).
- To maintain the shift in power and increased collaborative relationships between statutory and third sectors, funding and also reporting will need to be re-examined.
- To continue operating and doing what it does best, the third sector will need longer-term resourcing and support (as well as the immediate Covid relief funds that are currently being made available.)
- We hear a lot that people have little time to think, they’re having to react all the time (and this will not ease as we are going into the second wave and the pressures of winter).
- If we want to learn in real time, identify what works and keep it, change what’s not working, we need to be able to take stock and reflect. Our infrastructure needs to support time to think and consider long term improvements to our ways of working, as well as taking care of the immediate frontline delivery.

#### **3. Learning curve (and creative curve)**

- The third sector (as well as everyone else delivering services) has been learning very fast how to shift any normally face-to-face delivery, to working remotely: using a blend of online/digital interventions and other modalities (e.g. phone check-ins, doorstep activities, letters and activity packs).

- Digital inclusion and exclusion have offered opportunities as well as challenges. Organisations are rapidly learning and adapting, and trying to make sure people aren't forgotten, in the midst of the various forms of lockdown inequalities. (This is easier for hyperlocal organisations and groups to do.)
- There is no one size fits all and community groups and local third sector organisations are better placed to create local solutions to national challenges. Being able to share learning and examples of good practice would be of wide benefit. (As per previous comment - we need time to learn and reflect together, or we will be creating more narrow silos of operation.)

#### **4. Looking through a co-production and citizen involvement lens**

- Co-production happened during lockdown where it was already happening, with organisations (statutory and third sector both) listening to people, enabling everyone to build on their strengths, finding creative solutions, and collaborating effectively across silos.
- The third sector could co-produce better overall, just like the statutory sector could. There is a tendency to jump to providing solutions (especially if the organisation deliver a service), and not taking as much time to listen and build on people's strengths towards desired outcomes. It is a fine line to tread during an emergency crisis response and the understanding of co-production (when and when not to apply it) isn't fully embedded across organisations.
- During lockdown wasn't the time to learn the mindset and behaviours of co-production and citizen involvement (as organisations had enough on their plate to deal with) - but as this approach would enable them to make better use of resources and develop community (and organisational) resilience, it keeps becoming increasingly important.
- This also relates back to the comment above about bringing long term improvements to our ways of working, as well as taking care of the immediate emergency delivery.



# Leaving no one behind

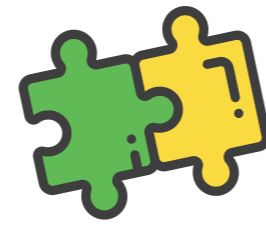
Hafod Covid-19 story board



Chronicling our Covid-19 journey serves a number of objectives consistent with our mission, values and strategic objectives:



Shared insight into key events and decision making for all colleagues



Widens appreciation and understanding of the operating environment



Demonstrates an ongoing commitment to openness and transparency



Improves internal communication flows



Invites opportunity for greater levels of engagement and scrutiny



Strengthens accountability e.g. executive to the frontline and vice a versa



Constitutes good governance

We have consistently demonstrated a strong desire for horizon scanning best practice, being prepared to challenge established orthodoxies in pursuit of securing better outcomes and an insatiable appetite for implementing learning into practice. As difficult and challenging the Covid-19 experience is let's try and embrace it in the hope that good things will also emerge.

## Step 1

In a crisis, you first need to meet people where they are. People's most basic needs must be met and they need to feel safe. Naturally, no one is interested in talking about the future when they are more concerned about hand sanitiser and toilet rolls.

In response, adopting a programme management approach a number of actions were taken to accommodate the rapidly changing circumstances while maintaining sufficient overview, strong accountability, financial control and risk management.

We ensure our colleagues are kept informed through regular updates, web pages with useful information and FAQs and notifications by text message. Our Board gave our leadership the freedom to make critical business decisions in an agile way. In turn, our leadership team empowers our front-line.

One of our top priorities is to ensure all essential PPE is readily available to colleagues in care and support services.

This is done in tandem with local authority partners and Welsh Government.

**No matter the cost, the safety and well-being of people was paramount**

Step 2

We realised there were a number of matters that required urgent attention which impacted our day-to-day work flow so we established nine key project themes:



PPE



Well-being



Service Delivery



Communications



Compliance



Customer



Deployment



Finance



New Ways of Working

Once the essential needs were being addressed, we began to gradually shift the focus towards adjustment, common purpose and opportunities for growth (although rapid innovation and learning was also taking place throughout this period).

At this stage our Chief Executive invited the Executive Board and managers across the organisation to undergo a process of pause and reflect. It was important that we took a step back and evaluated our actions and thoughts in the context of the external environment rather than continue to operate in emergency, crisis mode.



Colleagues are invited to share their fears, concerns, hopes and aspirations through a series of Facebook Live and video town hall conversations and other group formations.



Thus far our Chief Executive has engaged directly with over 500 colleagues and the following represents the unfolding story.

**Step 3**

There is an underlying anxiety expressed by some colleagues concerned about the uncertainty of the future which may have implications for their livelihoods and families.



**Risk**

Anxiety and uncertainty build and begin to affect colleagues' well-being, as well as the productivity and effectiveness of the business



Our response has been to consistently communicate messages that strike the right balance between cautiously optimistic and the reality of the situation, where many factors are outside our control. However, as a long-term social business we must see beyond the current political and economic climate to adapt and deliver our social mission.

Regularly communicating the availability of a wide range of counselling and support measures through Lifeworks. Allied with confidential one to one support offered through experienced and trained HR colleagues.

Pause and Reflect was in part initiated so that colleagues had the opportunity to think and contribute into a future that was not overly fixated with the crisis of the present.



**‘I am amazed at how quickly people adapted to working from home’**

The response to home-working has been positive. Colleagues commented on the positive benefits of not having to travel to our head office, St Hilary Court and the impact of this on carbon consumption.

People also commented on the flexible working arrangements which allowed them to better manage their work/life balance and accommodate caring and schooling commitments.

We undertook a step change in the adoption of new technology which has given greater confidence and willingness to embrace the digital world.

Conversely, a small, but not insignificant number expressed concerns about the loss of social relationships and enquired how this could be addressed.



Colleagues were overwhelmingly appreciative of the efforts of our IT team in helping to smooth the transition to remote working



**Risk 1** The transition to home working is not accompanied by changing work and management practices, to accommodate the complexity of colleagues' circumstances

**Risk 2** Frontline colleagues' well-being and mental health is affected in the longer-term, due to the stress and trauma of dealing with Covid-19 outbreaks and contending with excessive death and emotional situations



What additional measures should we be exploring to assist with the well-being of our colleagues, both immediately and in the longer-term?

We recognise some colleagues retain deep seated anxieties regarding their health and economic prospects which will require ongoing monitoring, support and actions

## Step 6

Concerns were expressed at the impact of the virus on our customer base, who disproportionately live in the most deprived areas, work in low-skilled occupations and are heavily state benefit dependant. Socio-economic consequences are likely to follow the pattern of previous downturns, and it could be argued many of our customers have not recovered from the 2009 downturn.



### Risk

If we do not put the right mitigations in place and re-think our role in supporting communities and economies, the impacts will be more harmful and long-lasting



What are the implications with regards to our current interventions and approaches? Do we need to modify or develop (perhaps radical) new ways of working to reduce the impact?

On the understanding that those who are vulnerable and marginalised will be further exposed, we will look to review how the work of our neighbourhood coaches can be better aligned to meet needs and aspirations.

With regards to care, how will we sustain good quality services and spaces in a damaged and fragile economy and market? How can we prevent people from falling into the cracks between siloed services?

**‘We used to find the door to be half ajar and now it’s fully open’**

Mostly colleagues thus far had found the experience liberating and empowering. Layers of bureaucracy had been removed, greater autonomy was exercised and decision-making short circuited to the perceived benefit of individuals, the organisation and customers. Colleagues commented that they were improving their resilience and resourcefulness and other new skill sets were emerging. Colleagues attributed progress to the extensive work being undertaken in recent years to improve organisation culture.



**Risk**

If this new-found autonomy and agency felt by colleagues does not continue beyond the crisis and the benefits we have seen do not continue to materialise



What can be done to hold on to the positive practices, behaviours and culture that has emerged through the crisis and make them part of the way we work?

Are we taking a structured approach to learning what works for us and what does not?

A heightened awareness among colleagues emerges in relation to driving better cost and value throughout the organisation. Colleagues took it upon themselves to identify small and large areas for cost reduction and improved productivity, but quite rightly pointed to limitations of the existing technical infrastructure as a barrier to progress.



**Risk**

Colleagues' readiness to work differently and more efficiently outpaces the development of our infrastructure and we miss opportunities to drive greater value throughout the business



How quickly can we tackle the short term IT development issues such as Office 365/One Drive, the telephone system, Wi-Fi, telecare, paperless office before embarking on an advanced digitisation programme?

Step 9

Covid-19 has prompted the short term shift and numerous innovations in how data is used for public good, with a possibility that some of the shifts may become permanent.

So far through the crisis our customers have really responded well to enquiries about their well-being, particularly those who are isolated, which suggests that the position of trust we occupy is quite unique.



**Risk**

Our protectiveness of data and reluctance to push for greater flexibility may stand in the way of working proactively and identifying customers' problems earlier



How can we be proactive with our customers around health protection?

How do we better connect with public health?

How do we instigate the discussions across the sector?

Being digitally excluded can severely limit people's ability to participate in everyday life (a staggering 80% of Hafod's residents elected to respond the Survey of Tenants and Residents (STAR) satisfaction survey via the post, in preference to an online questionnaire).

However, the ability to use digital technology to stay connected is only part of the picture. The ability to afford digital connectivity and equipment is also a barrier for many.



**Risk**

The negative effects of being lonely, isolated or lacking access to information and services online makes bad situations worse for many of our customers



How can we work with customers to address social isolation and loneliness?

How can we work with partners to pioneer low and high technology solutions, including the feasibility of mobile devices and internet being gifted as part of the tenancy start up?

Ostensibly our offer is significant, given the strength of community connections, endowments and skills we have at our disposal. These give us a major stake and anchoring role in local economies ( ‘Hafod Manifesto’).

We can, therefore leverage resources for the long term benefit of communities, continue to invest in pay conditions and career pathways and the branding of social care, develop our role in prevention and slowing down the escalation of major public health concerns and orientate supply chains to local suppliers.



**Risk 1** The regulatory system does not support and facilitate our ambitions to work in this way

**Risk 2** We lack the political support to move forward



How do we transition from an organisation still mainly procuring goods and services from larger to small suppliers linked to the locality model?

How do we influence policy and secure changes in the way we are regulated, to free us up to innovate and fulfil our potential as an anchor institution?

Step 11



We must ensure the risk to the new normal and economic revival does not come at the expense of climate change. It is estimated to make our current assets carbon neutral will cost an additional £60million.



How do we communicate to tenants that life-cycle timescales for kitchens and bathrooms will be much extended and that instead money will be spent on alternative components; electrical heating, PV, solar hot water, cladding and higher standards of windows and doors to reduce energy costs and to decrease carbon emissions?

Step 12

Step 13





## Information for the Equalities, Local Government and Communities Committee, 2 November 2020

### Re: Scrutiny of Covid-19 and its impact on the voluntary sector

#### 1. About the Wales Funders Forum and our submission

1.1 The Wales Funders Forum is an informal network of funders from the public, private and voluntary sector who are based in and/or fund work in Wales. Our mission is to strengthen and support funders, to promote effective funding practices and to learn about current and emerging issues to meet the needs of Wales. We bring funders together quarterly to:

- Promote and share good funding practice
- Share learning about ‘what works’, ‘what doesn’t work’ and why
- Share information and learning about evidence of need for funding
- Provide opportunities to discuss and debate developments in Wales that impact on funders and the causes and organisations they fund
- Provide opportunities for funders to collaborate and network with each other

1.2 In the immediate aftermath of the lockdown, many funders signed a [Covid-19 Funders Statement](#), pledging to be as flexible as possible during this period so that civil society groups could focus on the vital work of supporting some of the most vulnerable people in our communities. Funders stepped in to provide financial support for those facing lost income and acute financial difficulties. They reached out to existing grant holders to offer additional support to meet emergency needs. They made increased funding available and speeded up their processes to get money to where it is needed most.

1.3 To support funders to work more closely together, the Forum increased the frequency of its meetings from quarterly to weekly, facilitating data sharing on awards in order to understand the spread of funding, to respond accordingly, and to minimise the risk of duplication. We continue to meet monthly for this purpose in addition to maintaining the quarterly meetings.

1.4 This written evidence about the four topics under consideration by the committee have been sourced from responses from the membership, information shared by members and notes from the meetings of the forum in the period of the pandemic. The Wales Funders Forum is an informal network and it should be noted

that the views of individual members of the forum shared in this document, would not necessarily be the view of the collective membership. In addition some members of the forum will be submitting their own evidence to the committee.

1.5. The remainder of this paper looks at each of the four topics under consideration by the committee:-

## 2. Funding and service delivery

2.1. Members of the Wales Funders Forum include the main grant giving organisations in Wales and worked together more closely than ever to ensure that funding went to the Welsh charities, organisations and communities that need it most during lockdown. To date more than £32 million has been distributed by Forum members to communities across Wales during the pandemic.

2.2. Back in March as we found ourselves in unprecedented times, as communities, voluntary organisation and funders started to navigate themselves through the pandemic. As noted above, many funders, including members of the Wales Funders Forum, took the coordinated approach of adopting the [Covid-19 Funders Statement](#), developed by London Funders. The essential points are that signatories commit to supporting their grant recipients by being flexible with grants and reporting deadlines and listening to the needs of their recipients.

2.3 Through the Forum and with the support of the WCVA, funders from across Wales published statements about their intent and approach during the pandemic. This included detailing about the budgets for grants programmes, emergency funds and additional support to grant holders.

2.4 Flexibility and understanding characterised the response from the spectrum of funders who make up the Wales Funders Forum. Funders reacted swiftly with emergency funding to support the sector, and gave care and thought to support existing grant holders adapt to the crisis situation. To give some examples:-

2.5.1. The Steve Morgan Foundation suspended normal applications in order to focus on delivering an Emergency Fund, providing funding to charities delivering additional emergency services and those experiencing a loss in fundraised income to stay operational.

2.5.2. The Waterloo Foundation contributed £200,000 to the Wales Coronavirus Relief Fund set up by Community Foundation Wales to support Welsh community groups responding to the crisis. In addition, Waterloo encouraged its current grant holders to contact their fund manager about how the Foundation could help, and made it clear that they would continue to make grant payments and review applications in line with their funding criteria as usual.

2.5.3. Members of the forum such as Pen-y-Cymoedd Community Fund have been agile and changed how they work to meet the crisis, including reducing the turnaround time between organisations submitting applications and receiving a grant. The Co-op Foundation de-restricted project grants and gave flexibility on timings. A statement by BBC Children in Need simply read “If you have a grant from

us at the moment, we want you to know that we are going to do our very best to help you.”

2.6. The funding interests and priorities of Wales Funders Forum members varies considerably geographically, demographically, by themes and by mechanisms of funding.

2.7. Members shared intelligence on themes emerging from the pool of applications received and contact with existing grant-holders. It was clear that many voluntary organisations saw a significant and sudden drop in income when public fundraising and trading income dried up overnight as social distancing measures made these impossible.

2.8. Members saw an increase in applications for food poverty/distribution, for equipment and outreach to tackle digital exclusion, and from organisations that were re-designing services to respond rapidly to the new circumstances. Covid-19 had a disproportionate impact on Black, Asian and Minority Ethnic communities and funders took action to ensure that their funding was reaching these communities.

2.9. Throughout the pandemic Forum members have had clear insight into service delivery from the third sector. Many groups increased their services and/or adapted their delivery approach, with grant funding supporting these increases, as other income sources dipped, cash flow tightened, and the sector spent its reserves.

2.10. Digital delivery of services was a key theme. Anecdotally we have evidence that there were some groups that failed to make this work, with digital exclusion, and for staff access to devices, connectivity and training all proving to be issues. Some groups found that engagement wasn't as fruitful, but others, especially those working with children and young people on the autism spectrum or with emotional challenges, found digital sessions to be good.

2.11. BBC Children in Need attempted to address some of the issues around digital inclusion through its Covid-19 Funding Streams, specifically its Booster Grants programme. With the fund designed to be as flexible as possible, this provided opportunities to apply for technology, infrastructure, additional staffing, immediate core costs, training, activities and anything else which could directly support children and young people affected by the pandemic. Again, evidence of this flexible supportive approach that members of the forum took to support the voluntary sector.

2.12 Lloyds Bank Foundation support charities with an annual income of £25,000 to £1 million to deal with complex social issues. They identified clear patterns that could be recognised in service delivery in response to Covid-19:

- **focus on crisis management**, with food delivery and other essentials featuring prominently (and subsequently a shift away from more in-depth support in some services)
- **lots of activity shifting to online / remote support**
- **problems faced by those without online access**, with some referring to writing letters as a way to engage those without access to technology
- **former clients needing support**

- **lots of focus on mental health needs** and concerns about the impact of the crisis on mental health.

2.13 The National Lottery Community Fund in its [Voices From the Pandemic](#) series shared in depth interviews with organisations working on the frontline. The interviews explore in more detail what grantholders have done, what they've learned and how they'd advise others, based on their experiences. One such interview was with grant holder Action in Caerau and Ely (ACE). While ACE runs a wide range of projects, from children's play schemes to a community woodworking shed, most of the work is face to face. Lockdown meant choosing what to continue, and how. ACE focused on making best use of their resources, turning their building into a food distribution hub, supporting beneficiaries of a food pantry project with emergency food parcels.

2.14 Supporting food purchase and distribution, was the focus of many of the responses funded by members of the forum. This included supporting to put in the infrastructure needed for distribution. Food supplies also ran out much quicker than expected for many grant holders, with members of the forum having to top up support in some cases.

2.15 Members of the forum also reported that as those they supported were coping with the increased demand on their services, they were also dealing with a number of other issues such as: staff on furlough; taking critical governance decisions over service provision, operations and sustainability while meeting remotely; and in the case of local infrastructure charities, coordinating activity, providing essential services and mobilising others who wanted to help to ensure people got the help they need, while endeavouring to minimise gaps and duplication.

### 3.0 The effectiveness of support from the UK and Welsh government and local authorities

3.1 Membership of the forum includes foundations that fund throughout the UK, funders that operate throughout Wales, and grant-makers that fund only in a particular locality. This gives a variety of perspectives on this issue.

3.2. Charity Bank lends money to charities and social enterprises throughout the UK, and has supported 55 projects in Wales since 2002, with a value of over £10 million. Anecdotal feedback that they are receiving suggests that there are more generous support packages available to access in Wales.

3.3. UnLtd, a leading provider of support to social entrepreneurs, has found Welsh Government extremely supportive to the social enterprise sector as a whole through regular contact and via their Economic Resilience Fund funding programmes which have helped some of our more established social entrepreneurs. There have been challenges for more early stage entrepreneurs seeking financial aid as they start out. The UK Government has also supported UnLtd's Social Enterprise Support Fund.

3.4 One issue that has caused some confusion has been the ‘Barnett consequential’ For instance, in April, when the Chancellor of the Exchequer announced the extra £750 million coronavirus funding for frontline charities across the UK, it was unclear for several weeks how this funding was to be utilised and distributed in Wales, which made it more difficult for Forum members to make decisions on the distribution of their own funds.

3.5 Similarly, in May when UK Government announced £76 million to support safe spaces and hotlines during the 'lockdown', including £38 million to support vulnerable children and modern slavery victims (including those exploited by county lines gangs), it again took some time for it to become clear on what it meant for Wales in terms of extra money.

3.6 In April of this year the Education Minister, Kirsty Williams, announced up to £3 million to support ‘digitally excluded’ learners during the coronavirus pandemic. While this was welcome news as only government can act at this scale, members of the forum with an interest in education nevertheless reported frustration with seeing first hand children and young people spending lockdown without the required technology and connectivity in their homes, as the planned interventions and support did not reach them. The Waterloo Foundation supported with projects such as that by Ysgol Garth Olwg in Rhondda Cynon Taff, who received £10,000 towards an e-learning platform. Moondance Foundation also supported such projects, providing £3,000 to Cwmclydach Primary School also in Rhondda Cynon Taff with online learning activities and IT equipment for pupils.

3.7 Government initiatives such as food vouchers for pupils receiving free school meals were also welcomed. Forum members did see some examples, of how they often failed to work in practice. For example, Waterloo Foundation are aware from grant-holders of families who received vouchers for a specific supermarket located 10-20 miles away, which were very difficult to use without public transport or access to a vehicle.

3.8 In addition free school meal eligibility is potentially a crude measurement of poverty, particularly at a time when many families were probably “unofficially” falling into that category during the pandemic. Schools were fantastic in recognising this and ensuring support was given to vulnerable families, whatever their official status. A good example of this provided again by Waterloo Foundation is the Cadoxton Primary School in Barry and the associated charity, Cadog’s Corner, who served their communities so well, ensuring they have access to healthy, wholesome food through a “Pay as you feel” food shop.

#### 4. Volunteering and community resilience

4.1 During the pandemic Forum members have seen the emergence of both informal and formal volunteering on a scale that hasn’t been witnessed before, with a real diversity in the way in which people are engaging.

4.2. The Building Communities Trust (BCT) pointed to a perceived growth in young people volunteering, particularly informally. With a proportion of the older, more

traditional volunteer cohort finding themselves increasingly socially isolated and in need of support themselves, it seems as though the younger age group is stepping up to the plate in many cases.

4.3. BCT were able to give many examples where people, groups and organisations were helping one another and delivering practical interventions to help people and their communities. For example, benches made by one community so that people could sit and meet up yet remain socially distanced. New people and groups are emerging and taking action, with people making new connections, coming together and helping one another. Participants in BCT work felt that ‘some community members have really shone’ and ‘true community champions have come forward’ since the crisis started.

4.4 UnLtd reported noticing an increased interest in people wishing to start out as new social entrepreneurs, and has been receiving many more applications for support than usual, either through awards or via joint programmes e.g. the Welsh ICE virtual 5-9 Club for social entrepreneurs starting in the South Wales Valleys. Awards are now open to new applicants with a larger budget available in Wales until March 2021. UnLtd has moved to providing all support online, which has proved very effective especially links with peers with common interests across Wales and the UK.

4.5. More generally and anecdotally funders who support social business can see that new opportunities have undoubtedly come out of the pandemic. In many areas of Wales, the importance of community and local services has been brought into sharp focus and the importance of social enterprise in that mix has become apparent. The role and flexibility of new social businesses is also becoming apparent in this change.

4.6. The pandemic has highlighted the importance of community resilience - the sustained ability to use resources to respond, withstand and recover from adverse situations - and the importance of resilience within the voluntary sector. A number of members provide additional support to the organisations that they fund. For example:-

4.7.1. Lloyds Bank Foundation provides a range of developmental support, including training, consultancy and mentoring alongside their funding to help strengthen the charities they support. During the pandemic they increased and adapted this support to meet the priority needs as a result of the pandemic.

4.7.2. The National Lottery Community Fund in August 2019 commissioned a third sector directory of support services for voluntary organisations seeking assistance with organisational resilience. They also have an online strengths checker that allows potential applicants to address these needs in future funding applications to the fund or through variation to existing grants.



## 5. Good practice and future opportunities and challenges

5.1 Throughout the Pandemic, members of the forum have worked closely together to avoid duplication and share intelligence. For example, The National Lottery Community Fund, WCVA and Community Foundation Wales have collaborated in grant scheme design so that between the three funders, they had funding available that targeted the full cross-section of the sector.

5.2. Forum members are also considering how we can work together strategically in the future to support the post-pandemic recovery. The National Lottery Community Fund, who provide secretariat support for the Forum, has committed to fund some research work focused on making the Forum even more strategic and effective, thus better placed to deliver the collective future response that will be required to meet the continuing challenges faced by the voluntary sector.

5.3. WCVA estimates that the voluntary sector in Wales will have lost approximately £230m in income during the first three months of lockdown. The funding available from Wales Funders Forum members is nowhere near enough to cover the income deficit left by Covid19 and very sadly, but unavoidably, the voluntary sector will have a different shape on the other side of this pandemic. Whilst it is not possible for funders to fill the gap in income, members of the Wales Funders Forum will continue to work collaboratively to ensure that the funding that is available is spent well and reaches as many organisations as possible.

5.4. Forum members are reporting concerns from the sector about the availability of 'normal' funding during 2020 and 2021 as funders divert their budgets from 'business as usual' to address emergency needs. Funders understand that voluntary organisations in Wales are currently facing concern and uncertainty about both their immediate and longer-term future. We are encouraging Forum members to share plans for grant distribution once the emergency fund response has passed.

5.5 As noted above, the lockdown and pandemic have provided the impetus for funders to review and consider their processes and approach. A number of funders and members of the forum have recently dispensed with historical rules about what they can fund, and it seems likely that this may lead to more widespread adoption of more flexible funding, including for core costs.

5.6. For example, as a part of its Covid Recovery Fund the Lloyds Bank Foundation offered a two-year unrestricted grant of £50,000 with dedicated organisational development support. This was offered with the realisation that to survive the aftermath of the pandemic, the charities that they fund have needed to alter the way in which they operate, deliver services and source income. Given the funding challenges that the charities they support are facing, the Foundation is considering how it can share learning and success stories about funding core costs, as part of a strategy focused on reaching and influencing other funders, or those who don't already support such costs.

5.7. UnLtd has reviewed its application systems and launched a more user-friendly and inclusive application process. They have also committed to ensuring at least 50%

of awards go to social entrepreneurs who are BAME, disabled or over 50 years of age. They anticipate a greater demand for their services in the future as we recover from the pandemic and consider that the challenge will be ensuring that they provide the most relevant and best support to those social entrepreneurs with the potential to make the biggest difference, with limited resources. They plan to continue working closely with Welsh partners to ensure support goes where it is most needed.

5.8. The Forum also heard from the UK-wide Association of Charitable Foundations (ACF), which shared the findings from its [Stronger Foundations](#) initiative on how to apply a diversity, equity and inclusion lens to funding practice, as well as recommendations on excellent learning and impact practice. ACF has also been working with partners to develop the [Funders' Collaborative Hub](#) to enable increased understanding, closer alignment, and opportunities for funder collaboration in the post-emergency phase of Covid-19, and the Forum will look to link into this work as it develops. The web platform to support collaboration launches early in November.

5.9. Another initiative that has been given active consideration by the Forum is the Living Wage. Members of the forum who are Living Wage Funders are committed to tackling low pay by encouraging the organisations they support to pay the real Living Wage, as determined and promoted by the Living Wage Foundation, and have actively encouraged other funders to also provide this support to the voluntary sector.

5.10. In conclusion it is clear that as members of the Wales Funders' Forum look ahead to the next stage, they are considering how they can support organisations to recover and make plans for what their new futures look like. As they do this [statements about the ongoing plans will be available on the WCVA website.](#)

5.11 As the voluntary sector pivoted to deal with the pandemic, so did the membership of the Wales Funders Forum, providing support both financially and in kind to the voluntary sector in Wales at unprecedented levels. Forum members will pivot again to support the recovery and flourishing of the voluntary sector in Wales.



Moondance Foundation  
c/o Azets  
Ty Derw, Lime Tree Court  
Cardiff Gate Business Park  
Cardiff  
CF23 8AB

Email: [moondancefoundation@gmail.com](mailto:moondancefoundation@gmail.com)

26 October 2020

**Information for the Welsh Parliament Equality, Local Government and Communities Committee**

**Re: Scrutiny of COVID-19 and its impacts on the voluntary sector – Monday, 2 November**

**From: Rebecca Watkins, Director of The Moondance Foundation**

- Introduction

The Moondance Foundation is a family charitable foundation, set up by Diane and Henry Engelhardt to further their family's philanthropy and giving in 2010.

The Moondance Foundation is a registered charity (Registered Charity No: 1139224) and a registered company limited by guarantee (Company no: 07448773).

Moondance's Mission: To prevent or relieve poverty, support the welfare and wellbeing of women, children, the elderly and the vulnerable in our society, improve health outcomes, raise educational standards and preserve our environment for future generations.

On 25 March 2020 Moondance launched its Covid-19 Relief Fund to support charitable organisations and activities in Wales. To date, Moondance has awarded 764 grants totalling over £6.9 million.

These grants have supported grassroots organisations, community groups, national charities working in Wales, playgroups, primary and secondary schools, and organisation working in the areas of homelessness, domestic violence, sexual abuse, and mental health & wellbeing, plus many more. Items provided range from essential food parcels to help support vulnerable people suffering from food poverty, to computers and tablets to redress digital deprivation and isolation.

- Funding and Service delivery

Funders have come together in response to Covid-19. For example, the Wales Funders' Forum (members include: WCVA, National Lottery Community Fund, Community Foundation Wales, The Waterloo Foundation, Pen y Cymoedd Wind Farm Community Fund, Lloyds Bank Foundation, Coalfields Regeneration Trust, BBC Children in Need, Architectural Heritage Fund & others) who met four times a year, started weekly virtual meetings. These meetings have provided the opportunity to discuss what funds were available, explore the areas where the need was the greatest and to share details of funding awarded.

Funders responded immediately to the crisis and were able to make quick decisions. Moondance could process applications and have the money in the applicant's bank account within 48 hours.

Also, there has been increased discussion with the Welsh Government's Communities and Third Sector team.

With lockdown the third sector organisations saw demand increase immediately for their services and activities.

Community Groups responded and adapted quickly to the greater demand, despite an uncertain about where funds would come from and for how long they would have to deliver.

The lockdown severely impacted charities who had diversified their sources of income with other income generating activities, such as cafés or training, to reduce their overall reliance on statutory funding. They saw their income cease instantly, and their diversification, and in many cases innovation, was in this circumstance detrimental to their finances.

- Effectiveness of support from the UK and Welsh Government and local authorities:

Messaging from the UK and Welsh Government about what is available has often been confusing, and it then took time to implement and reach the people in need. At the onset of the lockdown, the focus was very much on businesses with the third sector naturally feeling abandoned. It took some time to realise the impact of the lockdown on the third sector, but when established the WCVA programmes to distribute Welsh Government money were effective.

Examples where messaging and delay have not been helpful:

1. Education announcement about funding to overcome digital deprivation, through our work, we have not heard of anyone who has benefitted or been able to access this funding.

2. Support for playgroups was slow coming from the Welsh Government and provide support for income lost early in lockdown not to help recovery going forward. I have been told that as a result uptake has been limited.

- Volunteering and community resilience

Communities and volunteers have risen to the challenges of Covid-19, reaching out to support the young, elderly, disabled, sick and isolated. However, it is not known how long support can continue at this level before sustained commitment will begin to wane and fall away.

New community groups and regional collaborations have been formed in the crisis to support their local areas effectively. The need for these groups in the future should be considered, and appropriate governance put in place to ensure their survival.

During this crisis, funders have overlooked some of the poor governance practices to respond to the need. This cannot continue as it would be to the detriment to the third sector in Wales. For example, the late filing of documentation with the Charity Commission was overlooked.

- Good practice and future opportunities and challenges

Greater collaboration and transparency between funders, including the Welsh Government, can only help support the third sector in the future. Funders continue to explore how we can work together to raise standards and ensure the future resilience of the third sector in Wales.

An acknowledgement that new community groups need support to put in place essential governance. Recognition that community groups must work with their communities, vulnerable people, to help them back on their feet and reduce their reliance on support and handouts.

Covid-19 and the national lockdown has highlighted throughout Wales the levels of deprivation including food poverty, lack of essential items and digital resources. We must continue to recognise this and take steps to ensure that vulnerable individuals and families receive the help they need to improve their lives.

This crisis has seen national charities working in Wales cut their workforce, and we need to ensure that the people of Wales do not suffer because of their withdrawal. For example, Breast Cancer Now, Prostate Cancer and Bowel Cancer UK have all made the position of the head for Wales redundant.

Finally, Covid-19 has had an immediate impact on the third sector in Wales, seeing increased demand for services and a loss of income. While the various Covid-19 emergency relief funds have mitigated some loss of income, the effect of Covid-19 will be felt for many months, possibly years, to come. As the furlough scheme ends, there is the risk greater unemployment leading to even greater deprivation which could be exacerbated by less funding being available.



## Summary notes – Evidence for Equalities, Local Government and Communities Committee, November 2, 2020

### 1. Funding

Important role of Community Foundation Wales' partnership with the National Emergencies Trust in attracting added £3.7m funding to support third sector in Wales. This meant that Wales benefitted from UK-level corporates who usually wouldn't engage at a local level in Wales (Google, Hewlett Packard, Marks and Spencer etc), and Trusts and Foundations who we'd like to invest more in Wales. We were able to work closely with NET, building their insight of needs in Wales.

At the outset, Community Foundation Wales moved quickly to establish the Wales Coronavirus Resilience Fund. This gave a focus to public generosity and philanthropy and was able to attract valuable funding support from Welsh businesses such as Admiral and Welsh Water. The set-up of the fund meant that we avoided the emergence of a myriad of locally-sourced funds across Wales (as we see when there is a local issue eg flooding) and issues/concerns around governance and fund management.

Funding has been released quickly and upfront, which has been great news for successful groups. Given the uncertain financial situation affecting foundation endowments, largely invested on financial markets to create charitable returns, we are likely to see a difficult year ahead.

Many funders have been asking for projects to fund at this time. At a time when many funding channels are drying up, this is storing up a problem for groups who will not be able to sustain the new work on a funded basis.

Trust and foundation funding is playing an important role in supporting the sector through this difficult time. But with the loss of trading income and event-based fundraising, it's not realistic for the sector to rely on sustainable funding from Trust and Foundations in the medium term. While organisations primarily funded through commissioning are less impacted by the pandemic currently, they too will face great uncertainty and concern about their future funding. The sector is facing colossal changes in how it is funded – and we are going to need strong leadership skills and high quality development support to survive and thrive. This is going to require strong infrastructure support and partnership work bringing together government, funders and other partners.

### Opportunity

- Continue to build and develop Community Foundation Wales and National Emergencies Trust relationship for future emergency responses
- Develop the Community Foundation Wales funding model for national and local emergency funds to ensure quality, public trust and corporate support
- Supporting the sector in Wales to quickly adapt to the new funding context
- Use the findings from Community Foundation Wales Loud and Clear [report](#) to encourage funders to support core rather than projects, meaning organisations have the freedom to adapt in ever-changing situations.

## 2. Research

At the outset Community Foundation Wales ran an open-ended consultation to help shape its funding plans. Many groups then felt comfortable in approaching us to explain their situations when they didn't fit our criteria. We were able to be flexible and reach out where we saw gaps. Groups who gave feedback through this helped shape our funding decisions through the first six months, particularly in enhancing some of our grant levels, helping to identify gaps and increased our ability to work strategically.

Most funders would have carried out some level of research/insight-building. Having a more open approach to this across the sector would have helped collaborative working and decision-making.

### Opportunity

- Wales Funders Forum is considering how funders can share information and work more collaboratively.

## 3. Supporting BAME communities

The funding sector generally has been criticised for not reaching the communities affected by the virus. In Wales, Community Foundation Wales has worked with partner organisations to invite applications from different communities. We do know that some groups struggled to find funding. Understanding that BAME communities were disproportionately affected, this was a factor in our grant decision-making and over-rode some of our usual criteria and quality markers. In the longer term, the pandemic experience has highlighted a need to improve the ability of BAME groups to secure funding.

### Opportunity

- Funders have undoubtedly stepped up their engagement with different communities affected by the pandemic. We will continue to do this and to work on ensuring equitable support
- Improving the ability of BAME groups to secure funding in the longer term.

## 4. Giving voice

We felt that an important role alongside our grant-making was in telling the story of what groups were achieving. At a time when communities were feeling the full pain of the pandemic, we sought to balance this by supporting groups to tell their story. It also improved their skills sets for promoting their work and increased their confidence as we featured the videos that were shared to a wider audience. This was important, we feel, in building community resilience and morale and highlighting the community sector in Wales at its strongest.

### Opportunity

- Recognising the importance of sharing stories of resilience at times of crisis. The important role of this in strengthening communities and encouraging others to take positive action.

## 5. Fraud

The first six months of the pandemic saw a significant increase in fraudulent applications. CFW policy is to report fraudulent applications to the police. Funders worked collaboratively, sharing information to stop these applications. We have reviewed and stepped up our security checks as a result – whilst seeking not to slow down applications times.

## 6. Partnership-working

In Wales we are fortunate to have strong relationships across partners, but Covid-19 pushed us to be more active partners, first of all in sharing information, then in joint planning so that we worked together to ensure our funding was most effective. Regular meetings with key partners and other funders kept everyone connected and informed, and were helpful.

We had strong relationships with Welsh Government and other funders throughout, with regular meetings to keep open communication channels. Despite attempts we were not able to engage or work alongside the Welsh Resilience Forum or the local partnerships. In a different emergency scenario, particularly with decision-making at a more local/regional level, this could be critically important so that funding strategies are aligned.

#### Opportunity

- We are building further on this through Wales Funders Forum and looking at how we can scale up our collaboration work
- We are very interested in the funding application model which has been developed by London Funders - an integrated process for its funders, cutting out lots of duplication for grant applicants. There are other technology solutions to this too which we are looking at
- Developing stronger links between funders and the Welsh Resilience community that can kick-in quickly in the case of local and national emergencies.

### 7. Volunteering

We have seen an increase in volunteering activity amongst younger people. This is a significant change at a time when we can see that volunteer activity for older people has been restricted. We saw a strong focus on public sector-based volunteering – it's important the community groups and charities and their volunteering needs are not overlooked at the time when they need that support the most.

#### Opportunity

- While sections of the population have had to stop their volunteering, other sections were motivated to start volunteering. More active targeting of this audience could bring positive results for the voluntary sector
- Can we maintain focus on third sector volunteering alongside public-service support?

### 8. Ad hoc voluntary work – Mutual Aid groups

We have seen a significant increase in these type of Facebook/Whatsapp-based groups of local people who are helping others. Much of it is unseen and happening on a very informal level, but with significant local impact. The groups, in the main, have not needed funding, or certainly only small amounts to buy food etc. This community-based support is tremendously valuable – it does however pose some important questions for the sector and society around our expectations on good governance and safeguarding.

#### Opportunity

- At a time of crisis, is society prepared to take more risks to ensure people have the local support they need?
- Can we develop a proportionate governance checklist for quick set-up groups like this, which encourages them to do things safely without adding too much red tape?

#### Contact details:

For more information or to discuss further:

Richard Williams, Chief Executive, Community Foundation Wales – [richard@communityfoundationwales.org.uk](mailto:richard@communityfoundationwales.org.uk)



## Evidence to the Welsh Parliament Equality, Local Government and Communities Committee on behalf of The National Lottery Community Fund regarding the impact of the Covid 19 Pandemic on the Voluntary Sector in Wales

### **1. About the National Lottery Community Fund and our submission**

- 1.1 The National Lottery Community Fund is one of the 12 UK distributors of money raised through the National Lottery for good causes. We support people and communities to thrive and believe that people understand what's needed in their communities better than anyone else. Every time someone purchases a National Lottery ticket, they are helping people to take a lead to improve their lives and communities.
- 1.2 Our work is divided into five portfolios, covering funding across England, Northern Ireland, Wales and Scotland, as well as the UK as a whole. In Wales we have three regional teams covering South Wales & Central, North Wales, and Mid & West Wales. These teams allow us to be flexible and responsive in our support to customers. We have embedded our presence in communities and used our deeper understanding of local context to inform and improve decision making. We distribute approximately £35-£40m million annually to good causes in Wales, of which over 95% goes to the voluntary sector.
- 1.3 Whilst we are governed by a UK Board, which is responsible for setting our long-term strategy and key policies, in each of the devolved nations, strategy relating to funding themes and priorities is delegated to country committees, like our own [Wales Committee](#). This ensures that decisions about our funding in Wales are made in Wales.
- 1.4 As a funder of community-led activity across the UK, we have been at the forefront of supporting communities in Wales to respond to the challenges of the COVID-19 Pandemic. We feel that it is important for us to respond to the Equality, Local Government and Communities Committee's Scrutiny of COVID-19 and its impact on the voluntary sector to highlight the learning that we have gathered and to highlight our ongoing support for the voluntary sector.
- 1.5 We would welcome the opportunity to expand on our submission further at a future meeting of the Committee. If you wish to discuss its contents, or would like further information, please contact our Director, John Rose at [john.rose@tnlcommunityfund.org.uk](mailto:john.rose@tnlcommunityfund.org.uk).

## 2. The National Lottery Community Fund's response to the COVID-19 Pandemic

### 2.1 Our response to date

As one of the largest funders in the UK, and in Wales, we have moved quickly to support organisations and the communities that they serve.

2.2 Within the first three weeks of lockdown, we mobilised our funding to support the COVID-19 response. Our flagship funding programmes in Wales, [National Lottery Awards for All](#) & [People & Places](#), prioritised applications from organisations:

- supporting people who were at high risk from COVID-19
- supporting communities most likely to face increased demand and challenges as a direct result of measures to prevent the result of COVID-19
- connecting communities and supporting communities to work together to respond to COVID-19.

2.3 We also offered considerable support to our existing grant holders by allowing them to use their grants flexibly to address immediate needs resulting from the COVID-19 crisis. We proactively approached them to establish how they had been affected and to offer upward grant variations to meet costs associated with their emergency response, or financial support for those facing lost income or acute financial difficulties.

2.4 Our contribution to helping communities in Wales meet the challenges of COVID-19 has been significant, with over **660 awards** being made through either grant variations or new applications, amounting to nearly **£19 million** since April 2020. These awards have helped to tackle both the emergency and give provide a longer term funding beyond the immediate crisis.

2.5 Through our UK Funding Portfolio, we have also funded organisations to work with communities to consider how things are changing as a result of COVID-19 and to help them move towards recovery and renewal by planning for a better future. Our **Emerging Futures Fund** made 51 awards totalling **£2 million**, five of which were awarded in Wales:

- Disability Wales, *#UnlockedLives*, £23,500
- Ethnic Youth Support Team in partnership with ProMo Cymru & Race Alliance Wales, *We are Wales, stepping up during COVID-19*, £49,500
- Gentle Radical Ltd, *Doorstep Revolution*, £39,852
- Sub-Saharan Africa Panel, *Siku Za Mbele/Days Ahead*, £47,000
- WCVA, Better Future Wales, £45,791

2.6 To help us build our own comprehensive picture of the impact that COVID-19 is having across the UK, we have established our own **Scanning and Sensing Network** to enable colleagues to share what they are hearing and learning. By building up a picture in this way we are better able to identify

good practice, common challenges and possible solutions of the future. We are sharing this insight with our customers and stakeholders, as well as using it to inform our ongoing response to the Pandemic. While a short response such as this does not afford the opportunity to go into every issue in depth, we recommend [visiting the section of our website](#) where we have started to share and highlight some of this learning.

2.7 We currently have insight on the following, with more learning to follow:

- [Helplines & advice lines: practical learning for remote service delivery](#)
- [Domestic abuse](#)
- [Bereavement & end of life](#)
- [BAME Communities](#)
- [Money & Finances](#)
- [Loneliness](#)
- [Supporting Young People](#)
- [Food](#)
- [Community Infrastructure](#)
- [Networks and Peer Support](#)

2.8 Working with other Funders

Throughout the Pandemic, we have worked closely with other funders through the **Wales Funder's Forum (WFF)**. We strongly encouraged the sharing of data between funders and, using our administrative role within WFF, we successfully coordinated this information sharing to share knowledge and avoid duplication. As part of our ongoing commitment, we are funding research work focused on making the WFF more effective, more strategic and better placed to deliver the collective future response that will be required to meet the continuing challenges faced by the voluntary sector.

### **3. The challenges and changes facing the voluntary sector**

3.1 It is important to stress that the voluntary sector is incredibly diverse and varied, covering organisations of many different types and sizes. It has meant that the Pandemic has had impacted on them in varying degrees, particularly in terms of income. While many organisations have had to at least temporarily cease activities to a greater or lesser extent, those that rely on the delivery of those activities to sustain an income have been amongst the hardest hit. To this end, it is medium-sized and larger organisations that have borne the brunt, albeit in different ways. While smaller grassroots organisations may have experienced a hiatus, they tend to rely on modest income and the goodwill of volunteers and members rather than significant funding. The evidence that we offer below mainly reflects the impact of the Pandemic on medium and larger organisations.

- 3.2 During 'lockdown' we noticed that many organisations had to adapt quickly to maintain services and respond to the immediacy of the Pandemic. It is to their credit that they were able to do so in difficult circumstances and with reduced income, particularly those organisations delivering front line services. Paradoxically, organisations that are predominantly reliant on grant funding seem to have been better placed to weather the crisis as funders have worked at pace to top up existing grants and offer maximum flexibility to grant their holders.
- 3.3 Many have turned to digital technology for the first time to deliver services, although some do not have access to the necessary equipment. Even if this move towards digital has been driven by necessity rather than choice, this is likely to make its presence felt on a more permanent basis. However, it has its limitations as many organisations and individuals may still lack the skills to keep up with these developments, pushing them to the margins. Those operating in rural areas have had the added difficulty of poor broadband provision. While some will embrace the changes, others will need ongoing support to keep up and adapt.
- 3.4 Even for larger charities with effective fundraising operations, the drops in income brought about by the cancellation of mass participation events, for example, will be difficult to sustain. Organisations that operate trading arms as a source of revenue have also been particularly hit. A collapse in demand for services during lockdown, or a significantly reduced footfall impacting on retail, has seen income from commercial activity drop significantly.
- 3.5 The experience of the pandemic has also varied by the sector within which an organisation operates, as well as by its size. Environmental charities are amongst the hardest hit and are bracing themselves for long-term financial losses due to reduced membership, the closure of visitor attractions and decreased donations. This may impact on their ability to care for land, protect wildlife, and tackle climate change in the future.
- 3.6 Medium and large organisations are more likely to have reserves that they can utilise, but even this is not as straightforward as it may seem. Many reserves are often tied up as financial investments; with the volatility of the markets and an economy now in recession, cashing in those investments is likely to yield a poor return.
- 3.7 Ultimately, the COVID-19 Pandemic has served to make pre-existing long term and systemic challenges for the voluntary sector even more acute. It means that the existential challenges facing many organisations, at a time when they are expected to play a continuing role in supporting communities through the ongoing Pandemic and beyond, are considerable. Here we summarise the areas where our research has shown that voluntary organisations are struggling:

- **Fundraising and income generation** - the capacity and capability to diversify is still a huge area of concern, and funders like us must consider whether we have a responsibility to help our grantees to become stable and sustainable.
- **Financial management** - there is evidence in some organisations of a basic lack of understanding of budgeting, how to manage cash flow, and reporting effectively, as well as an absence of effective risk management processes. These skills are even more crucial at a time when organisations are facing unprecedented financial challenges exacerbated by the Pandemic.
- **Leadership & governance** - good leadership is important in creating organisational resilience, and in this context, it encompasses the role of trustees, senior management and staff. Deficiencies in experience, expertise and capacity have all have been further exposed by the Pandemic.
- **Business Planning** - there can seem to be low awareness of the importance of planning and a lack of capacity to do the necessary work it requires, especially the vital longer-term strategic planning needed to support communities and organisations to recover from COVID-19.
- **Monitoring, evaluation and use of evidence** - the voluntary sector is only just beginning to appreciate the importance of collecting high quality data as a means of managing performance, persuading boards, donors and other stakeholders of organisational effectiveness, and as a tool for understanding its own impact.
- **Adapting to change and alternative approaches** - the Pandemic has highlighted that some organisations need support to adapt and evolve to meet the changing needs of the communities that they serve, now and in the future. Some lack the capacity and knowledge to work in new ways and need to do more to learn from other organisations to join up understanding and help each other as these new issues emerge.

3.8 Without a strong and viable voluntary sector, communities across Wales will struggle to recover from the wide-ranging impact of the Pandemic, which is why Funders must step in to maximise the support that they can offer, both financially and ‘in-kind’.

### 3.9 The changing nature of Volunteering

The Pandemic has seen the emergence of a new willingness to volunteer within Wales. An unprecedented number of new volunteers have registered with [Volunteering Wales](#) to help their communities to get through the Pandemic, although the local co-ordination of this surge of volunteers across Wales has been mixed and variable. Our own research has suggested a mix of approaches comprising of:

- areas where the local authority is leading volunteer co-ordination
- areas where the county voluntary council (CVC) is leading volunteer co-ordination
- areas where there is much more of a partnership approach between the two
- a limited number of areas with poor volunteer coordination.

3.10 On the whole, both local authorities and CVCs have signposted volunteers to Volunteering Wales through their own websites. These established channels do not account for the informal volunteering that is now happening in communities 'off the radar'. This is often coordinated by citizens through social media and has raised some safeguarding concerns. Informal volunteering like this is much more difficult to regulate. Formal volunteering routes are already experiencing a huge demand for DBS checks and safeguarding training as a result of their own volunteer surge. The fact is that this is how more and more people are now choosing to volunteer means the sector may need to adapt to respond.

3.11 Colleagues at WCVA and Building Communities Trust have pointed to a perceived growth in young people volunteering, particularly on the informal side of things. With the older, more traditional volunteer cohort finding themselves increasingly socially isolated and in need of the support themselves, younger people seem to be stepping in. Whether or not this new enthusiasm for volunteering can be harnessed and encouraged in the longer term remains to be seen, but the hallmark of the Pandemic in Wales has been the willingness of people to 'do their bit'.

## 4. **Supporting the voluntary sector and communities to recover**

4.1 While there has been a significant mobilisation of funds from Welsh Government and other funders to support the voluntary sector through the immediacy Pandemic, it is less clear as to what funding will be available to support it in the future. The loss of EU structural funding following Brexit is one such example. Voluntary organisations benefited significantly from this funding, and while the UK Government has announced plans for a UK Shared Prosperity Fund to replace them, it remains unclear as to how this funding will be distributed and spent in Wales. Our conversations have highlighted significant concern about future funding opportunities, particularly the possibility that government funding for the voluntary sector may be reduced as part of future savings to the public finances to cover the costs associated with the Pandemic.

- 4.2 For our part, and as long as income holds up, we will continue to make National Lottery Funding available to the voluntary sector and communities in Wales. Next year, we will conduct a comprehensive review of our Wales funding portfolio to inform future funding priorities. It will consider the impacts of COVID-19 alongside other significant developments like Brexit, as well as our ongoing commitments to tackling climate change and supporting equality, diversity & inclusion.
- 4.3 In the medium-term, we will continue to support communities and the voluntary sector to recover from the Pandemic, while also encouraging them to adapt for the longer-term. Therefore, we are introducing three new funding priorities in Wales:
- Support organisations to adapt or diversify their organisations and services to respond to new and future challenges
  - Support communities adversely affected by COVID-19
  - Support communities and organisations to become more resilient to enable them to respond better to future context.
- 4.4 These will apply across both our main grant programmes; **People & Places** and **National Lottery Awards for All**, with the latter being the main source of support for those seeking help with the short-term implications of the Pandemic. As well as providing grant funding for projects, we are also adapting our funding criteria to include direct support for organisations, proactively encouraging both future applicants and existing grant holders to take advantage of the opportunity to request additional financial support toward their organisational development. We will offer this alongside the advisory support that we have already put in place, like our online 'strengths checker' and third sector directory, equipping our staff with the skills that they need to provide more guidance and support on organisational resilience.
- 4.5 We believe that the Fund's reach, capacity and expertise right across Wales can help to ensure that organisations and communities have the support from us that they need to access National Lottery funding at this crucial time.
- 4.6 The legislation that governs us also permits us to use our grant making expertise to distribute funding on behalf of other organisations where those opportunities closely align with our own priorities. We have previously worked in partnership with both WEFO and The Welsh Government matching funding with our own and distributing these enhanced funding streams through our established programmes. Our extensive knowledge of the voluntary sector in Wales, and our close relationships with organisations at both the national and local levels, makes us ideally placed to provide this service on an "at cost" basis. As such, we are always open to opportunities to distribute other funds to the voluntary sector.

# Eitem 5

## Y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau

### 2 Tachwedd 2020 – tudalen flaen papurau i'w nodi

Paper no.	Issue	From	Action point
ELGC(5)-28-20 Papur 9	Ymchwiliad i COVID-19 a'i effaith ar faterion sy'n ymwneud â chylch gwaith y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau	Cymorth i Ferched Cymru	I'w nodi
ELGC(5)-28-20 Papur 10	Effeithiau Covid-19: Galwad agored am dystiolaeth a phrofiadau	Cadeirydd y Pwyllgor yr Economi, Seilwaith a Sgiliau	I'w nodi
ELGC(5)-28-20 Papur 11	Ymchwiliad i COVID-19 a'i effaith ar faterion sy'n ymwneud â chylch gwaith y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau	Comisiynydd Bobl Hŷn Cymru	I'w nodi
ELGC(5)-28-20 Papur 12	Ymchwiliad i COVID-19 a'i effaith ar faterion sy'n ymwneud â chylch gwaith y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau	Comisiwn Cydraddoldeb a Hawliau Dynol	I'w nodi
ELGC(5)-28-20 Papur 13	Rheoliadau COVID-19	Cadeirydd y Pwyllgor Deddfwriaeth, Cyfiawnder a'r Cyfansoddiad	I'w nodi
ELGC(5)-28-20 Papur 14	Y Bil Cam-drin Domestig	Cymorth i Ferched Cymru	I'w nodi



ELGC(5)-28-20 Papur 15	Y Bil Cam-drin Domestig	Y Dirprwy Weinidog a Prif Chwip	I'w nodi
ELGC(5)-28-20 Papur 16	Cysgu allan yng Nghymru	Cadeirydd y Pwyllgor Cyfrifon Cyhoeddus	I'w nodi
ELGC(5)-28-20 Papur 17	Cynllunio ar gyfer y blaen-raglen waith (anghydraddoldeb yn y system cyfiawnder troseddol yng Nghymru)	Canolfan Llywodraethiant Cymru	I'w nodi

## **Welsh Women's Aid briefing: Short, medium and long-term actions needed to support survivors of VAWDASV throughout and beyond the COVID-19 pandemic**

The COVID-19 pandemic has held a magnifying glass to the unacceptable global presence of violence against women. We have seen in detail gaps in protection and support, unsustainable funding models for specialist support and the dangers and barriers which face survivors in Wales.

Throughout the COVID-19 pandemic it can be anticipated that all areas have seen increasing domestic abuse, sexual violence, forced marriage, so called honour- based violence, child sexual abuse, FGM, exploitation and other forms of violence against women and girls. Since the lockdown was instigated, Welsh Women's Aid, along with sister organisations, have been representing to Welsh and UK governments that it is highly foreseeable that the emergency response measures to the pandemic will lead to an increase in harm to women and children.

Available data shows:

- During the initial lockdown period, contact with Wales' national helpline Live Fear Free rose by up to 49%, call time trebled with those making contact often reporting more frequent abuse with shorter escalation periods. Visits to the Live Fear Free website increased by 144% in the last month and there were 1,683 homepage visits to the site made in April compared with 690 in March.<sup>1</sup>
- Nationally police forces across England and Wales have recorded an 8% increase in domestic abuse compared with the same period last year.<sup>2</sup>
- Imkaan has reported that services led 'by and for' black and minoritised women have reported significant increases in demand – particularly for refuge spaces.<sup>3</sup>

In July Welsh Women's Aid hosted a roundtable event which focussed on actions needed to build back with a preventative and early intervention focus VAWDASV to bring about change that lasts.<sup>4</sup> Following this we also responded to the Welsh Government consultation on Our Future Wales post COVID-19 lockdown measures. A key focus is on preparing services for an influx of referrals as lockdown measures ease. Whilst also considering additional factors caused by the arrival of a second wave, the new local restrictions being introduced in response and actions which must be implemented.

<sup>1</sup> Live Fear Free and Welsh Government monitoring data.

<sup>2</sup> National Police Chiefs Council, Data from Operation Talla

<sup>3</sup> Imkaan, The Impact of the Two Pandemics: VAWG and COVID-19 on Black and Minoritised Women and Girls, May 2020

<sup>4</sup> <https://www.welshomensaid.org.uk/2020/08/creating-change-that-lasts-responding-to-vawdasv-following-the-covid-19-pandemic-roundtable/>

Below we have highlighted key actions for the short, medium and long-term to ensure survivors of all forms of VAWDASV are able to access support, and that services are equipped to adapt and maintain provision regardless of how the pandemic and Government response to it develops.

*This briefing has been informed by our the Creating Change that Lasts roundtable event, joint Welsh Women's Aid and NSPCC Children and Young People roundtable event, Welsh Women's Aid quarterly data reports, 2 surveys carried out with specialist services on the impact of COVID 19 and consistent conversation with the Live Fear Free Helpline, our member services, the wider sector and the people they support.*

## Short-term

These are actions which must be implemented immediately to ensure women and children across Wales have access to relevant and effective support, and the immediate safety of frontline specialist support workers is protected.

- *Communication and support for survivors in 'local lockdown' areas with new restrictions.* The introduction of lockdown areas and new restrictions brings with it the possibility of initial issues we saw at the beginning of lockdown resurfacing. This is a crucial time period to:
  - Get the word to survivors that services are available and can be reached in a number of safe and secure ways. Share Welsh Government ['Home shouldn't be a place of fear'](#) campaign.
  - Promote the [Welsh Women's Aid Bystander Toolkit](#) and [Live Fear Free Helpline](#) to ensure all Welsh citizens and agencies can get help for a person they're concerned for.
  - Circulate information about [mask exemptions](#) for people who've experienced trauma.
  - Highlight Welsh Government guidance that seeking safety from violence and abuse are legitimate exemptions for leaving your local area.<sup>5</sup>
- *Ensure communications and provision are intersectional and reach all survivors.* Communication that support is available and the subsequent provision needs to be accessible to *all* survivors. The needs of women of colour and survivors from minoritised communities, LGBT survivors, survivors with disabilities and survivors living in rural areas must be at the forefront of planning and provision to ensure barriers to support are removed and the support provided is needs led. All agencies working alongside services with this specialist knowledge and survivors with these experiences will be key to getting this right.
- *Ensure workplaces are supportive to survivors of all forms of VAWDASV.* There needs to be action in ensuring that workplaces have effective policies and procedures in place covering all forms of VAWDASV, and that these are adapted to remote and new working arrangements.

<sup>5</sup> <https://twitter.com/LiveFearFree/status/1308119106114195462>

Human resources, managers and any workplace champions/union representatives should be provided with additional information on their roles in supporting employees affected by VAWDASV. This should include training such as Trusted Professional training<sup>6</sup> and for devolved public bodies ensure they continue to adhere to the National Training Framework across all levels.

- *Ensure referral routes to specialist services are prepared for the rise in disclosures by children and young people at schools.* As children return to education and schools inevitably receive an influx of disclosures, we have to ensure effective referrals to specialist support for all children requiring it and that these services are sufficiently resourced to support these referrals. This resource must also reflect that children and young people need support as survivors of abuse in their own right, not having ‘witnessed’ abuse. It is key to get this right at the earliest stage possible to prevent future harm and trauma.
- *Solidify frontline staff in specialist services as key workers, ensuring they have continued access to PPE and have prioritised access to testing, childcare and vaccinations as developed.* Frontline staff in specialist services have been key to ensuring women and children have been able to receive support when they need it most. However, from the first introduction of initial UK lockdown measures,<sup>7</sup> staff shortages due to sickness, necessary self-quarantine and limited childcare access has limited services’ capacity. Every effort must be made to keep frontline specialist workers safe, and fully equipped to provide support.
- *Housing and homelessness plans must be informed by specialist VAWDASV services.* Accommodation based support, including refuge, for survivors of VAWDASV differs from wider homelessness support as it is an important element of building safety, support, and enabling long-term freedom from violence and abuse. Like other elements of the Housing Support Grant the support element is the critical part of the person’s journey. Housing support regional leads must work with local specialist services to consider how access to appropriate, safe refuge and move on housing is of adequate levels of support for adults and children. Specialist services have a critical role to play in developing and delivering the response to homelessness and COVID 19. It is critical local authorities engage with VAWDASV providers in their area to have a picture of need and the to ensure VAWDASV is embedded into the planned response. Many accessing homelessness services will have experienced some or many forms VAWDASV in their past and will still be impacted by the trauma of these experiences.

<sup>6</sup> <https://www.welshwomensaid.org.uk/what-we-do/change-that-lasts/south-wales/trusted-professionals/>

<sup>7</sup> <https://www.welshwomensaid.org.uk/2020/03/responding-to-violence-against-women-domestic-abuse-and-sexual-violence-during-the-covid-19-pandemic/>

- *Ensure health services facilitate identification and disclosure with onward referral to specialist support.* Changes to accessing health care, such as phone call access to GPs and A&E triage systems may create barriers for identifying those experiencing abuse. The implementations of new systems need to consider how space will be created to enable disclosures and to safely signpost or refer to specialist support. Staff managing triage calls or other points of contact with patients that have changed due to COVID-19 need to be trained to safely respond and act on disclosures within the current situation, in line with the National Training Framework.
- *Access to test and tracing system needs to consider the safety and support needs of survivors.* Many survivors will not be able to share personal details as it could be significantly dangerous for them to disclose where they have been or to be traced. Systems have been discussed with the test and trace system, to support contacting survivors accessing refuges can be done through the safety of linking with specialist support services. Advice has also been given to tracing service to understand the barriers to a survivor participating in the process. If someone is or has experienced coercive controlling relationship they may experience restricted access to testing, restricted in who they are able or allowed to be in contact with, there may be significant dangers in disclosing to a testing centre who they have been in contact with or being traced. They may also be restricted in complying with self-isolation.
- *Ensuring we continue to hold perpetrators to account.* Courts have a backlog of cases that they are currently going through. This has meant that in many cases survivors have gone through additional distress with cases being postponed and delayed further. They will require additional support and advocacy to support them in engaging with the new set up of courts and the delays. Survivors with multiple needs, will need additional support to navigate the new court processes and access systems through socially distanced mechanisms, including accessing remote evidence centres. The delay and backlogs must not see a reduction in perpetrators being held to account, we must ensure bail conditions are robust and do not enable further abuse and we must see sentencing remain proportionate. Perpetrator services have adapted their provision to meet with COVID-19 restrictions, these services need to be continued throughout new local lockdowns, recognising that there will be increased demand for these services going forward as evidenced in increased calls to the Respect UK helpline.
- *Proactively plan for the safety and support of survivors of sexual exploitation and women engaged in prostitution.* Survivors of sexual exploitation and women engaged in prostitution have continued to navigate multiple complex barriers in the wake of the pandemic. In addition to the significant harm they already experience, many will be facing additional risks surrounding unsuitable/ unsafe housing, access to hygiene facilities, increased risk of infection, decreased income, increased police sanctions and increased abuse and harassment (from communities, buyers, and 'pimps'). The VAWDASV risks surrounding COVID-19 have largely been framed around domestic abuse, meaning survivors of other forms of VAWDASV, their realities and adequate housing/ support is not centred in planning. As the nature of the

pandemic and our response to it continues to evolve as we plan for the future of Wales, it is vital that the safety and wellbeing of all survivors is included. These concerns also need to be embedded for medium and long-term planning for VAWDASV, including the Welsh Government National VAWDASV National Strategy refresh.

## Medium-term

These are actions which must be implemented to ensure specialist services and wider agencies are adequately prepared and resourced to maintain and adapt provision as the pandemic and the Government response to it continues to develop.

- *Monitor the need for additional funding ahead of March 2021 £1.5million spend deadline.* We welcomed the announcement of an additional £1.5 million COVID-19 funding to be utilised until 31 March 2020. As the effects of the pandemic will be long lasting and continue to change both the support which is needed and the way in which provision is delivered, we call for this to be acknowledged in the Welsh Government budget and future commission practices and levels of continued investment across the VAWDASV sector.
- *Recentre Violence Against Women, Sexual Abuse, and Domestic Violence as a Welsh Government priority and renew commitment to embedding existing legislation across all directorates.* The COVID-19 pandemic has highlighted the lack of cross government strategic awareness and focus on the legislation's intended purpose to enable a cross-government, cross-department response to end VAWDASV and end the postcode lottery survivors face when seeking safety and support. We believe that until the purpose of the Act is achieved, consequences of the pandemic will continue to disproportionately effect survivors of VAWDASV. Recentring VAWDASV as a Welsh Government priority will ensure the safety of women and children is considered in policy development and emerging emergency measures.
- *Re-establishment of national governance structures to provide oversight of the delivery of the purpose of the Act and the National strategy and delivery plan.* During the COVID-19 pandemic, the Welsh Government have led weekly and bi-weekly VAWDASV Strategic COVID meetings that have provided a space to feed in and respond to the immediate crisis. Welsh Women's Aid has raised that there needs to be a strategic focus now on planning for the future. We held our roundtable to enable the beginning of these discussions however leadership now needs to come from ministerial, adviser and official levels to take this forward. The National VAWDASV Expert Stakeholder Group has only met twice in the last 2 years. The governance structure at a national level must be re-instated and must engage across directorates. It has a role in monitoring and reviewing on progress to the national strategy and delivery plan and needs to have feed in from the Sustainable Funding Task and Finish Group, HBV Leadership Group, Vulnerable Children and Safeguarding Group and All Wales Sexual Violence group to strategically bring together work that has been instigated before and during the pandemic to monitor the strategic delivery in line with the duties in the Act.

- *Ensure dedicated children workers in both refuge and community services to provide practical and therapeutic services for children and young people to enable them to recover from their experiences, recognise abuse and develop healthy relationships in the future.* Children and young people are being specifically impacted by the current climate which provides increased opportunity for perpetrators to monitor and control family members, increased opportunity for online sexual exploitation and results in more children and young people becoming “invisible” to services.<sup>8</sup> Specialist services that provide support for children and young people report that there are significant concerns for the wellbeing of children and young people across refuge and community support. Therapeutic support has not been possible with adapted online support and safeguarding/welfare checks are challenging as it is not clear who is in the room and with young children they are not able to access independently.
- *Increase the availability of varied flexible accommodation and support for survivors.* Accommodation based support, including refuge, for survivors of VAWDASV is an important element of building safety, support, and enabling long-term freedom from violence and abuse. The pandemic has magnified the importance of a safe home. Each survivor’s needs will be unique to their experience, services must be well resourced to offer this flexibility.

## Long-term

These are actions which must be implemented to ensure a stable foundation on which to build a ‘new normal’ where we commit to ending violence against women and children in all its forms. Although these actions are ‘long-term’ the work to fulfil them must begin today.

- *Ensure funding for the VAWDASV specialist sector is sustainable and reflects nuances across provision.* COVID-19 has demonstrated that now more than ever services need to be in receipt of secure and sustainable funding to be able to both react and plan for changing needs and environment. As the specialist support sector navigate the fall out and work to mitigate further damage, secure funding will ensure access to refuge, trauma informed practice, therapeutic support, prevention work, perpetrator interventions and support in the community can continue. Sustainable funding means sustainability of specialist VAWDASV support and shows a commitment to ending VAWDASV as opposed to managing a crisis response.
- *Commit to a long-term solution for supporting survivors with no recourse to public funds (NRPF).* Emergency COVID-19 funds enabled services to support survivors with No Recourse to Public Funds (NRPF). Services have raised concerns regarding women with NRPF following

<sup>8</sup> <https://www.welshwomensaid.org.uk/2020/03/supporting-children-and-young-people-through-the-coronavirus-pandemic/>

the pandemic and the removal of access to emergency funds. Having supported the women during lockdown they will not be able to remove the support due to the risk she will have to return to her abuser or face destitution. If the women are to be supported in refuge rent and support costs will need to be covered. A long-term commitment to supporting women with NRPF is the only way we can ensure *every survivor* will have access to safety and support.

- *Invest in early intervention and prevention.* It is vital that we do not lose sight of prevention of VAWDASV and enabling early access to support during and post COVID 19. VAWDASV is preventable. This means we can take action to stopping VAWDASV happening in the first place, whilst also take earlier action to ensure we are preventing further harm for those already impacted. In Wales there is a prevention agenda across a number of remits VAWDASV, ACEs, Future Generations, Violence prevention Unit, housing, safeguarding – particularly creating join up on legislative and policy agendas that would build on the synergy developed during COVID 19. We have seen a move to recognise the VAWDASV as a public health pandemic during COVID-19 in Wales and this prioritisation must not be lost post COVID-19. The World Health Organisation has produced briefings on VAWG and COVID-19, with evidence based on global information and previous pandemic research, available [here](#).
- *Create communities that are aware of the prevalence of VAWDASV, take action to challenge it and provide supportive responses to survivors.* During the COVID-19 pandemic Welsh Women's Aid have focused on ensuring that support networks remain available to survivors and that communities are aware of how to take supportive action. Learning from our Ask Me programme, we have developed our Bystander Toolkit that provided a range of information to get the message out there on how different community actors could still be active bystanders during COVID-19 in safe and supportive manner.

*Any comments or questions regarding this briefing can be directed to:*

**Jordan Brewer**

Policy and Research Officer

[JordanBrewer@welshwomensaid.org.uk](mailto:JordanBrewer@welshwomensaid.org.uk)



Ken Skates AS

Gweinidog yr Economi, Trafnidiaeth a Gogledd

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13 Hydref 2020

Annwyl Ken,

Fel y soniodd Helen Mary Jones yn y Cyfarfod Llawn ar 7 Hydref, fel rhan o'n hymchwiliad parhaus i Adferiad o Covid-19, clywsom dystiolaeth [ddydd Mercher 7 Hydref](#) gan sectorau yr effeithir arnynt ar gyfer yr hirdymor gan gynnwys twristiaeth, lletygarwch, manwerthu a'r diwydiant gwallt a harddwch. Cyn cytuno ar yr adroddiad llawn, hoffai'r Pwyllgor ofyn am sicrwydd ar fater penodol a godwyd, sy'n gofyn am sylw prydlon, ac y deallwn eich bod chi eisoes yn ymchwilio iddo.

Amlygodd Victoria Brownlie o'r Ffederasiwn Gwallt a Harddwch Cenedlaethol (NHBF) effaith anghymesur y cyfyngiadau presennol o fewn y canllawiau ar wasanaethau cyswllt agos ar barlyrau harddwch. Mae'r canllawiau'n cynghori'n gryf yn erbyn triniaethau ar yr wyneb, sydd rhwng 50 a 70 y cant o'r triniaethau a gynigir gan y diwydiant harddwch, sef diwydiant sy'n cynnwys menywod 95 y cant.

Mae'r diwydiant gwallt a harddwch yn cyfrannu'n sylweddol at economi sylfaenol Cymru ac at iechyd a lles. Fodd bynnag, mae ei bwysigrwydd yn ymestyn y tu hwnt i hyn, ac amlygodd Victoria fod salonau a pharlyrau harddwch yn rym allweddol wrth ddenu pobl i'r stryd fawr, ac o'r herwydd maent yn creu nifer o ymwelwyr â busnesau eraill, ac maent hefyd yn aml yn gweithredu fel canolfannau cymunedol lleol.

Rheswm arall pam mae'r diwydiant yn hanfodol i economi Cymru yw am ei fod yn gyflogwr o bwys i fenywod. Mae'r mwyafrif o fusnesau gwallt a harddwch yn ficro-fusnesau sy'n eiddo i entrepreneuriaid benywaidd ac maent yn cefnogi menywod sy'n gweithio sydd â phlant.

Tynnodd Victoria Brownlie sylw at yr angen i newid y canllawiau yn gyson er mwyn sicrhau y gellir cynnig gwasanaethau diogel o ran Covid fel y gall busnesau gynhyrchu incwm eto. Roedd [tystiolaeth y Ffederasiwn Gwallt a Harddwch Cenedlaethol](#) hefyd yn annog bod angen gochel rhag unrhyw agwedd “wamal” o ran sut mae’r sector yn cael ei ddirnad a’i drin, a mynegodd bryder na chaiff y cyfraniad economaidd y mae’r sector yn ei wneud ei gydnabod bob amser.


Fel y gwyddoch, o [lythyr](#) dyddiedig 7 Hydref atoch gan Victoria Brownlie, mae’r Ffederasiwn Gwallt a Harddwch Cenedlaethol wedi rhybuddio bod dros draean o fusnesau gwallt a harddwch yng Nghymru wedi dweud eu bod yn ansicr a fyddant yn goroesi y tu hwnt i’r Nadolig. Mae’r Ffederasiwn wedi dweud wrthym, os bydd y busnesau hyn yn methu parhau, nid yn unig y bydd trychineb o ran busnesau a oedd gynt yn llewyrchus yn cau, ond hefyd y risg y gallai fod angen i’r bobl a gyflogir ganddynt ar hyn o bryd droi at y ‘farchnad ddu’ am waith. Mae triniaethau gwallt a harddwch heb eu rheoleiddio yn beryglus i’r ymarferydd ac i gleientiaid.

Byddai’r Aelodau yn croesawu cael sicrwydd na ddangosir gogwydd anymwybodol o ran y rhywiau yn null gweithredu polisi Llywodraeth Cymru o ran y sector hwn. Nodwn, mewn ymateb i adroddiad diweddar y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau, sef ‘Amlygu’r materion: anghydraddoldeb a’r pandemig’, fod Llywodraeth Cymru wedi dweud y bydd asesiadau effaith pellach yn ymwneud â rheoliadau a chanllawiau o ran y coronafeirws yn cael eu cyhoeddi, ac y byddai yn “rhaid dysgu gwersi o ddyddiau cynnar y pandemig.”

Mae’r Pwyllgor yn croesawu eich ymateb i gwestiwn Helen Mary Jones yn y Cyfarfod Llawn a’ch ymrwymiad i edrych ar anghysonderau posibl yn y canllawiau o ran gwasanaethau cyswllt agos, a hoffai gael ei ddiweddarau am ganlyniad hyn. Hoffem, fodd bynnag, ofyn y cwestiynau a ganlyn hefyd:

- Pa ystyriaeth a roddwyd i effaith y canllawiau cyswllt agos hyn ar ba mor hyfyw yw busnesau yn y sector gwallt a harddwch?
- Sut mae’r canllawiau yng Nghymru ar gynnal triniaethau yn y ‘parth risg uchel’ yn cymharu â’r canllawiau yng nghaneddloedd eraill y DU?
- A ydych yn fodlon bod asesiad effaith digonol wedi’i wneud o’r cyfyngiadau parhaus hyn? a
- Chan fod angen adolygu’r canllaw hwn yn rheolaidd, beth yw’r broses ar gyfer cyflawni hyn?

Rwyf wedi copïo’r llythyr hwn at John Griffiths, yn ei rôl fel cadeirydd y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau.

A handwritten signature in black ink, reading "Russell George". The signature is written in a cursive style with a large initial 'R' and a long horizontal flourish at the end.

Russell George AS

Cadeirydd: Pwyllgor yr Economi, Seilwaith a Sgiliau

## Eitem 5.3

John Griffiths AS  
Cadeirydd, Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau  
Senedd Cymru  
Caerdydd  
CF99 1NA

15 Hydref 2020

Annwyl Gadeirydd,

### **Ynghylch: Sesiwn dystiolaeth gyda'r Dirprwy Weinidog a'r Prif Chwip, 12 Hydref 2020**

Gobeithio eich bod chi a'ch teulu yn cadw'n dda yn ystod y cyfnod heriol hwn.

Yn dilyn eich sesiwn dystiolaeth gyda'r Dirprwy Weinidog a'r Prif Chwip, roeddwn yn meddwl y byddai'n ddefnyddiol ailddatgan fy safbwynt ynghylch adroddiad Llywodraeth Cymru *Ailadeiladu Covid-19: Heriau a Blaenoriaethau* a gyhoeddwyd yr wythnos diwethaf.

Mae elfennau o'r adroddiad a fydd, yn fy marn i, o fudd i bobl hŷn ac sy'n adlewyrchu rhai o'r materion a drafodais gyda'r Cwnsler Cyffredinol a'r Gweinidog dros Bontio Ewropeaidd mewn cyfarfod ym mis Mehefin ac sydd wedi'u nodi yn fy adroddiad [Gadael Neb ar Ôl: Camau gweithredu ar gyfer adferiad o blaid pobl hŷn](#), a gyhoeddwyd ym mis Awst.

Fodd bynnag, fel y dywedais yn fy [ymateb](#) i'r adroddiad, cefais sioc a siom nad oedd yr adroddiad yn cydnabod pobl hŷn yn benodol fel grŵp y mae pandemig Covid-19 wedi effeithio'n anghymesur arno, nac yn cydnabod eu cyfraniadau pwysig i gymdeithas Cymru, ein heconomi, a rôl hollbwysig pobl hŷn yn adferiad ac yn nyfodol Cymru.

Rwyf wedi ysgrifennu at y Cwnsler Cyffredinol a'r Gweinidog dros Bontio Ewropeaidd i amlinellu fy mhryderon ac rwyf wedi gofyn am gyfarfod i drafod yn adeiladol y camau sydd eu hangen i sicrhau bod pob cenhedlaeth yn teimlo eu bod yn cael eu cydnabod a'u gwerthfawrogi a bod pobl hŷn yn gallu cymryd rhan lawn yn y gwaith o ailadeiladu ac adfer Cymru.

Yr wyf yn ymwybodol bod Age Cymru ac arweinwyr sefydliadau cenedlaethol pobl hŷn Cymru wedi codi pryderon tebyg, ac wedi ysgrifennu hefyd at y Cwnsler Cyffredinol a'r Gweinidog dros Bontio Ewropeaidd.

Os oes angen rhagor o wybodaeth arnoch, neu os gallaf gynorthwyo'r Pwyllgor gyda'ch ymholiadau, mae croeso i chi gysylltu â mi.

Yr wyf wedi anfon copi o'r llythyr hwn at y Dirprwy Weinidog a'r Prif Chwip, y Cwnsler Cyffredinol a'r Gweinidog dros Bontio Ewropeaidd, a'r Dirprwy Weinidog dros Iechyd a Gwasanaethau Cymdeithasol er gwybodaeth iddynt.

Yn gywir,



Heléna Herklots CBE  
**Comisiynydd Pobl Hŷn Cymru**

CC:

Jane Hutt, y Dirprwy Weinidog a'r Prif Chwip

Jeremy Miles, y Cwnsler Cyffredinol a'r Gweinidog dros Bontio Ewropeaidd

Julie Morgan, y Dirprwy Weinidog dros Iechyd a Gwasanaethau Cymdeithasol

# **Cydraddoldeb a hawliau dynol mewn gofal preswyl yng Nghymru yn ystod coronafeirws**

Hydref 2020

## **Ynglŷn â ni**

Y Comisiwn Cydraddoldeb a Hawliau Dynol yw corff cydraddoldeb cenedlaethol Prydain Fawr ac mae wedi'i achredu gan y Cenhedloedd Unedig fel sefydliad hawliau dynol cenedlaethol 'Statws A'. Rydym yn gweithredu'n annibynnol fel corff cyhoeddus statudol a sefydlwyd o dan Ddeddf Cydraddoldeb 2006. Rydym wedi cael pwerau gan y Senedd i gynghori'r Llywodraeth ar oblygiadau cydraddoldeb a hawliau dynol ynghylch deddfau a deddfau arfaethedig, ac i gyhoeddi gwybodaeth neu ddarparu cyngor ar unrhyw fater sy'n gysylltiedig â cydraddoldeb, amrywiaeth a hawliau dynol. Gallwch ganfod rhagor am ein gwaith ar ein [gwefan](#).

## **Cyflwyniad**

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1. Mae'r pandemig coronafeirws wedi cael effaith ddwys ar y rhai sy'n byw mewn gofal preswyl ac wedi codi cwestiynau difrifol ynghylch y gwerth rydym yn ei roi ar fywydau pobl hŷn ac anabl. Mae tystiolaeth na chynhaliwyd safonau cydraddoldeb a hawliau dynol, gan gynnwys mewn penderfyniadau allweddol ynghylch derbyniadau cartrefi gofal, ymweliadau a mynediad at ofal critigol. Wrth i ni baratoi ar gyfer ton nesaf y pandemig, mae gennym gyfle pwysig i archwilio sut y gwnaed y penderfyniadau hyn a beth arall sydd angen ei wneud i ddiogelu hawliau pobl hŷn ac anabl.
2. Nawr yn fwy nag erioed dylai ein deddfau cydraddoldeb a hawliau dynol fod wrth wraidd y broses o wneud penderfyniadau. Mae'r deddfau hyn yn nodi rhwymedigaethau'r llywodraeth a darparwyr gwasanaeth i amddiffyn bywydau, urddas, lles a rhyddid pobl. Maent yn darparu fframwaith ymarferol i lywio penderfyniadau ynghylch cynnal a chydbwyso ein hystod lawn o hawliau, gan helpu i asesu effaith cyfyngiadau ac a ydynt yn gymesur ac yn briodol i anghenion unigol. Un o egwyddorion pwysig cyfraith cydraddoldeb a hawliau dynol yw y dylid gwneud pob ymdrech i gynnwys pobl mewn penderfyniadau sy'n effeithio arnynt. Mae gwrando ar brofiadau byw pobl hŷn ac anabl a dysgu ohonynt yn hanfodol wrth i ni symud ymlaen.
3. Mae'r briff hwn yn disgrifio'r materion allweddol sydd wedi codi mewn cartrefi gofal, ac yn nodi'r fframwaith cydraddoldeb a hawliau dynol y dylid ei weithredu i'w hatal rhag digwydd eto ac i wella arfer. Y bwriad yw cefnogi'r rhai sy'n gwneud penderfyniadau a darparwyr i gydymffurfio â'u rhwymedigaethau ac ymgorffori ystyriaethau cydraddoldeb a hawliau dynol yn yr ymateb parhaus i'r pandemig. Trwy gydol y briff rydym yn defnyddio 'cartrefi gofal' i gyfeirio at bob math o ofal cymdeithasol preswyl i oedolion, gan gynnwys darpariaeth ar gyfer pobl hŷn ac oedolion anabl o unrhyw oedran. Mae'r wybodaeth hon yn ymwneud â Chymru. Rydym hefyd wedi cyhoeddi [briff ar goronafeirws mewn cartrefi gofal yn Lloegr](#).

## Materion sydd wedi codi mewn cartrefi gofal<sup>1</sup>

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### Marwolaethau oherwydd COVID-19

4. Bu farw bron i 19,400 o breswylwyr cartrefi gofal ledled Cymru a Lloegr gyda COVID-19 hyd at 12 Mehefin, gan gyfrif am bron i 40 y cant o'r holl farwolaethau o'r feirws.<sup>2</sup> At ei gilydd, mae marwolaethau mewn cartrefi gofal wedi cynyddu bron i 66 y cant yng Nghymru o gymharu â blynyddoedd blaenorol.<sup>3</sup> I ddechrau, ni chynhwyswyd marwolaethau o COVID-19 mewn cartrefi gofal mewn adroddiadau swyddogol.<sup>4</sup>
5. Fe fu marwolaethau anghymesur ymhlith rhai grwpiau, gan gynnwys y rhai 65 oed a hŷn,<sup>5</sup> y rhai o grwpiau Du ac Asiaidd<sup>6</sup> a dynion.<sup>7</sup> Roedd gan bron i hanner y

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<sup>1</sup> Fe wnaethom gynnal trafodaeth bord gron ag ystod o randdeiliaid ar 9 Medi 2020 i gasglu tystiolaeth ar y materion a ddaeth i'r amlwg yn ystod ton gyntaf y pandemig a barn ar yr argymhellion ymarferol sydd eu hangen i liniaru'r rhain yn y dyfodol. Ymhlith y rhanddeiliaid roedd: Gofal Cymdeithasol Cymru, Cymdeithas Alzheimers, Comisiynydd Pobl Hŷn Cymru, Cymorth Canser Macmillan, Age Cymru, Senedd Cymru i Bobl Hŷn, Y Coleg Nyrsio Brenhinol, Arolygiaeth Gofal Cymru ac Anabledd Cymru. Fe wnaethom ymgysylltu ar wahân â Chymdeithas Llywodraeth Leol Cymru a Fforwm Gofal Cymru. Lle tynnir y dystiolaeth yn ein briff o'r ymgysylltu hwn, rydym yn dyfynnu 'ymgysylltu â rhanddeiliaid EHRC Cymru' mewn troednodiau dilynol.

<sup>2</sup> Mae'r dadansoddiad diweddaraf o effaith coronafeirws ar y sector gofal am y cyfnod hyd at 12 Mehefin. ONS (3 Gorffennaf 2020), '[Marwolaethau sy'n cynnwys COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)](#)', ffigur 2; ac ONS (23 Mehefin 2020), '[Cymhariaeth o achosion marwolaeth wythnosol yng Nghymru a Lloegr: hyd at yr wythnos yn dod i ben 26 Mehefin 2020](#)', ffigur 1. Yn y cyfnod hwn, adroddwyd bod 46,425 o farwolaethau yn ymwneud â COVID-19 yn Lloegr, gan gynnwys 18,562 ymhlith preswylwyr cartrefi gofal (39.8 y cant) ac adroddwyd am 2,370 o farwolaethau yn ymwneud â Covid-19 yng Nghymru, gan gynnwys 826 ymhlith preswylwyr cartrefi gofal (34.9 y cant). Mae hyn yn cynnwys preswylwyr cartrefi gofal a fu farw mewn cartrefi gofal ac mewn ysbytai. Diffiniad yr ONS o 'gynnwys COVID-19' yw lle y soniwyd am COVID-19 yn unrhyw le ar y dystysgrif marwolaeth, p'un ai fel achos sylfaenol ai peidio.

<sup>3</sup> Bell, D. et al. (29 Awst 2020), '[Marwolaethau COVID-19 a gofal tymor hir: cymhariaeth yn y DU](#)', Rhwydwaith Polisi Gofal Hirdymor Rhyngwladol. Mae'r dadansoddiad yn cymharu nifer y marwolaethau yn ystod y pandemig â marwolaethau wythnosol cyfartalog yn ystod y cyfnod 5 mlynedd blaenorol, fel mesur o 'farwolaethau gormodol'. Mae'r dull hwn yn delio â marwolaethau wedi'u camddiagnosio a marwolaethau sydd ag achosion uniongyrchol eraill ond na fyddent wedi digwydd heb y pandemig.

<sup>4</sup> Blackall, M. (18 Ebrill 2020), '[Gallai marwolaethau Covid-19 mewn Cartrefi Gofal y DU fod 'bum gwaith gymaint ag amcangyfrif y llywodraeth](#)', The Guardian.

<sup>5</sup> ONS (3 Gorffennaf 2020), '[Marwolaethau sy'n cynnwys COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)](#)', ffigur 8.

<sup>6</sup> Mae tystiolaeth ehangach ledled Cymru a Lloegr yn awgrymu bod pobl o rai grwpiau ethnig mewn risg uwch o COVID-19, gweler SYG (7 Mai 2020), '[marwolaethau cysylltiedig â Choronafeirws \(COVID-19\) yn ôl grŵp ethnig, Cymru a Lloegr: 2 Mawrth 2020 i 10 Ebrill 2020](#)'.

<sup>7</sup> ONS (3 Gorffennaf 2020), '[Marwolaethau yn ymwneud â COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)](#)', ffigur 5.



preswylwyr cartrefi gofal a fu farw ddementia neu glefyd Alzheimer.<sup>8</sup> Mae bylchau data'n parhau yng Nghymru ac ni fu'n bosibl dadansoddi marwolaethau ar gyfer yr holl nodweddion gwarchoddedig.

### Derbyniadau a phrofi

6. Yng nghamau cyntaf y pandemig, cyfarwyddodd Llywodraeth Cymru Fyrddau Iechyd Lleol i ryddhau pob claf yr ystyrir ei fod yn ffit yn feddygol fel y gallent ryddhau gallu'r GIG i drin cleifion COVID-19.<sup>9</sup> Rhyddhawyd rhai unigolion o ysbytai i ofal preswyl ond nid oedd yn ofynnol profi cyn eu derbyn.<sup>10</sup> Mae hyn wedi'i nodi fel ffactor posib wrth ledaenu coronafeirws i gartrefi gofal.<sup>11</sup> Ers hynny, mae Llywodraeth Cymru wedi cyhoeddi canllawiau sy'n ei gwneud yn ofynnol profi pob unigolyn sy'n cael ei ryddhau o'r ysbyty i gartrefi gofal, ni waeth a gawsant eu derbyn i'r ysbyty gyda COVID-19 ai peidio.<sup>12</sup> Er gwaethaf gwelliannau mwy diweddar mewn capasiti profi,<sup>13</sup> mae darparwyr wedi parhau i riportio anawsterau ar lawr gwlad ac oedi cyn cael canlyniadau.<sup>14</sup>
7. Gall gofynion i breswylwyr ynysu yn absenoldeb profion neu ganlyniadau wedi'u cadarnhau gael effaith sylweddol ar eu hiechyd meddwl a chorfforol. Dywedodd un rheolwr cartref gofal yng Nghymru fod ynysu yn cael "effaith enfawr ar iechyd a lles meddwl", gan arwain at lai o symudedd a phobl yn bwyta ac yn yfed llai.<sup>15</sup>

### Cyfarpar Diogelu Personol (PPE)

8. Roedd adroddiadau eang o fynediad annigonol i PPE mewn cartrefi gofal yn ystod ton gyntaf y pandemig.<sup>16</sup> Mae Llywodraeth Cymru yn gyfrifol am ddarparu

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<sup>8</sup> ONS (3 Gorffennaf 2020), ['Marwolaethau yn ymwneud â COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)'](#).

<sup>9</sup> Llywodraeth Cymru ac Iechyd Cyhoeddus Cymru (Ebrill 2020), ['Gofynion Gwasanaeth Rhyddhau Ysbyty COVID-19 \(Cymru\)'](#).

<sup>10</sup> Gweler e.g. Bell, D. et al. (29 Awst 2020), ['Marwolaethau COVID-19 a gofal tymor hir: cymhariaeth yn y DU'](#), Rhwydwaith Polisi Gofal Hirdymor Rhyngwladol.

<sup>11</sup> Ibid.

<sup>12</sup> Llywodraeth Cymru (7 Mai 2020), ['Polisi profi cartrefi gofal' \[cyrchwyd 12 Hydref\]](#).

<sup>13</sup> Mae Llywodraeth Cymru wedi ymrwmo i brofi preswylwyr a staff cartrefi gofal yn rheolaidd. Llywodraeth Cymru (2 Mai 2020), ['Datganiad ysgrifenedig: Profi coronafirws mewn cartrefi gofal'](#) a Llywodraeth Cymru (7 Mai 2020), ['Polisi profi cartrefi gofal' \[cyrchwyd 12 Hydref\]](#).

<sup>14</sup> Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), ['Lleisiau cartrefi gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19'](#). Gwelwyd tystiolaeth o'r pwynt hwn hefyd yn ein hymgysylltiad rhanddeiliaid ein hunain.

<sup>15</sup> Ibid.

<sup>16</sup> Senedd Cymru, Pwyllgor Iechyd a Gofal Cymdeithasol, ['Ymchwiliad i effaith achosion Covid-19, a'i reolaeth; ar iechyd a gofal cymdeithasol yng Nghymru: adroddiad 1'](#), Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), ['Lleisiau cartrefi gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19'](#); gweler hefyd Jones-Berry, S. (6 Mai 2020), ['Dim masgiau PPE ar ôl ar gyfer cartrefi gofal'](#)

cyflenwadau PPE i awdurdodau lleol, ac mae cyfarwyddwyr gwasanaethau cymdeithasol yn rheoli ac yn cydlynu dosbarthiad i ddarparwyr gofal yn eu hardaloedd.<sup>17</sup> Fe ganfu ein hymgyssylltiad â rhanddeiliaid fod darparwyr gofal yn cael anawsterau wrth gael PPE digonol yn ystod camau cynnar y pandemig.<sup>18</sup> Rydym felly yn croesawu cyhoeddiad diweddar Llywodraeth Cymru sy'n ailddatgan eu hymrwymiad i ddarparu PPE am ddim i gartrefi gofal, ac yn nodi ymagwedd Cynllun Gweithredu Cartrefi Gofal bod cytundeb lefel gwasanaeth wedi'i roi ar waith rhwng Cymdeithas Llywodraeth Leol Cymru a Partneriaeth Cydwasanaethau GIG Cymru i ddarparu PPE ar gyfer gofal cymdeithasol o fewn ardaloedd awdurdodau lleol, gan gynnwys darparwyr preifat, annibynnol a thrydydd sector.<sup>19</sup>

### Tynnu gofal iechyd yn ôl

9. Ail-flaenoriaethwyd adnoddau gofal iechyd yn ystod y don gyntaf i ymdopi ag effaith uniongyrchol y pandemig, gan arwain at dynnu meddygon teulu a gwasanaethau gofal iechyd arferol eraill o gartrefi gofal.<sup>20</sup> Mae tystiolaeth yn awgrymu bod hyn wedi cael effaith ehangach ar iechyd preswylwyr, gan gyfrannu o bosibl at nifer y marwolaethau 'gormodol' yn y cyfnod hwn.<sup>21</sup>
10. Daeth adroddiadau hynod bryderus i'r amlwg bod hysbysiadau 'peidiwch â dadebru' yn cael eu gweithredu mewn ffordd gyffredinol i gynlluniau gofal pobl hŷn ac anabl heb ymgynghori.<sup>22</sup> Yn dilyn hynny, cyhoeddodd y Prif Swyddog Meddygol a'r Prif Swyddog Nyrsio lythyr ar y cyd yn nodi na ddylai oedran, anabledd neu

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[na staff gofal cartref](#)', NursingStandard; a Savage, M. (9 Mai 2020), '[Mae cartrefi gofal y DU yn sgrialu i brynu eu PPE eu hunain wrth i ddanfoniadau cenedlaethol fethu](#)', The Guardian.

<sup>17</sup> Gweler Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Leisiau cartrefi gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

<sup>18</sup> Ibid.

<sup>19</sup> Llywodraeth Cymru (2020), '[Cynllun Gweithredu Cartrefi Gofal: Crynodeb o'r Cynnydd](#)'.

<sup>20</sup> Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Care Home Voices: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'. Amnest Rhyngwladol (Hydref 2020), '[Fel eu bod yn Aberthadwy: methiant Llywodraeth y DU i amddiffyn pobl hŷn mewn cartrefi gofal yn ystod pandemig Covid-19](#)', t. 23; Cymdeithas Alzheimer's (13 Mai 2020), '[Cartrefi gofal 'wedi'u gadael i'w hamddiffyn eu hunain' yn erbyn coronafeirws](#)'.

<sup>21</sup> Bell, D. et al. (29 Awst 2020), '[Marwolaethau COVID-19 a gofal tymor hir: cymhariaeth yn y DU](#)', Rhwydwaith Polisi Gofal Hirdymor Rhyngwladol. Rydym yn trafod yr effeithiau'n fanylach yn yr adran ar yr hawl i iechyd.

<sup>22</sup> Newyddion BBCs (2020) '[Coronafeirws: Ymddiheuriad meddygfa meddygon teulu dros ffurflen 'peidiwch â dadebru](#)'. Gweler hefyd: [Datganiad](#) OPC/EHRC (Gorffennaf 2020). Gweler hefyd: Senedd Cymru, Pwyllgor Iechyd a Gofal Cymdeithasol (Gorffennaf 2020) '[Ymchwiliad i effaith achosion Covid-19, a'i reolaeth; ar iechyd a gofal cymdeithasol yng Nghymru: adroddiad 1](#)'

gyflyrau tymor hir fyth fod yn unig reswm dros gyhoeddi gorchymyn 'peidiwch â dadebru' yn erbyn dymuniadau unigolyn.<sup>23</sup>

## Cyfyngiadau ar ymweliadau

11. Rhoddwyd cyfyngiadau cyffredinol ar ymweliadau â chartrefi gofal yn ystod ton gyntaf y pandemig, a godwyd dim ond pan ysgrifennodd Llywodraeth Cymru at gartrefi gofal ar 5 Mehefin yn cynghori ar sut y gallant hwyluso ymweliadau awyr agored a chyhoeddwyd canllawiau ar 25 Mehefin.<sup>24</sup> Roedd y canllawiau i gartrefi gofal yn darparu mwy o fanylion am ystyriaethau ar gyfer hwyluso ymweliadau awyr agored, a chyngor i hwyluso ymweliadau dan do mewn amgylchiadau eithriadol ac ar seiliau tosturiol. Rydym yn croesawu datganiadau Gweinidogol diweddar a chyngor Llywodraeth Cymru i gartrefi gofal y gwneir unrhyw benderfyniadau i gyfyngu ar ymweliadau dim ond pan fydd hynny'n hollol angenrheidiol a dylent gynnwys timau amlasiantaethol.<sup>25</sup> Rydym yn dal i bryderu, fodd bynnag, fod cyfyngiadau coronafeirws lleol yn arwain at neu y byddant yn arwain at ataliadau cyffredinol o ymweliadau â chartrefi gofal ar draws y meysydd hynny.

## Y fframwaith cydraddoldeb a hawliau dynol

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12. Fe ddaw'r fframwaith cydraddoldeb a hawliau dynol ar gyfer cartrefi gofal yn ystod y pandemig o Ddeddf Cydraddoldeb 2010, Deddf Hawliau Dynol 1998, cytuniadau a darpariaethau hawliau dynol rhyngwladol mewn deddfwriaeth iechyd a gofal cymdeithasol. Bydd llawer o'r materion sydd wedi codi mewn cartrefi gofal yn ymwneud cynnwys hawliau sy'n gorgyffwrdd.

## Deddf Cydraddoldeb 2010

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13. Mae Deddf Cydraddoldeb 2010 ('y Ddeddf Cydraddoldeb') yn amddiffyn unigolion rhag gwahaniaethu ac yn hyrwyddo cymdeithas decach a mwy cyfartal. Er bod COVID-19 yn gosod heriau iechyd cyhoeddus digynsail, nid yw'r Ddeddf Cydraddoldeb wedi'i diwygio na'i diddymu. Felly rhaid i bob un sydd â dyletswydd ac sydd â rhwymedigaethau o dan y Ddeddf Cydraddoldeb barhau i weithredu'n gyfreithlon, gan gymryd y camau angenrheidiol i atal gwahaniaethu anghyfreithlon a darparu gwasanaethau ag anghenion defnyddwyr mewn golwg.

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<sup>23</sup> Prif Swyddog Meddygol a Phrif Swyddog Nyrsio (17 Ebrill 2020). ['Llythyr ar y cyd gan y Prif Swyddog Meddygol a'r Prif Swyddog Nyrsio ar hysbysiadau "peidiwch â dadebru"'](#).

<sup>24</sup> Llywodraeth Cymru (2020) [Datganiad Ysgrifenedig Ymweliadau â chartrefi gofal: arweiniad i ddarparuwr](#)

<sup>25</sup> Llywodraeth Cymru (2020): [diweddariad ar ymweld â chartrefi gofal](#)

## Nodweddion gwarchoddedig

14. Mae'r Ddeddf Cydraddoldeb yn amddiffyn pobl rhag gwahaniaethu ar sail naw nodwedd warchoddedig: oedran, anabledd, ailbennu rhywedd, priodas a phartneriaeth sifil, beichiogrwydd a mamolaeth, hil, crefydd neu gred, rhyw a chyfeiriadedd rhywiol.<sup>26</sup> Bydd y mwyafrif o breswylwyr cartrefi gofal yn bodloni diffiniad y Ddeddf Cydraddoldeb o anabledd.<sup>27</sup> Bydd y mwyafrif mewn grwpiau oedran hŷn, er bod nifer o bobl oed gweithio a phobl ifanc iau anabl hefyd yn byw yn y lleoliadau hyn.

## Atal gwahaniaethu

15. Mae'r Ddeddf Cydraddoldeb yn gwahardd gwahaniaethu uniongyrchol (lle mae rhywun yn cael ei drin yn wahanol oherwydd nodwedd warchoddedig) a gwahaniaethu anuniongyrchol (lle mae polisi'n berthnasol 'yn niwtral' i bob grŵp ond yn rhoi grŵp penodol dan anfantais). Ni ellir cyfiawnhau gwahaniaethu uniongyrchol (ac eithrio gwahaniaethu ar sail oedran) ac mae bob amser yn anghyfreithlon os nad oes eithriad penodol yn berthnasol.<sup>28</sup> Gellir cyfiawnhau gwahaniaethu anuniongyrchol (ac felly byddai'n gyfreithlon), ond dim ond os yw'n ffordd gymesur o gyflawni nod cyfreithlon.<sup>29</sup>
16. Mae'r Ddeddf hefyd yn gwahardd gwahaniaethu sy'n deillio o anabledd (lle mae person anabl yn cael ei drin yn anffafriol - yn hytrach nag yn llai ffafriol nag un arall - neu'n cael ei roi dan anfantais oherwydd rhywbeth sy'n ymwneud â'i anabledd). Dim ond os yw'n ffordd gymesur o gyflawni nod cyfreithlon y mae gwahaniaethu sy'n deillio o anabledd yn gyfreithlon.<sup>30</sup>
17. Mae'n ddyletswydd ar gyflogwyr, darparwyr gwasanaeth a'r rheini sy'n cyflawni swyddogaethau cyhoeddus i wneud addasiadau rhesymol fel y gall pobl anabl

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<sup>26</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (8 Ionawr 2019), '[Nodweddion gwarchoddedig](#)' [cyrchwyd 7 Hydref 2020].

<sup>27</sup> Mae adran 6 y Ddeddf Cydraddoldeb yn diffinio anabledd fel nam corfforol neu feddyliol sy'n cael effaith niweidiol sylweddol a hirdymor ar eich gallu i gyflawni gweithgareddau arferol o ddydd i ddydd. Bydd llawer o bobl hŷn mewn gofal preswyl yn bodloni'r diffiniad hwn. Er enghraifft, mae Age UK yn nodi bod amcangyfrif o 70 y cant o bobl mewn cartrefi gofal yn y DU yn byw â dementia, 75 y cant â cholled clyw a 60 y cant â chyflyrau iechyd meddwl. Age UK (Mai 2019), '[Bywyd diweddarach yn y Deyrnas Unedig 2019](#)'.

<sup>28</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (1 Medi 2014), '[Deddf Cydraddoldeb 2010: canllawiau cryno ar wasanaethau, swyddogaethau cyhoeddus a chymdeithasau](#)' [cyrchwyd 8 Hydref 2020].

<sup>29</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (25 Tachwedd 2019), '[Beth yw gwahaniaethu uniongyrchol ac anuniongyrchol?](#)' [Cyrchwyd 8 Hydref 2020].

<sup>30</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (18 Chwefror 2020), '[Gwahaniaethu ar sail anabledd](#)' [cyrchwyd ar 8 Hydref 2020].

gael mynediad at wasanaethau, i'r graddau y mae'n rhesymol ymarferol, mor hawdd â phobl nad ydynt yn anabl.<sup>31</sup> Mae tair rhan i'r ddyletswydd:

- **Newid polisi neu'r ffordd y mae rhywbeth yn cael ei wneud** - er enghraifft, newid y ffordd y darperir gofal i rywun sydd ag anghenion gwahanol i breswylwyr eraill. Mae hyn yn cynnwys darparu gwybodaeth yn fformat hygyrch
- **Gwneud newidiadau i'r amgylchedd adeiledig** - er enghraifft, sicrhau bod lleoedd cyhoeddus yn hygyrch i'r holl breswylwyr a bod addasiadau angenrheidiol wedi'u gwneud ar gyfer preswylwyr unigol
- **Darparu cymhorthion ategol a gwasanaethau** - er enghraifft, cyflwyno cyfarpar newydd megis dolen glyw, neu darparu gymorth ychwanegol (gwasanaethau ategol) lle mae rhywun arall yn cael ei ddefnyddio i gynorthwyo'r person anabl, megis darllenwydd, cyfieithydd iaith arwyddion neu weithiwr Cymorth, a darparu gwybodaeth mewn fformat hygyrch fel print bras neu sain. Rhaid peidio â throsglwyddo costau addasiad rhesymol i'r ddefnyddiwr gwasanaeth.

18. Mae tystiolaeth bod rhai pobl hŷn ac anabl mewn cartrefi gofal yn cael eu rhoi mewn mwy o berygl o niwed gan benderfyniadau a gymerir mewn ymateb i goronafeirws. Er enghraifft, mae risg o drosglwyddo asymptomatig os mai'r polisi yw defnyddio PPE gyda thriogion symptomatig yn unig.<sup>32</sup> Er y byddai hyn yn effeithio ar yr holl breswylwyr (a staff), efallai mai'r rhai sydd mewn mwy o berygl o haint neu salwch difrifol, megis pobl â dementia<sup>33</sup> a'r rhai o leiafrifoedd ethnig,<sup>34</sup> a fyddai dan anfantais arbennig. Gallai'r grwpiau hyn hefyd gael eu heffeithio'n anghymesur gan gapasiti a pholisïau profi cyfyngedig sy'n caniatáu derbyniadau i gartrefi gofal heb brofi effeithiol.

19. Yn ogystal â'r risgiau o'r feirws ei hun, mae penderfyniadau i reoli'r ymlediad yn debygol o effeithio ar bobl â nodweddion gwarchoddedig yn wahanol. Er enghraifft, gallai gorfodi ynysu a phrofi beri gofid arbennig i rywun ag anabledau dysgu neu

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<sup>31</sup> Ibid.

<sup>32</sup> Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Lleisiau cartrefi gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

<sup>33</sup> Mae dementia a chlefyd Alzheimer's ymhlith y cyflyrau sylfaenol sy'n effeithio ar y gyfradd marwolaethau ar gyfer Covid-19. Raleigh, V. (19 Awst 2020), '[Marwolaethau o Covid-19 \(coronafeirws\): sut maent yn cael eu cyfrif a beth maent yn ei ddangos?](#)', Cronfa'r Brenin.

<sup>34</sup> Mae tystiolaeth ehangach ledled Cymru a Lloegr yn awgrymu bod pobl o rai grwpiau ethnig mewn mwy o risg o Covid-19, gweler ONS (7 Mai 2020), '[marwolaethau cysylltiedig â Choronafeirws \(COVID-19\) yn ôl grŵp ethnig, Cymru a Lloegr: 2 Mawrth 2020 i 10 Ebrill 2020](#)'.

awtistiaeth a'r rhai â dementia.<sup>35</sup> Yn yr un modd, gall PPE achosi problemau i rai grwpiau - er enghraifft y rhai â cholled clyw sy'n dibynnu ar ddarllen gwefusau, a phobl â dementia a allai fod yn ofidus os na allant ddarllen ciwiau emosiynol trwy fwgwd.<sup>36</sup>

### **Dyletswydd cydraddoldeb y sector cyhoeddus (PSED)**

20. Mae'r PSED yn ceisio prif ffrydio ystyriaethau cydraddoldeb wrth i awdurdodau cyhoeddus wneud penderfyniadau o ddydd i ddydd.<sup>37</sup> Mae'r ddyletswydd yn ei gwneud yn ofynnol i awdurdodau cyhoeddus roi sylw dyledus yn barhaus i'r angen i (a) ddileu gwahaniaethu anghyfreithlon, (b) hyrwyddo cyfle cyfartal ac (c) meithrin cysylltiadau da rhwng y rhai sy'n rhannu nodweddion gwarchoddedig a'r rhai nad ydynt yn eu rhannu.<sup>38</sup> Yng nghyd-destun gofal cymdeithasol, mae'r PSED yn berthnasol i awdurdodau cyhoeddus (megis adrannau'r Llywodraeth, awdurdodau lleol a chyrrff y GIG) a'r rhai sy'n arfer swyddogaethau cyhoeddus (er enghraifft lle mae awdurdod lleol yn contractio gwasanaeth allan).<sup>39</sup>
21. Mae rhoi sylw dyledus i hyrwyddo cydraddoldeb yn cynnwys: dileu neu leihau anfanteision y mae pobl yn eu dioddef oherwydd eu nodweddion gwarchoddedig; cymryd camau i ddiwallu anghenion pobl o grwpiau gwarchoddedig lle mae'r rhain yn wahanol i anghenion pobl eraill, gan gynnwys ystyried anabledd; ac annog pobl o grwpiau gwarchoddedig i gymryd rhan mewn bywyd cyhoeddus neu mewn gweithgareddau eraill lle mae eu cyfranogiad yn anghymesur o isel.<sup>40</sup> Mae meithrin cysylltiadau da yn golygu mynd i'r afael â rhagfarn a hyrwyddo dealltwriaeth rhwng pobl o wahanol grwpiau. Gall cydymffurfio â'r ddyletswydd gynnwys trin rhai pobl yn fwy ffafriol nag eraill.
22. Er mwyn cydymffurfio â'r ddyletswydd, dylai awdurdodau cyhoeddus a darparwyd gofal asesu effaith polisïau wrth iddynt gael eu datblygu a monitro'r effaith

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<sup>35</sup> Cymdeithas Alzheimer's (2020), '[Sut yr effeithiwyd ar gartrefi gofal yn ystod y pandemig coronafeirws](#)' [cyrchwyd 9 Hydref 2020]; Cymdeithas Geriatreg Prydain (2020), '[COVID-19: Rheoli'r pandemig COVID-19 mewn cartrefi gofal i bobl hŷn](#)' [cyrchwyd 12 Hydref].

<sup>36</sup> Ers hynny mae rhai cartrefi gofal wedi darparu PPE gyda phaneli clir i oresgyn y materion hyn. Gweler Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Lleisiau Cartrefi Gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

<sup>37</sup> Cymdeithas Alzheimer's (2020), '[Sut yr effeithiwyd ar gartrefi gofal yn ystod y pandemig coronafeirws](#)' [cyrchwyd 9 Hydref 2020].

<sup>38</sup> [Deddf Cydraddoldeb 2010](#), a.149.

<sup>39</sup> Mae rhagor o wybodaeth ar gael yn ein canllaw technegol ar y PSED. Comisiwn Cydraddoldeb a Hawliau Dynol (19 Chwefror 2019), '[Canllawiau technegol y Ddeddf Cydraddoldeb](#)'.

<sup>40</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (20 Ebrill 2020), '[Dyletswydd Cydraddoldeb y Sector Cyhoeddus](#)' [cyrchwyd 9 Hydref 2020].

wirioneddol wrth iddynt gael eu gweithredu.<sup>41</sup> Dylid gwneud pob ymdrech i gynnwys pobl mewn penderfyniadau sy'n effeithio arnynt, a pho fwyaf arwyddocâd y penderfyniad, y mwyaf ddylai'r ymdrech fod.<sup>42</sup> Mae'r camau hyn yn hanfodol bwysig i atal gwahaniaethu, hyrwyddo cydraddoldeb a mynd i'r afael ag anfantais, a chefnogi diwylliant o dryloywder ac atebolrwydd.<sup>43</sup>

23. Dylai asesiadau gael eu seilio ar y dystiolaeth orau sydd ar gael. Os nad oes gan awdurdodau cyhoeddus a darparwyr gofal y dystiolaeth sydd ei hangen arnynt i gyflawni'r ddyletswydd rhaid iddynt gymryd camau i lenwi'r bylchau, gan gynnwys casglu ffynonellau data newydd a chomisiynu cyngor neu ddadansoddiad allanol. Lle amharwyd ar ddulliau casglu data arferol yn ystod y pandemig, dylai awdurdodau cyhoeddus arloesi i ddod o hyd i ddewisiadau amgen.<sup>44</sup> Gall cynnwys defnyddwyr gwasanaeth a grwpiau eraill yr effeithir arnynt hefyd fod yn ffordd allweddol o ddeall yr effaith ar gydraddoldeb a'r anfanteision y mae gwahanol grwpiau yn eu hwynebu.
24. Mae'n bwysig wrth ddiwallu'r PSED i ystyried effaith gronnol cyfres o benderfyniadau a all ymddangos ar eu pennau eu hunain yn gymharol fach ond sy'n cyd-daro i greu problem ddifrifol. Er enghraifft, o'u cymryd gyda'i gilydd, gall cyfyngiadau ar ymweliadau teulu, newidiadau mewn arferion gofal arferol a llai o fynediad at wasanaethau gofal sylfaenol gael effaith sylweddol ar iechyd corfforol a meddyliol unigolion ac effaith anghymesur ar rai grwpiau.<sup>45</sup>
25. Nid yw'n glir o'r dystiolaeth sydd ar gael sut y daethpwyd i rai penderfyniadau cenedlaethol, rhanbarthol a lleol ynghylch yr ymateb i COVID-19 mewn cartrefi gofal ac a ystyriwyd yr effaith ar gydraddoldeb. Efallai fod hyn wedi arwain at fethiannau i gydymffurfio â'r PSED. Rydym yn pryderu a yw data digonol yn cael

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<sup>41</sup> Mae rhagor o wybodaeth ar gael yn ein canllaw technegol ar y PSED. Comisiwn Cydraddoldeb a Hawliau Dynol (19 Chwefror 2019), '[Canllawiau technegol y Ddeddf Cydraddoldeb](#)'.

<sup>42</sup>Comisiwn Cydraddoldeb a Hawliau Dynol (19 Chwefror 2019), '[Canllawiau technegol y Ddeddf Cydraddoldeb](#)', para 5.27.

<sup>43</sup> Mae rhwymedigaethau i adrodd ar sut y cydymffurfiwyd â'r PSED yn berthnasol ledled Cymru, Lloegr a'r Alban, er bod y gofynion penodol yn wahanol ym mhob gwlad. Comisiwn Cydraddoldeb a Hawliau Dynol (20 Ebrill 2020), '[Dyletswydd Cydraddoldeb y Sector Cyhoeddus](#)' [cyrchwyd 9 Hydref 2020].

<sup>44</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (2020) '[Ailadeiladu Cymru mwy cyfartal a thecach: canolbwyntio ar effaith anghyfartal y pandemig coronafeirws](#)'. EHRC (2020) '[Ailadeiladu Cymru mwy cyfartal a thecach: canolbwyntio ar effaith anghyfartal y pandemig coronafeirws](#)'.

<sup>45</sup> Cymdeithas Alzheimer's (2020), '[Sut yr effeithiwyd ar gartrefi gofal yn ystod y pandemig coronafeirws](#)' [cyrchwyd 9 Hydref 2020].

eu casglu i ddeall a lliniaru effeithiau posibl neu wirioneddol fframweithiau polisi parhaus a phenderfyniadau ynghylch darparu gwasanaeth ar bob lefel.<sup>46</sup>

### Y dyletswyddau penodol

26. Mae nifer o ddyletswyddau cydraddoldeb penodol yng Nghymru sy'n cefnogi cyrff i gydymffurfio â'r PSED. Y rhai mwyaf perthnasol yw'r gofynion i ymgysylltu â grwpiau yr effeithir arnynt (rheoliad 5), sicrhau sylfaen dystiolaeth gadarn (rheoliad 7) a chyhoeddi asesiadau o'r effaith ar gydraddoldeb (EIAs) mewn fformat hygyrch (rheoliad 8 (1) (d)). Mae'r gofynion hyn yn dal i fod yn berthnasol yng nghyd-destun coronafeirws.
27. Mae adborth gan ein rhanddeiliaid yn awgrymu bod diffyg ymgysylltu â phobl hŷn ac anabl, ac nad oedd eu lleisiau a'u straeon yn cael eu clywed na'u hadlewyrchu mewn penderfyniadau polisi.<sup>47</sup> Fe wnaethon nhw ddweud wrthym hefyd fod cyfathrebiadau weithiau'n ddryslyd neu'n aneglur, yn wrthgyferbyniol neu'n cael eu cam-amseru.
28. Yn ystod y don gyntaf o goronafeirws, methodd Llywodraeth Cymru â darparu a chyhoeddi asesiadau cadarn o'r effaith ar gydraddoldeb i ddangos bod ei hymagwedd yn gymesur a bod mesurau effeithiol ar waith i liniaru unrhyw effaith wahaniaethol. Mae nifer o asesiadau o'r effaith ar gydraddoldeb ac asesiadau o'r effaith integredig wedi'u cyhoeddi'n ôl-weithredol ers hynny. Er bod croeso i hyn, ac mae'n gwneud gwahaniaeth wrth arddangos sut yr ystyriwyd tystiolaeth briodol a bod mesurau lliniaru addas wedi'u nodi, rydym wedi nodi nifer o themâu cyffredin ar gyfer gwella. Mae'r rhain yn ymwneud â phryd y cawsant eu cyhoeddi, camau lliniaru, gwerthuso ac ymgysylltu. Rydym wedi cynnwys argymhellion yn y meysydd hyn i helpu i wella arfer.

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<sup>46</sup> Ni chynhwyswyd marwolaethau cartrefi gofal mewn adroddiadau swyddogol tan 29 Ebrill, ac ar hyn o bryd, mae'r dadansoddiad diweddaraf o Covid-19 yn y sector gofal hyd at 20 Mehefin 2020. Nid yw adroddiadau'r ONS yn cynnwys data ethnigrwydd na dadansoddiad o anabledd yn ôl math o nam. Gweler Raleigh, V. (19 Awst 2020), '[Marwolaethau o Covid-19 \(coronafirws\): sut maen nhw'n cael eu cyfrif a beth maen nhw'n ei ddangos?](#)', Cronfa'r Brenin; SYG (3 Gorffennaf 2020), '[Marwolaethau yn ymwneud â COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)](#)'; ONS (6 Hydref 2020), '[Marwolaethau a gofrestrir yn wythnosol yng Nghymru a Lloegr, dros dro: wythnos yn dod i ben 25 Medi 2020](#)'.

<sup>47</sup> Ymgysylltu â rhanddeiliaid gan EHRC Cymru.



## Deddf Hawliau Dynol 1998

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29. Mae Deddf Hawliau Dynol 1998 (HRA) yn nodi'r hawliau a'r rhyddid sylfaenol y mae gan bawb hawl iddynt. Mae'n ymgorffori'r Confensiwn Ewropeaidd ar Hawliau Dynol yng nghyfraith ddomestig y DU. Ymhellach, mae Deddf Llywodraeth Cymru 2006 a Deddf Cymru 2017 yn nodi na all Senedd Cymru/Welsh Parliament a Llywodraeth Cymru wneud penderfyniadau na deddfau nad ydynt yn cydymffurfio â deddfwriaeth hawliau dynol.<sup>48</sup> Rhaid i gyrrff cyhoeddus a chyrrff eraill sy'n cyflawni swyddogaethau cyhoeddus<sup>49</sup> beidio â gweithredu mewn ffordd sy'n anghydnaws â'r hawliau a nodir yn yr HRA, p'un a ydynt yn ymwneud â dylunio polisïau a gweithdrefnau neu'n darparu gwasanaethau'n uniongyrchol. Mae hyn yn cynnwys darparwyr cartrefi gofal sy'n darparu gofal a drefnir neu y telir amdano gan yr awdurdod lleol, naill ai'n uniongyrchol neu'n anuniongyrchol, yn rhannol neu'n llawn.<sup>50</sup>
30. Disgrifiwyd hawliau dynol gan cyrrff y Cenhedloedd Unedig fel rhai 'anwahanadwy a chyd-ddibynnol'.<sup>51</sup> Mae hyn yn golygu eu bod yn rhyng-gysylltiedig ac na ellir mwynhau un set o hawliau a rhyddid yn llawn heb eraill. Yn ystod y pandemig coronafeirws, mae'n bwysig i'r Llywodraeth ddeall effaith ehangach penderfyniadau a cheisio amddiffyn ein hystod lawn o hawliau lle bynnag y bo modd.

### Erthygl 2: yr hawl i fywyd

31. Mae'r hawl i fywyd yn 'anwadadwy', sy'n golygu bod rhaid ei chynnal hyd yn oed ar adegau o argyfwng.<sup>52</sup> Mae gan awdurdodau cyhoeddus rwymedigaethau cadarnhaol i amddiffyn bywyd, gan gynnwys dyletswydd i atal marwolaethau y gellir eu hosgoi ac i ymchwilio i farwolaethau y gallai'r Wladwriaeth neu awdurdod cyhoeddus fod yn gyfrifol amdanynt.<sup>53</sup> Dylai awdurdodau cyhoeddus hefyd

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<sup>48</sup> Ymchwil y Senedd (4 Ebrill 2017), '[Yn gryno: canllaw cyflym i hawliau dynol yng Nghymru](#)'.

<sup>49</sup> Diffinnir swyddogaethau cyhoeddus fel 'swyddogaethau o natur gyhoeddus'.

<sup>50</sup> Gweler [Deddf Gofal 2014](#), a. 73.

<sup>51</sup> Gweler e.e. Swyddfa Uchel Gomisiynydd Hawliau Dynol y Cenhedloedd Unedig (heb ddyddiad), '[Beth yw hawliau dynol?](#)' [Cyrchwyd: 12 Hydref 2020].

<sup>52</sup> Cyngor Ewrop (7 Ebrill 2020), '[Parchu democratiaeth, rheolaeth y gyfraith a hawliau dynol yn fframwaith argyfwng glanweithiol COVID-19: pecyn cymorth ar gyfer aelod-wladwriaethau](#)', tt. 4-5.

<sup>53</sup> Mae'r ddyletswydd hon yn aml yn cael ei chyflawni gan gwestau, ymchwiliadau'r heddlu neu ymchwiliadau cyhoeddus.

ystyried yr hawl i fywyd wrth wneud penderfyniadau a allai roi pobl mewn perygl neu effeithio ar eu disgwyliad oes.<sup>54</sup>

32. Efallai fod nifer o benderfyniadau yn yr ymateb i COVID-19 wedi arwain at fethiannau i amddiffyn yr hawl i fywyd yn ddigonol, gan gynnwys penderfyniadau ynghylch rhyddhau o'r ysbyty, derbyniadau i gartrefi gofal, blaenoriaethu profion a mynediad at ofal iechyd a thriniaeth angenrheidiol. Mae grwpiau cynrychioliadol wedi disgrifio sut yr oedd y cyfuniad o benderfyniadau yn yr ymateb i'r pandemig naill ai'n anwybyddu preswylwyr cartrefi gofal neu'n eu trin fel rhai aberthadwy.<sup>55</sup> Yng Nghymru, comisiynodd y Prif Weinidog adolygiad cyflym arbenigol annibynnol â ffocws o'r profiad gweithredol mewn cartrefi gofal rhwng Gorffennaf a Medi a gyhoeddwyd ym mis Hydref 2020.<sup>56</sup>

### **Erthygl 3: rhyddid rhag camdriniaeth**

33. Mae erthygl 3 yn amddiffyn pobl rhag artaith a thriniaeth annynol neu ddiraddiol. Mae'n hawl absoliwt, ac fel yr hawl i fywyd mae'n rhaid ei chynnal bob amser, gan gynnwys mewn argyfyngau. Ni ellir byth defnyddio diffyg adnoddau fel amddiffyniad ar gyfer camdriniaeth.

- Diffinnir artaith fel achos bwriadol o achosi dioddefaint meddyliol neu gorfforol difrifol a chreulon iawn.
- Triniaeth annynol yw'r hyn sy'n achosi dioddefaint corfforol neu feddyliol dwys, gan gynnwys cam-drin corfforol neu seicolegol difrifol mewn lleoliadau iechyd a gofal.<sup>57</sup> Mae'n cynnwys camdriniaeth ac esgeulustod bwriadol a ddiffinnir fel achos bwriadol o achosi dioddefaint meddyliol neu gorfforol difrifol a chreulon iawn.
- Mae triniaeth ddiraddiol yn driniaeth hynod waradwyddus a diurddas. Mae p'un a gyrhaeddir y trothwy hwn yn dibynnu ar nifer o ffactorau, gan gynnwys hyd y driniaeth, ei heffeithiau ac iechyd neu 'fregusrwydd' yr unigolyn. Mae triniaeth ddiraddiol yn cynnwys camdriniaeth ac esgeulustod bwriadol.

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<sup>54</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (15 Tachwedd 2018), '[Erthygl 2: hawl i fywyd](#)' [cyrchwyd 7 Hydref 2020].

<sup>55</sup> Silver Voices (6 Mai 2020), "' Wedi'u hanwybyddu ac yn aberthadwy": beth yw gwerth bywydau hŷn? (briff 30/20) '[heb ei gyhoeddi]. Gweler hefyd Amnest Rhyngwladol (Hydref 2020), '[Fel eu bod yn Aberthadwy: methiant Llywodraeth y DU i amddiffyn pobl hŷn mewn cartrefi gofal yn ystod y pandemig Covid-19](#)' a Chomisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Lleisiau Cartrefi Gofal: Cipolwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

<sup>56</sup> Llywodraeth Cymru (2020), '[Adolygiad cyflym ar gyfer cartrefi gofal mewn perthynas â COVID-19](#)'.

<sup>57</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (15 Tachwedd 2018), '[Erthygl 3: Rhyddid rhag artaith a thriniaeth annynol neu ddiraddiol](#)' [cyrchwyd 7 Hydref 2020].

34. Mae'r Pwyllgor Ewropeaidd er Atal Artaith (CPT) wedi nodi y gellir cannnfod bod amlygiad pobl hŷn i goronafeirws a "lefel eithafol o ddiodefaint" yn anghydnaws â rhwymedigaethau Erthygl 3 Llywodraeth y DU.<sup>58</sup> Mae gan ostyngiadau mewn mynediad at ofal iechyd arferol a chritigol, ac effaith feddyliol a chorfforol ynysu (gan gynnwys oherwydd cyfyngiadau ar ymweliadau a materion ynghylch gallu profi neu oedi) oll oblygiadau yn y cyd-destun hwn. Mae'r CPT yn glir y gall "lefel annigonol o ofal iechyd arwain yn gyflym at sefyllfaoedd sy'n dod o fewn cwmpas y term 'triniaeth annynol a diraddiol'."<sup>59</sup>
35. Mae llai o oruchwyliaeth wrth i arolygiadau gael eu hoedi a chyfyngir ar ymweliadau hefyd yn cynyddu'r risg y bydd toriadau Erthygl 3 ac y bydd cartrefi gofal yn gweithredu fel gwasanaethau caeedig.<sup>60</sup> Mae'r cyngor a'r hyblygrwydd rheoliadol a ddarparwyd gan Arolygiaeth Gofal Cymru yn ystod yr amser hwn wedi chwarae rhan bwysig wrth sicrhau lles preswylwyr.<sup>61</sup>
36. Gallai'r pwysau ar gartrefi gofal yn y cyfnod hwn, y gofid i breswylwyr a'r heriau wrth weithredu rheolaethau heintiau arwain at fwy o ddefnydd o ataliaeth. Fodd bynnag, nid oes unrhyw ddata cadarn ar ataliaeth yn y lleoliadau hyn felly nid yw'n bosibl gwneud asesiad na nodi tueddiadau. Cyfyngu yw unrhyw weithred a gyflawnir gyda'r pwrpas o gyfyngu ar symudiad, rhyddid a/neu gallu unigolyn i weithredu'n annibynnol.<sup>62</sup> Mae'n cynnwys mathau cemegol, mecanyddol a chorfforol o reoli, gorfodi ac ynysu gorfodol. Gallai defnyddio ataliaeth ar bobl mewn cartrefi gofal fod yn driniaeth annynol neu ddiraddiol os nad yw'n gymesur yn y sefyllfa ac yn hollol angenrheidiol i atal niwed.<sup>63</sup> Mae ataliaeth yn fwy tebygol o fod yn driniaeth annynol a diraddiol pan gaiff ei defnyddio ar grwpiau sydd mewn perygl penodol o niwed neu gam-drin.<sup>64</sup>

<sup>58</sup> Cyngor Ewrop (7 Ebrill 2020), '[Parchu democratiaeth, rheolaeth y gyfraith a hawliau dynol yn fframwaith argyfwng glanweithiol COVID-19: pecyn cymorth ar gyfer aelod-wladwriaethau](#)', t.5.

<sup>59</sup> Ibid.

<sup>60</sup> Fe wnaeth Arolygiaeth Gofal Cymru atal arolygiadau arferol ar 16 Mawrth ac ers hynny mae wedi symud i 'gyfnod adfer', gan ddefnyddio ffyrdd pell o weithio cyn belled ag y bo modd. Arolygiaeth Gofal Cymru (2020), '[Gwybodaeth ddiweddaraf am Coronavirus Nofel \(COVID-19\)](#)' [cyrchwyd 9 Hydref 2020].

<sup>61</sup> Llywodraeth Cymru (7 Hydref 2020), '[Adolygiad cyflym ar gyfer cartrefi gofal mewn perthynas â COVID-19](#)'.

<sup>62</sup> EHRC (2019), '[Fframwaith hawliau dynol ar gyfer ataliaeth](#)'. Mae gwahanu sy'n gyfystyr â chyfyngu ar eich hun (a ddiffinnir fel 22 awr y dydd neu'n hwy heb gyswllt dynol ystyrion) yn groes i safonau hawliau dynol fel y'u sefydlwyd gan Reolau Mandela. Swyddfa'r Cenhedloedd Unedig ar Gyffuriau a Throseddau (2015), '[Rheolau Lleiaf Safonol ar gyfer Trin Carcharorion \(Rheolau Nelson Mandela\)](#)'.

<sup>63</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (Mawrth 2019), '[Fframwaith hawliau dynol ar gyfer ataliaeth](#)'.

<sup>64</sup> Ibid.

## Erthygl 5: hawl i ryddid

37. Mae erthygl 5 yn amddiffyn unigolion rhag cael eu cadw'n fympwyol ac yn darparu hawl i herio enghraifft o gadw a allai fod yn anghyfreithlon.<sup>65</sup> Efallai na fydd gan rai pobl sydd angen cymorth, er enghraifft y rhai â dementia, y gallu i wneud penderfyniadau ynghylch eu gofal a'u triniaeth, gan gynnwys penderfyniadau ynghylch a ydynt yn symud i gartref gofal a beth sy'n digwydd pan maent yno - er enghraifft, eu trefniadau ac a ganiateir iddynt adael. Yn yr achosion hyn, gallai cyfyngu ar ryddid yr unigolyn olygu amddifadu rhyddid yn anghyfreithlon os nad oes mesurau diogelwch priodol ar waith.
38. Mae mesurau diogelu ar gyfer amddifadu o ryddid (DoLS) o dan Ddeddf Galluedd Meddyliol 2005 yn ymateb i hyn trwy greu cyfres o wiriadau i sicrhau bod unrhyw gyfyngiadau yn angenrheidiol, yn briodol ac er budd gorau'r unigolyn. Mae'r Ddeddf yn darparu y dylid cefnogi pobl i wneud penderfyniadau cyn belled ag y bo modd, gan gynnwys trwy fynediad at eiriolaeth, ac y dylai unrhyw gyfyngiadau ar eu rhyddid fod yr opsiwn lleiaf cyfyngol sydd ar gael.<sup>66</sup>
39. Gallai rhai mesurau a gyflwynwyd i reoli COVID-19 mewn cartrefi gofal greu cyfyngiadau newydd ar ryddid pobl - er enghraifft gofynion i ynysu, cadw pellter cymdeithasol neu gael profion. Rydym yn pryderu efallai na fydd llunwyr polisi a darparwyr yn ystyried effaith y cyfyngiadau hyn, p'un a oes opsiwn llai cyfyngol a'r hyn sydd er budd gorau'r unigolyn. Yn fwy cyffredinol, rydym yn pryderu y gallai darparwyr fod yn gwyro oddi wrth ofynion DoLS yn ystod y pandemig. Mae'r Llys Gwarchod wedi nodi cwmp "trawiadol a chythryblus" mewn ceisiadau DoLS a gostyngiad sylweddol mewn atgyfeiriadau i wasanaethau eiriolaeth,<sup>67</sup> er ei bod yn werth nodi nad yw hyn wedi trosi'n ostyngiad sylweddol mewn ceisiadau am DoLS i Arolygiaeth Gofal Cymru. Heb gefnogaeth i wneud penderfyniadau, efallai na fydd pobl yn gallu gwneud eu penderfyniadau eu hunain ynghylch gofal a thriniaeth, gan gynnwys cynllunio diwedd oes.

## Erthygl 8: hawl i fywyd preifat a theuluol

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<sup>65</sup> Comisiwn Cydraddoldeb a Hawliau Dynol (30 Tachwedd 2018), '[Erthygl 5: Hawl i ryddid a diogelwch](#)' [cyrchwyd 9 Hydref 2020].

<sup>66</sup> Swyddfa'r Gwarcheidwad Cyhoeddus (2007), '[Deddf Galluedd Meddyliol 2005: Cod Ymarfer](#)', t.19.

<sup>67</sup> Barnwriaeth Cymru a Lloegr (4 Mai 2020), '[Gohebiaeth gan Mr Ustus Hayden, Is-lywydd y Llys Gwarchod, dyddiedig 4 Mai 2020](#)'. Mae'r CQC wedi nodi'n glir bod mesurau diogelu yn parhau mewn grym yn ystod y pandemig, a bod rhaid osgoi amddifadu rhyddid oni bai bod hynny'n hollol angenrheidiol ac yn gymesur i osgoi niwed yn yr achos unigol. CQC (26 Mai 2020), '[Gweithio o fewn y Ddeddf Galluedd Meddyliol yn ystod y pandemig coronafeirws](#)' [cyrchwyd 7 Hydref 2020].

40. Mae erthygl 8 yn amddiffyn yr hawl i barch at fywyd preifat a theuluol, cartref a gohebiaeth.<sup>68</sup> Mae'n cynnwys hawl i gyfanrwydd corfforol a seicolegol<sup>69</sup> ac i greu a chynnal perthnasoedd cymdeithasol.<sup>70</sup> Gall awdurdodau cyhoeddus ymyrryd â'r hawl hon i ddilyn nod cyfreithlon, gan gynnwys amddiffyn iechyd, ond rhaid i unrhyw ymyrraeth fod yn gyfreithlon, yn angenrheidiol ac yn gymesur.<sup>71</sup>
41. Mae cyfyngiadau ar ymweliadau a gofynion i oruchwylio ymweliadau yn debygol o ymyrryd â hawliau Erthygl 8 pobl. Mae'n annhebygol y bydd cyfyngiadau cyffredinol yn cydymffurfio â safonau hawliau dynol. Er y cyflwynwyd y cyfyngiadau hyn i helpu i amddiffyn bywydau ac iechyd preswylwyr cartrefi gofal, dylid pwysu a mesur yr effaith ehangach ar eu hawliau a'u hiechyd yn ofalus.
42. Gallai peidio â gweld teulu a ffrindiau achosi goblygiadau difrifol posibl i iechyd meddwl a chorfforol, yn arbennig dros gyfnod hir.<sup>72</sup> I'r rhai sydd â dementia (sy'n cyfrif am o leiaf 70 y cant o breswylwyr cartrefi gofal yn y DU)<sup>73</sup> gall achosi i sgiliau gwybyddol a sgiliau eraill ddirywio'n gyflym, gan gynnwys sgiliau cyfathrebu a'r gallu i adnabod aelodau'r teulu.<sup>74</sup> Fe glywodd y Cyd-bwyllgor ar Hawliau Dynol dystiolaeth o'r gofid sylweddol yr oedd absenoldeb ymweliadau yn ei achosi i bobl ifanc ag anableddau dysgu ac awtistiaeth.<sup>75</sup> Mae Cymdeithas Geriatreg Prydain wedi rhybuddio am y "risg go iawn" o niwed corfforol oherwydd ynysu.<sup>76</sup> Efallai y bydd preswylwyr cartrefi gofal hefyd yn dibynnu ar aelodau'r teulu i ddarparu

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<sup>68</sup> [Confensiwn Ewropeaidd ar Hawliau Dynol](#), Erthygl 8 (1).

<sup>69</sup> Gweler Llys Hawliau Dynol Ewrop: Osman v UK (Cais rhif 23452/94), para. 128-130; Bevacqua ac S. v Bwlgaria (Cais Rhif 71127/01), para. 65; Sandra Janković v Croatia (Cais Rhif 38478/05), para 45; A v Croatia (Cais Rhif 55164/08), para 60; Söderman v Sweden [GC] (Cais Rhif 5786/08), para 80.

<sup>70</sup> Gweler Llys Hawliau Dynol Ewrop: X. v Gwlad yr Iâ (Cais Rhif 6825/74), tt. 86-87; McFeeley et al. v DU (Cais Rhif 8317/78) para. 82.

<sup>71</sup> [Confensiwn Ewropeaidd ar Hawliau Dynol](#), Erthygl 8 (2). Mae Llys Hawliau Dynol Ewrop wedi dyfarnu er mwyn i unrhyw ymyrraeth yn 'angenrheidiol', rhaid iddi gyfateb i angen cymdeithasol dybryd a bod yn gymesur wrth geisio nod cyfreithlon, Gweler The Sunday Times v DU (Cais Rhif 6538/74), para 59.

<sup>72</sup> Age UK (22 Medi 2020), '[Ymweld mewn cartrefi gofal: ble nawr?](#)'.

<sup>73</sup> Cymdeithas Alzheimer's (Medi 2020), '[Wedi'u Taro gwaethaf: dementia yn ystod coronafeirws](#)', t. 13

<sup>74</sup> Gweler [tystiolaeth ysgrifenedig a gyflwynwyd gan Gymdeithas Alzheimer's \(DEL0115\)](#) i ymchwiliad y Pwyllgor Dethol Iechyd a Gofal Cymdeithasol ar 'Gyflwyno gwasanaethau craidd y GIG a gofal yn ystod y pandemig a thu hwnt'.

<sup>75</sup> Cyd-bwyllgor ar Hawliau Dynol (12 Mehefin 2020), '[Hawliau Dynol ac ymateb y Llywodraeth i COVID-19: Cadw pobl ifanc sy'n awtistig a/neu sydd ag anableddau dysgu yn y ddalfa, pumed adroddiad sesiwn 2019-21](#)'.

<sup>76</sup> Cymdeithas Geriatreg Prydain (30 Mawrth 2020), '[COVID-19: Rheoli'r pandemig COVID-19 mewn cartrefi gofal i bobl hŷn](#)' [cyrchwyd 7 Hydref 2020].

agweddau pwysig ar eu gofal.<sup>77</sup> Er, i rai preswylwyr cartrefi gofal, bod y risg o ddod i gysylltiad â COVID-19 mewn ymweliadau yn gorbwyso'r buddion, mewn llawer o achosion mae rhesymau lles cryf i ganiatáu ymweliadau er mwyn helpu i leihau gofid a sicrhau nad yw anghenion gofal yn cael eu hesgeuluso.<sup>78</sup>

43. Gellir lliniaru'r risgiau sy'n gysylltiedig ag ymweliadau yn sylweddol trwy roi mynediad priodol i ymwelwyr cartrefi gofal at PPE a phroffion rheolaidd (a allai ganiatáu am gyswllt corfforol), a hwyluso ymweliadau awyr agored neu lle gellir cadw pellter cymdeithasol lle bo angen. Byddai'r mesurau hyn hefyd yn helpu i osgoi'r angen am ymweliadau dan oruchwyliaeth. Gall ymagwedd gytbwys amddiffyn yr hawl i fywyd wrth gynnal yr hawl i fywyd preifat a theuluol a'r hawl i iechyd, gan sicrhau nad yw ansawdd bywyd preswylwyr cartrefi gofal yn lleihau.

### **Rhwymedigaethau o dan gyfraith hawliau dynol rhyngwladol**

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44. Mae Llywodraeth y DU wedi llofnodi nifer o gytuniadau hawliau dynol rhyngwladol sy'n rhwymol o dan gyfraith ryngwladol. Nid oes modd gorfodi'r cytuniadau hyn yn uniongyrchol yn llysoedd y DU, ond trwy eu cadarnhau mae Llywodraeth y DU wedi cytuno y bydd eu gofynion yn cael eu hadlewyrchu mewn deddfau, polisi a chanllawiau. Gellir eu defnyddio hefyd i ddehongli'r hawliau a ddiogelir o dan y Ddeddf Hawliau Dynol. Mae'n ofynnol i Lywodraeth Cymru barchu, amddiffyn a chyflawni hawliau dynol a geir mewn cyfraith ryngwladol, sydd yn ymarferol yn golygu ymatal rhag ymyrraeth, sicrhau amddiffyniad rhag camdriniaeth a chymryd camau cadarnhaol i hwyluso eu mwynhad.<sup>79</sup>
45. Rydym yn amlygu dwy hawl allweddol o dan y cytuniadau hyn, y tu hwnt i'r rhai a nodwyd eisoes trwy'r HRA, sy'n arbennig o berthnasol i gartrefi gofal yn ystod coronafeirws: yr hawl i iechyd, a hawl pobl anabl i fyw'n annibynnol. Mae'n ofynnol i'r Lywodraeth barchu, amddiffyn a chyflawni hawliau dynol a geir mewn cyfraith ryngwladol, sydd yn ymarferol yn golygu ymatal rhag camdriniaeth a chymryd camau cadarnhaol i hwyluso eu mwynhad.

### **Ymgorffori cytuniadau rhyngwladol**

46. Mae Llywodraeth Cymru wedi ymgorffori rhai o'r hawliau a ddiogelir mewn cytuniadau rhyngwladol mewn deddfwriaeth ddomestig. Er enghraifft, mae Deddf Gwasanaethau Cymdeithasol a Lles (Cymru) yn ei gwneud yn ofynnol i

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<sup>77</sup> Cymdeithas Alzheimer's (9 Gorffennaf 2020), '[Llythyr agored at y Llywodraeth - caniatáu statws gweithiwr allweddol i ofalwyr teulu](#)'; Age UK (22 Medi 2020), '[Ymweld mewn cartrefi gofal: ble nawr?](#)'.

<sup>78</sup> Cymdeithas Geriatreg Prydain (30 Mawrth 2020), '[COVID-19: Rheoli'r pandemig COVID-19 mewn cartrefi gofal i bobl hŷn](#)' [cyrchwyd 7 Hydref 2020].

<sup>79</sup> [Llywodraeth y DU, \(2006\) 'Deddf Llywodraeth Cymru 2006'](#)

Weinidogion Cymru roi sylw dyledus i Egwyddorion y Cenhedloedd Unedig ar gyfer Pobl Hŷn a'r Confensiwn ar Hawliau Pobl ag Anabledau. Mae meysydd eraill o bolisi Llywodraeth Cymru yn cyfeirio at sut y bydd rhwymedigaethau cytuniad yn cael eu dwyn ymlaen ar lefel ddatganoledig, er enghraifft mae 'Gweithredu ar Anabled: Yr hawl i fframwaith byw'n annibynnol a chynllun gweithredu' Llywodraeth Cymru yn nodi ei gweledigaeth ar gyfer bwrw ymlaen â'r CRPD yng Nghymru.

## Yr hawl i iechyd

47. O dan Erthygl 12 o'r Cyfamod Rhyngwladol ar Hawliau Economaidd, Cymdeithasol a Diwylliannol (ICESCR) mae'n ofynnol i'r Llywodraeth gydnabod hawl pawb i'r 'safon gyraeddadwy uchaf o iechyd corfforol a meddyliol', gan gynnwys trwy drin a rheoli clefydau epidemig.<sup>80</sup> Mae Pwyllgor y Cenhedloedd Unedig ar Hawliau Economaidd, Cymdeithasol a Diwylliannol (CESCR), sy'n adolygu cydymffurfriad gwladwriaethau ag ICESCR, wedi amlygu'r ffaith bod gan yr hawl i iechyd gysylltiad agos â gwireddu hawliau eraill, gan gynnwys yr hawl i fywyd a'r gwaharddiad ar artaith, triniaeth annynol neu ddiraddiol.<sup>81</sup>
48. Wrth gyflawni'r hawl i iechyd, mae CESCR wedi pwysleisio pwysigrwydd deall rhyddid a hawliau, megis yr hawl i fod yn rhydd rhag artaith a thriniaeth feddygol nad yw'n gydsyniol, a'r hawl i system amddiffyn iechyd sy'n rhoi cyfle cyfartal i fwynhau'r safon iechyd uchaf y gellir ei chyrraedd.<sup>82</sup> Mae CESCR hefyd wedi amlygu'r hawl i ofal iechyd amserol a phriodol<sup>83</sup> a'r angen i sicrhau bod cyfleusterau, nwyddau a gwasanaethau gofal iechyd ar gael ar lefel ddigonol, eu bod o ansawdd da, eu bod yn hygyrch i bawb heb wahaniaethu ac yn sensitif i wahanol ddiwylliannau.<sup>84</sup>
49. Mae Ysgrifennydd Cyffredinol y Cenhedloedd Unedig wedi nodi'n glir bod rhaid i benderfyniadau anodd ynghylch darparu triniaeth i bobl hŷn gael eu llywio gan 'ymrwymiad i urddas a'r hawl i iechyd', y mae gan bob bywyd werth cyfartal oddi

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<sup>80</sup> [Cyfamod Rhyngwladol ar Hawliau Economaidd, Cymdeithasol a Diwylliannol](#), Erthygl 12.

<sup>81</sup> Pwyllgor ar Hawliau Economaidd, Cymdeithasol a Diwylliannol (2000), [CESCR Sylw Cyffredinol Rhif 14: Yr Hawl i'r Safon Iechyd Cyrhaeddadwy Uchaf \(Erth. 12\)](#), para. 3

<sup>82</sup> Pwyllgor ar Hawliau Economaidd, Cymdeithasol a Diwylliannol (2000), [CESCR Sylw Cyffredinol Rhif 14: Yr Hawl i'r Safon Iechyd Cyrhaeddadwy Uchaf \(Erth. 12\)](#), para. 8. Mae paragraff 19 hefyd yn pwysleisio 'mynediad cyfartal i ofal iechyd a gwasanaethau iechyd'. Mae Erthygl 2 [ICESCR](#) yn nodi bod Gwladwriaethau sy'n Barti 'yn ymrwymo i warantu y bydd yr hawliau a enwir yn y Cyfamod presennol yn cael eu harfer heb wahaniaethu o unrhyw fath'.

<sup>83</sup> Pwyllgor ar Hawliau Economaidd, Cymdeithasol a Diwylliannol (2000), [CESCR Sylw Cyffredinol Rhif 14: Yr Hawl i'r Safon Iechyd Cyrhaeddadwy Uchaf \(Erth. 12\)](#), para. 11.

<sup>84</sup> Ibid., paragraffau. 12 (a), (b), (c) a (d).

tano.<sup>85</sup> Gall polisïau i'r gwrthwyneb, gan gynnwys cyfyngiadau cyffredinol ar ofal critigol a defnyddio hysbysiadau 'peidiwch â dadebru' heb gydsyniad, dorri'r hawl i beidio â gwahaniaethu o dan yr ECHR a ddarllenir ar y cyd â'r hawl i fywyd.<sup>86</sup> Mae Ysgrifennydd Cyffredinol y Cenhedloedd Unedig hefyd wedi pwysleisio, hyd yn oed pan yw gwasanaethau iechyd nad ydynt yn gysylltiedig â COVID-19 yn cael eu lleihau, mae'r hawl i iechyd yn mynnu bod pobl hŷn yn parhau i dderbyn gofal iechyd a chymdeithasol integredig, gan gynnwys gofal lliniarol, adsefydlu a mathau eraill o ofal.<sup>87</sup>

50. Yn ystod ton gyntaf y pandemig, roedd mynediad at ofal iechyd nad oedd yn uniongyrchol gysylltiedig â choronafeirws wedi'i gyfyngu ar gyfer miliynau o gleifion pan ddargyfeiriwyd staff a chyllid i ddiwallu anghenion y rhai a oedd yn ddifrifol wael gyda COVID-19.<sup>88</sup> Mewn cartrefi gofal, mae'n debygol bod gostyngiad mewn mynediad at ofal iechyd a llai o ddiagnosis o gyflyrau newydd<sup>89</sup> wedi cyfrannu at y nifer uchel o farwolaethau 'gormodol' yn y cyfnod hwn.<sup>90</sup> Mae tynnu gwasanaethau iechyd craidd yn her uniongyrchol i fwynhad hawl preswylwyr i iechyd, a dylid ei osgoi tra bo'r pandemig yn parhau trwy ganiatáu am asesiadau a thriniaeth wyneb yn wyneb lle mae'n bosibl, gan ddefnyddio PPE a mesurau eraill i reoli haint.

51. Mae gostyngiad mewn mynediad at ofal iechyd ar gyfer y boblogaeth ehangach yn peryglu dirywiad mewn safonau iechyd a allai arwain at fwy o bobl hŷn ac anabl yn gweld angen gofal preswyl yn y dyfodol.

### **Yr hawl i fyw'n annibynnoli**

52. Mae'n ofynnol o dan Erthygl 19 Confensiwn y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau i Gymru barchu, amddiffyn a chyflawni'r hawl i fyw'n annibynnol fel rhan o'r gymuned. Mae hon yn hawl ganolog sy'n sail i lawer o hawliau eraill. Mae'n golygu bod rhaid i Lywodraeth Cymru sicrhau y gall pobl

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<sup>85</sup> Y Cenhedloedd Unedig (Mai 2020), '[Briff Polisi: Effaith COVID-19 ar bobl hŷn](#)', t. 3.

<sup>86</sup> [Confensiwn Ewropeaidd ar Hawliau Dynol](#), Erthygl 14 ac Erthygl 2.

<sup>87</sup> Y Cenhedloedd Unedig (Mai 2020), '[Briff Polisi: Effaith COVID-19 ar bobl hŷn](#)', t.6.

<sup>88</sup> Gweler e.e. Pigott, P. (6 Hydref 2020) '[Covid yng Nghymru: Mae rhestrau llawdriniaeth arferol wedi cynyddu chwe gwaith](#)', Newyddion BBC.

<sup>89</sup> Ymgysylltu â rhanddeiliaid gan EHRC Cymru.

<sup>90</sup> Yn 2020, hyd at 12 Mehefin, bu 1,210 o farwolaethau 'gormodol' mewn cartrefi gofal yng Nghymru, o'i gymharu â'r un cyfnod yn 2019. SYG (3 Gorffennaf 2020), '[Yr holl ddata ynghylch Marwolaethau yn ymwneud â COVID-19 yn y sector gofal, Cymru a Lloegr: marwolaethau yn digwydd hyd at 12 Mehefin 2020 ac wedi'u cofrestru hyd at 20 Mehefin 2020 \(dros dro\)](#)', Tabl 1. Bu farw cyfanswm o 4,428 o breswylwyr cartrefi gofal yng Nghymru rhwng 1 Ionawr a 12 Mehefin 2020 (gan gynnwys marwolaethau sy'n gysylltiedig â COVID -19), o'i gymharu â 3,218 o farwolaethau am yr un cyfnod yn 2019.



anabl fwynhau'r un hunanbenderfyniad ac annibyniaeth â phawb arall.<sup>91</sup> Mae'r hawl i fyw'n annibynnol yn cynnwys cael dewis a rheolaeth dros ble rydych yn byw a gyda phwy rydych yn byw.<sup>92</sup> Dylai Llywodraeth Cymru ddarparu cefnogaeth unigol sy'n galluogi annibyniaeth a chynhwysiant, a sicrhau bod gwasanaethau cymunedol sydd ar gael i'r boblogaeth gyffredinol yn hygyrch i bobl anabl.<sup>93</sup>

53. Mae'r hawl i fyw'n annibynnol yn golygu bod pobl anabl yn cael pob modd i'w galluogi i arfer dewis a rheolaeth dros eu bywydau, gan gynnwys gwneud penderfyniadau ynghylch eu hiechyd, lles, cyfathrebu a pherthnasoedd personol.<sup>94</sup> Oherwydd hynny, gall cyfyngiadau ar ymweliadau â chartrefi gofal gan deulu, ffrindiau a gweithwyr gofal iechyd, cyfyngiadau ar ryddid pobl, a diffyg mynediad at eiriolaeth a gwneud penderfyniadau â chymorth fod yn ymyrraeth â mwynhad pobl anabl o'r hawl i fyw'n annibynnol. Gall cyfyngiadau eraill, megis methu â gadael cartrefi gofal neu gyfyngiadau ar weithgareddau cymdeithasu a hamdden hefyd gael effaith ar fyw'n annibynnol.<sup>95</sup>
54. Mae Pwyllgor y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau wedi datgan bod rhaid sicrhau ystod y gefnogaeth yn y gymuned, gan gynnwys gofal cartref a chymorth personol, a rhaid i wasanaethau adsefydlu 'gael eu sicrhau ac nid eu dirwyn i ben gan eu bod yn hanfodol ar gyfer arfer yr hawliau pobl ag anableddau'.<sup>96</sup> Mae'r Cenhedloedd Unedig wedi rhybuddio y gallai effaith economaidd y pandemig arwain at doriadau yn y dyfodol i ofal yn y gymuned sy'n cyfyngu ar yr hawl i fyw'n annibynnol yn y tymor hwy.<sup>97</sup>

## Ymgorffori CRPD

55. Mae 'Gweithredu ar Anabledd: Yr hawl i fframwaith byw'n annibynnol a chynllun gweithredu' Llywodraeth Cymru yn nodi gweledigaeth ar gyfer bwrw ymlaen â gweithredu'r CRPD yng Nghymru, gan ystyried argymhellion Pwyllgor y

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<sup>91</sup> Pwyllgor y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau, [Sylw Cyffredinol Rhif 5: Hawl i fyw'n annibynnol](#) (27 Hydref 2017).

<sup>92</sup> Ibid.

<sup>93</sup> Ibid.

<sup>94</sup> Ibid.

<sup>95</sup> Gweler, er enghraifft, pryderon a grynhowyd gan gynrychiolwyr Cymdeithas Perthnasau a Phreswylwyr mewn [tystiolaeth lafar i'r APPG ar Goronafeirws \(12 Awst 2020\)](#) ('mae llawer o'r galwyr i'n llinell gymorth wedi bod yn dweud wrthym fod y sefyllfa bresennol mewn cartrefi gofal bellach yn debyg iawn i garchar ag ymweliadau mor gyfyngedig, preswylwyr yn methu â gadael tiroedd y cartref a'r rhyngweithio cyfyngedig hwnnw â thrigolion a staff eraill').

<sup>96</sup> Cadeirydd Pwyllgor y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau (Ebrill 2020), ['Datganiad ar y Cyd: Personau ag Anableddau a COVID-19'](#).

<sup>97</sup> Y Cenhedloedd Unedig (Mai 2020), ['Briff Polisi: Ymateb Anabledd-Gynhwysol i COVID-19'](#).

Cenhedloedd Unedig.<sup>98</sup> Mae'r fframwaith yn ymrwmo i ymgysylltu'n ystyrion â phobl anabl a'u cynnwys mewn penderfyniadau sy'n effeithio arnynt, ac yn sail iddo mae'r cysyniad o gyd-gynhyrchu, gan gydnabod 'na ellir gwella gwasanaethau i ddiwallu anghenion pobl anabl yn llawn oni bai eu bod yn cymryd rhan weithredol. wrth ddylunio a darparu'r gwasanaethau hynny.<sup>99</sup> Mae adborth gan ein rhanddeiliaid yn awgrymu na chyflawnwyd yr ymrwymadau hyn ym mhrofiad pobl hŷn ac anabl mewn lleoliadau gofal preswyl yn ystod y pandemig, gan danseilio eu mwynhad o'r hawl i fyw'n annibynnol.

56. Rydym wedi datblygu model cyfreithiol arfaethedig ar gyfer ymgorffori'r hawl i fyw'n annibynnol mewn cyfraith ddomestig yn llawn,<sup>100</sup> a gymeradwywyd gan y Cydbwyllgor ar Hawliau Dynol yn 2019.<sup>101</sup> Rydym yn pryderu y gallai'r pandemig arwain at atchweliad hirdymor mewn safonau ac amddiffyniadau i bobl anabl. Byddai ymgorffori hawl i fyw'n annibynnol yn ein barn ni yn helpu i atal hyn, a byddai'n sicrhau mynediad i wneud iawn mewn achosion lle mae hawliau pobl anabl wedi cael eu cwtogi'n anghyfreithlon.

## **Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014**

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57. Mae Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) yn darparu fframwaith cyfreithiol i sicrhau bod pobl sy'n byw mewn cartrefi gofal yn gallu cyrchu gwasanaethau cyngor, gwybodaeth, arweiniad ac eiriolaeth, a'u bod yn gysylltiedig â gwneud penderfyniadau a'u bod â llais a rheolaeth dros eu gofal a thriniaeth. Mae tystiolaeth gan ein rhanddeiliaid yn awgrymu nad dyma oedd y realiti yn ystod y don gyntaf o COVID-19, sydd wedi datgelu a gwaethygu materion hirsefydlog ynghylch gallu pobl i ddeall a gwireddu eu hawliau mewn lleoliadau gofal preswyl.

### **Dyletswydd Llesiant**

58. Mae adran 5 yn gosod dyletswydd ar unrhyw un sy'n arfer dyletswyddau o dan y Ddeddf i hyrwyddo llesiant pobl sydd angen gofal a chymorth. Fe ganfu ein hymgysylltu â rhanddeiliaid y bu dirywiad amlwg yn llesiant ac ansawdd bywyd y

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<sup>98</sup> Sylwch nad yw hyn yn cyfateb i gorffori llawn.

<sup>99</sup> Llywodraeth Cymru (2019), '[Gweithredu ar Anabledd: yr hawl i fframwaith byw'n annibynnol a chynllun gweithredu](#)'.

<sup>100</sup> Gweler [ein tystiolaeth a gyflwynom, ynghlŷn â gofal cymdeithasol oedolion a'r hawl i fyw'n annibynnol, i ymchwiliad y Cyd-bwyllgor ar Hawliau Dynol ar ymateb y Llywodraeth i COVID-19: goblygiadau hawliau dynol](#)

<sup>101</sup> Cyd-bwyllgor ar Hawliau Dynol (2019), '[Cadw pobl ifanc ag anableddau dysgu a/neu awtistiaeth, yn y ddalfa Ail adroddiad sesiwn 2019](#)'.

rhai sy'n byw mewn cartrefi gofal yn ystod y pandemig. Er enghraifft, nododd Alzheimer's Cymru fod rhai preswylwyr â dementia wedi profi dirywiad gwybyddol clir yn ystod yr amser pan gafodd ymweliadau eu hatal.<sup>102</sup> Cefnogir hyn gan y profiadau a ddaliwyd yn adroddiad Llesiau Cartrefi Gofal Comisiynydd Pobl Hŷn Cymru.<sup>103</sup>

59. Yn ogystal â llesiant meddyliol, fe ganfu ein hymgysylltu â rhanddeiliaid fod atal apwyntiadau gofal iechyd arferol yn ystod y pandemig wedi effeithio ar iechyd corfforol pobl hŷn. Mae hyn wedi arwain at ôl-groniad o apwyntiadau wedi'u canslo a chyflyrau iechyd heb eu diagnosio. Os na eir i'r afael â hyn, gallem wynebu argyfwng ehangach ym maes iechyd a gofal cymdeithasol yn y dyfodol nad yw'r sector yn barod ar ei gyfer.

### **Llais ac ymreolaeth**

60. Mae adran 6 yn gosod dyletswydd drosfwaol ar bob dyletswydd ymarfer i roi sylw i: (a) farn, dymuniadau a theimladau'r unigolyn; (b) pwysigrwydd hyrwyddo a pharchu eu hurddas; (c) eu nodweddion, diwylliant a chredoau (gan gynnwys, er enghraifft, iaith); ac (ch) pwysigrwydd darparu cefnogaeth briodol i'w galluogi i gymryd rhan mewn penderfyniadau sy'n effeithio arnynt.
61. Codwyd pryderon gan rhanddeiliaid nad oedd barn, dymuniadau a theimladau pobl hŷn (a ddisgrifir yn adran 6 y Ddyletswydd) yn cael eu hystyried yn ystod ton gyntaf y pandemig, hyd yn oed ar feysydd sylfaenol megis pa gartref y cawsant eu rhyddhau iddo, a roeddent yn dymuno cael hysbysiad Peidiwch â Dadebru yn ei le ai peidio, ac a oeddent yn gallu derbyn ymwelwyr. Er bod y pandemig yn gosod heriau digynsail ynghylch iechyd cyhoeddus, dylai fod gan bobl ddewis a rheolaeth o hyd fel y darperir ar eu cyfer yn y Ddeddf, a dylai unrhyw gyfyngiadau fod yn gwbl angenrheidiol a chymesur.

### **Egwyddorion y Cenhedloedd Unedig ar gyfer Pobl Hŷn**

62. Mae adran 7 yn gosod dyletswydd i roi sylw dyledus i Egwyddorion y Cenhedloedd Unedig ar gyfer Pobl Hŷn a fabwysiadwyd gan Gynulliad Cyffredinol y Cenhedloedd Unedig ar 16 Rhagfyr 1991.<sup>104</sup> Mae 18 egwyddor, wedi'u grwpio i bum thema, sef: annibyniaeth, cyfranogiad, hunangyflawniad, gofal ac urddas.<sup>105</sup> Er eu bod yn wahanol i'r cytuniadau hawliau dynol rhyngwladol, ac heb fod yn

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<sup>102</sup> Ymgysylltu â Rhanddeiliaid gan EHRC Cymru

<sup>103</sup> Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Llesiau Cartrefi Gofal: Ciplwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

<sup>104</sup> [Egwyddorion y Cenhedloedd Unedig ar gyfer Pobl Hŷn \(Penderfyniad 46/91\)](#).

<sup>105</sup> Llywodraeth Cymru (2015), '[Deddf Gwasanaethau Cymdeithasol a Llesiant \(Cymru\) 2014: Cod Ymarfer Rhan 2 \(Swyddogaethau Cyffredinol\)](#)'.

rhwymol ar wladwriaethau, mae'r Egwyddorion yn darparu canllaw pwysig ar gyfeiriad arfer gorau rhyngwladol mewn perthynas â hawliau pobl hŷn.

63. Mae'n amlwg o'n hymgysylltiad â rhanddeiliaid bod coronafeirws wedi datgelu materion ynghylch rhagfarn ar sail oedran a gwahaniaethu ar sail oedran, a bod y materion hyn wedi cael effaith ar yr ymateb i'r pandemig. Fe ganfuwyd bod pobl hŷn mewn cartrefi gofal wedi cael eu diystyru a'u hanwybyddu, a fyddai'n mynd yn gwbl groes i Adran 7.

### **Confensiwn y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau**

64. Mae Rhan 2 o'r Cod Ymarfer (Swyddogaethau Cyffredinol) yn nodi, wrth arfer swyddogaethau gwasanaethau cymdeithasol mewn perthynas â phobl anabl sydd angen gofal a chymorth, bod rhaid i awdurdodau lleol roi sylw dyledus i Gonfensiwn y Cenhedloedd Unedig ar Hawliau Pobl ag Anableddau.<sup>106</sup>

### **Gwybodaeth a chanllawiau**

65. Mae adran 17 yn ei gwneud yn ofynnol i awdurdodau lleol sicrhau bod gwybodaeth, cyngor a chymorth sy'n ymwneud â gwasanaethau gofal a chymorth ar gael ac yn hygyrch. Dylai hyn gynnwys o leiaf: sut mae'r system gofal a chymorth yn gweithredu, y mathau o ofal a chymorth sydd ar gael, sut i gael mynediad at wasanaethau gofal a chymorth, a sut i godi pryderon ynghylch llesiant rhywun arall yr ymddengys fod ganddo anghenion ynghylch gofal a chymorth.
66. Nid yw oddeutu traean o'r holl bobl hŷn yn gwybod eu hawliau ac mae llawer o'r rhai sy'n eu deal yn amharod i 'wneud ffwdan.'<sup>107</sup> Ymhellach, gwelsom fod cyfathrebu â staff cartrefi gofal yn ystod y pandemig wedi bod yn anghyson ac yn aneglur. Fe wnaeth Fforwm Gofal Cymru ein hysbysu bod problemau sylweddol yn ymwneud â rheoli fersiwn ar gyfercanllawiau, a oedd wedi arwain at ddryswch. Roedd adroddiad y Comisiynydd Pobl Hŷn yn cefnogi'r farn hon ac wedi canfod bod rheolwyr a staff cartrefi gofal yn wynebu cryn anawsterau wrth: 'gyrchu gwybodaeth a chanllawiau hanfodol i'w cefnogi i leihau lledaeniad y feirws ac amddiffyn preswylwyr a staff. Amlygwyd materion penodol ynghylch faint o wybodaeth oedd yn newid yn gyflym yr oedd cartrefi gofal yn ei derbyn, yn aml gan sawl corff, a oedd yn aml yn ddryslud neu'n anghyson.'<sup>108</sup> Fel y dywedodd un

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<sup>106</sup> Llywodraeth Cymru (30 Ebrill 2020), ''.

<sup>107</sup> Comisiwn Cydraddoldeb a Hawliau Dynol Ymgysylltu â Rhanddeiliaid, Senedd Pobl Hŷn Cymru

<sup>108</sup> Comisiynydd Pobl Hŷn Cymru (Mehefin 2020), '[Leisiau Cartrefi Gofal: Ciplwg ar fywyd mewn cartrefi gofal yng Nghymru yn ystod Covid-19](#)'.

rheolwr cartref gofal, 'Fe gawsom ein boddi â gwaith papur gan sawl asiantaeth a oedd yn cael ei ddyblygu ac weithiau'n groes i'w gilydd.'<sup>109</sup>

## Eiriolaeth

67. Mae adran 181 yn nodi y gallai fod yn ofynnol i awdurdodau lleol drefnu eiriolaeth i bobl sydd angen gofal a chymorth.
68. Mae rhanddeiliaid wedi ein hysbysu bod diffyg eiriolaeth yn fater hirsefydlog o fewn y sector gofal cymdeithasol, a waethygyd o dan Covid-19. Mae hyn wedi arwain at wneud penderfyniadau heb ddealltwriaeth, cyfranogiad na chydysyniad pobl hŷn, gan fynd yn gwbl groes i ddarpariaethau eiriolaeth ac egwyddorion llais, rheolaeth a chyd-gynhyrchu a nodir yn y Ddeddf.<sup>110</sup> Yn hytrach nodweddyd yr enghreifftiau a ddarparwyd gan ein rhanddeiliaid gan ddiffyg cyfranogiad ac ymreolaeth i bobl hŷn mewn penderfyniadau a oedd yn effeithio ar eu bywydau a'r gwasanaethau yr oeddent y neu cael, diffyg gweithredu ataliol trwy ddarpariaeth annigonol o brofion a PPE, a methiant i ganolbwyntio ar ansawdd bywyd a llesiant.

## Deddf Coronafeirws 2020 a Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru)

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69. Cododd rhanddeiliaid bryderon ynghylch y darpariaethau yn Neddf Coronafeirws 2020 sy'n galluogi atal rhannau o Ddeddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014. Mae hyn yn golygu nad oes rhaid i awdurdodau lleol gynnal asesiadau o anghenion mwyach, diwallu anghenion cymwys oedolion ynghylch gofal a chymorth, cynnal asesiadau ariannol, neu adolygu cynlluniau gofal a chymorth. Yn lle, gall awdurdodau lleol godi tâl yn ôl-weithredol am unrhyw ofal mewn amgylchiadau penodol a dim ond yn yr achosion mwyaf difrifol y mae dyletswydd arnynt i ddiwallu anghenion am ofal a chymorth.<sup>111</sup> Er bod Llywodraeth Cymru wedi cadarnhau nad oes unrhyw awdurdodau lleol wedi defnyddio'r pwerau hyn mewn gwirionedd,<sup>112</sup> mae pryderon yn aros ei fod yn bresennol ar y llyfr statud ac y gallai beri risgiau i hawliau pobl hŷn ac anabl.
70. Mae hyn yn arbennig o bwysig yng ngoleuni tystiolaeth ddiweddar gan Sefydliad Hawliau Dynol Prydain a ganfu na ddarparwyd hyfforddiant cyfreithiol na

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<sup>109</sup> Ibid.

<sup>110</sup> Gofal Cymdeithasol Cymru (29 Mawrth 2017), '[Trosolwg, Deddf Gwasanaethau Cymdeithasol a Lles \(Cymru\) 2014](#)' [cyrchwyd 8 Hydref 2020]. Gweler hefyd Ymgysylltu â Rhanddeiliaid EHRC Cymru

<sup>111</sup> Ymchwil y Senedd (12 Mai 2020), '[Coronafeirws: rheoliadau brys ar ofal cymdeithasol ac iechyd meddwl \(wedi'u diweddarau ar 12 Mai\)](#)'.

<sup>112</sup> Llywodraeth Cymru (23 Medi 2020), '[Llythyr at Gadeirydd pwyllgor ELGC](#)'.

gwybodaeth glir i 77 y cant o staff sy'n gweithio ym maes iechyd a gofal cymdeithasol am ddefnyddio Pwerau Brys o dan y Ddeddf Coronafeirws. Yn yr un modd, ni ddarparwyd hyfforddiant cyfreithiol na gwybodaeth glir i 73 y cant o'r rhai a holwyd am Gyfraith Hawliau Dynol,<sup>113</sup> rydym yn gobeithio y bydd y briff hwn yn mynd rhywfaint o'r ffordd i fynd i'r afael â'r bwch gwybodaeth hwn.

## **Deddf Rheoleiddio ac Arolygu Gofal Cymdeithasol (Cymru) 2016**

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71. Mae'r ddeddfwriaeth hon yn creu system reoleiddio sy'n canolbwyntio ar anghenion y rhai hynny sy'n derbyn gofal a chymorth. O dan y Ddeddf, mae'n ofynnol i Weinidogion Cymru amddiffyn, hyrwyddo a chynnal diogelwch a llesiant pobl sy'n defnyddio gwasanaethau rheoledig (gan gynnwys gwasanaethau eirioli) ac i hyrwyddo a chynnal safonau uchel wrth ddarparu gwasanaethau. Nod y ddeddfwriaeth yw darparu ymateb cadarn i'r gwersi a ddysgwyd o fethiannau blaenorol yn y system.<sup>114</sup>

## **Mesur y Gymraeg (Cymru) 2011**

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72. Mae'r mesur hwn yn ei gwneud yn ofynnol bod gwasanaethau mewn gofal cymdeithasol o'r un safon ac ar gael mor hawdd a phrydlon yn Gymraeg ag yn Saesneg, a dylent fod mor eang a thrylwyr. Ni ddylai sefydliadau rhagdybio mai Saesneg yw'r iaith ddiofyn wrth ddarparu eu gwasanaethau ac ni ddylai fod yn ofynnol i siaradwyr Cymraeg ofyn am wasanaeth yn Gymraeg.<sup>115</sup>

73. Mae'r darpariaethau hyn yn bwysig er mwyn sicrhau bod pobl hŷn sydd efallai dim ond yn gallu cyfleu eu hanghenion gofal yn effeithiol yn Gymraeg yn derbyn yr un lefel o ofal a chyfathrebu â siaradwyr y Saesneg. I lawer o siaradwyr Cymraeg, mae iaith yn elfen annatod o'u gofal,<sup>116</sup> yn arbennig i'r rheini ag anghenion ychwanegol megis pobl â dementia sy'n aml yn colli eu hail iaith neu'r rhai sydd wedi dioddef strôc.<sup>117</sup>

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<sup>113</sup> Sefydliad Hawliau Dynol Prydain, (Gorffennaf 2020) [Y Cyd-bwyllgor ar yr Ymchwiliad Hawliau Dynol i oblygiadau hawliau dynol ymateb Llywodraeth y DU i Covid-19: Tystiolaeth gan staff sy'n gweithio ym maes iechyd, gofal a gwaith cymdeithasol.](#)

<sup>114</sup> Gofal Cymdeithasol Cymru (Ebrill 2019), '[Trosolwg: Deddf Rheoleiddio ac Arolygu Gofal Cymdeithasol \(Cymru\) 2016](#)' [cyrchwyd 7 Hydref 2020].

<sup>115</sup> Gofal Cymdeithasol Cymru (Medi 2020), '[Defnyddio Cymraeg yn y gwaith](#)' [cyrchwyd 7 Hydref 2020].

<sup>116</sup> Llywodraeth Cymru (Ebrill 2019) '[Mwy na Geiriau yn Unig: Fframwaith Strategol ar gyfer Gwasanaethau Cymraeg mewn Iechyd, Gwasanaethau Cymdeithasol a Gofal Cymdeithasol: Adroddiad Cynnydd - Blwyddyn 2](#)'.

<sup>117</sup> Y Sgwrs, 2019 [Dwyieithrwydd a dementia: sut mae rhai cleifion yn colli eu hail iaith ac yn ailddarganfod eu hiaith gyntaf](#)

## Sicrhau cydymffurfiad â safonau cydraddoldeb a hawliau dynol

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74. Rydym yn cydnabod bod y pandemig coronafeirws yn cyflwyno heriau digynsail i'r Llywodraeth, a bod newidiadau a chanllawiau polisi pwysig wedi'u gweithredu wrth i'r pandemig fynd rhagddo, gan gynnwys Cynllun Gweithredu Cartrefi Gofal Llywodraeth Cymru.<sup>118</sup> Fodd bynnag, mae'r materion sydd wedi codi mewn cartrefi gofal yn codi pryderon gwirioneddol bod safonau cydraddoldeb a hawliau dynol wedi'u torri.<sup>119</sup> Mae'n hanfodol bod problemau parhaus yn cael sylw, bod arfer da yn cael ei ymgorffori a bod mesurau ar waith i atal problemau rhag ailymddangos. Mae cynnwys ystyriaethau cydraddoldeb a hawliau dynol wrth wneud penderfyniadau ar lefel genedlaethol a lleol yn rhan allweddol o hyn.

### Ein hargymhellion

#### Llywodraeth Cymru

- (1) Dylai Llywodraeth Cymru barhau i gymryd camau brys i sicrhau bod penderfyniadau ynghylch iechyd a gofal pobl hŷn mewn lleoliadau preswyl - mewn achosion unigol ac ar lefel polisi cenedlaethol - yn cael eu gwneud wrth gydweithredu ac ymgynghori â phobl hŷn a'u sefydliadau cynrychioliadol. Rhaid i hyn gael ei ategu gan ganllawiau clir, hygyrch a chyson sy'n cydymffurfio'n llawn â safonau hawliau dynol, gan gynnwys egwyddorion ymreolaeth unigol a pheidio â gwahaniaethu.
- (2) Dylai Llywodraeth Cymru sicrhau bod dewis, rheolaeth ac ymreolaeth preswylwyr cartrefi gofal yn cael eu cadw cyn belled ag y bo modd yn ystod y pandemig, a bod unrhyw gyfyngiadau yn angenrheidiol, cymesur a chyfyngedig o ran amser.
- (3) Dylai Llywodraeth Cymru sicrhau bod gan breswylwyr cartrefi gofal fynediad llawn a chyfartal at ofal iechyd angenrheidiol, gan gynnwys gwasanaethau meddygon teulu a thriniaeth ysbyty, a bod ymgynghoriadau'n cael eu cynnal wyneb yn wyneb lle bynnag y bo modd.

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<sup>118</sup> Mae hyn yn cynnwys y [Cynllun Gweithredu Cartrefi Gofal, Ymweliadau â Chartrefi Gofal: canllawiau i ddarparwyr, Canllawiau i ddarparwyr gwasanaethau gofal cymdeithasol i oedolion yn y pandemig covid-19](#) ac ['Iechyd Cyhoeddus Cymru' ar gyfer gweithwyr proffesiynol iechyd a gofal cymdeithasol](#).

<sup>119</sup>Dangosodd arolwg diweddar o staff iechyd, gofal a gwaith cymdeithasol gan Sefydliad Hawliau Dynol Prydain fod hanner wedi bod yn dyst i droseddau hawliau dynol a oedd yn golygu bod rhywun yn cael ei drin yn waeth nag eraill oherwydd eu hunaniaeth neu nodwedd warchoddedig benodol. Sefydliad Hawliau Dynol Prydain (Awst 2020), ['Y Cyd-bwyllgor Ymchwiliad Hawliau Dynol i oblygiadau hawliau dynol ymateb Llywodraeth y DU i Covid-19: Tystiolaeth gan staff sy'n gweithio ym maes iechyd, gofal a gwaith cymdeithasol'](#), t. 17.

- (4) Dylai Llywodraeth Cymru sicrhau bod hysbysïadau 'peidiwch â dadebru' a weithredwyd ar gam i gynlluniau gofal pobl yn cael eu dileu.
- (5) Dylai Llywodraeth Cymru weithio gyda darparwyr i sicrhau bod pobl hŷn sydd heb alluedd yn gallu cyrchu eiriolaeth annibynnol.
- (6) Dylai Llywodraeth Cymru sicrhau bod digon o allu profi dibynadwy, amserol i sicrhau nad yw pobl mewn cartrefi gofal yn dod i gysylltiad diangen â choronafeirws ac nad oes rhaid iddynt ynysu yn ddiangen, ac y gallant gael mynediad diogel i ymweliadau gan deulu, ffrindiau a gwasanaethau gofal iechyd.
- (7) Dylai Llywodraeth Cymru sicrhau bod mesurau yn aros yn eu lle i warantu digon o gyfarpar diogelu personol ar gyfer cartrefi gofal drwy gydol y pandemig, dylid blaenoriaethu cyfarpar â phaneli clir lle bo angen mwy'n lliniaru unrhyw anawsterau cyfathrebu i bobl anabl.
- (8) Dylai Llywodraeth Cymru gymryd camau i hwyluso ymweliadau diogel â chartrefi gofal trwy ymestyn profion cartrefi gofal i ymwelwyr hanfodol, gan ganiatáu iddynt gael yr un mynediad at PPE a phroffion rheolaidd a ragwelir ar gyfer staff cartrefi gofal yng nghynllun gaeaf Llywodraeth Cymru.
- (9) Dylai Llywodraeth Cymru ddiwygio canllawiau ar ymweliadau cartrefi gofal i wahardd cyfyngiadau cyffredinol, gan gynnwys mewn ardaloedd lle mae cyfyngiadau lleol ar waith, a sicrhau bod pob penderfyniad yn seiliedig ar asesiadau risg unigol fel nad yw ymweliadau yn gyfyngedig dim ond lle bo hynny'n hollol angenrheidiol. Dylai'r canllawiau gael ei hyrwyddo'n gyhoeddus i gynyddu dealltwriaeth ymhlith darparwyr, preswylwyr ac ymwelwyr ynghylch pryd y caniateir ymweliadau, a dylid eu hadolygu a'u diweddarau i ganiatáu llacio ymhellach i bolisïau ymweld lle mae'n ddiogel gwneud hynny.
- (10) Dylai Llywodraeth Cymru asesu a yw ataliaeth wedi cynyddu yn ystod y pandemig a gweithio gyda darparwyr, y GIG ac arolygiaethau i nodi pa gymorth ychwanegol y dylid ei ddarparu i osgoi ei ddefnydd a sicrhau tryloywder a monitro a goruchwyllo effeithiol. Dylai canllawiau ar osgoi'r defnydd o ataliaeth adeiladu ar adnoddau ac arfer da presennol ac adlewyrchu'r egwyddorion a nodir yn fframwaith hawliau dynol y Comisiwn ar gyfer ataliaeth, y mae Llywodraeth Cymru eisoes wedi cyfeirio atynt yn ei chanllawiau. Dylid rhoi ystyriaeth arbennig i grwpiau sydd â namau neu nodweddion sy'n cynyddu'r risg o niwed.
- (11) Yn unol â'r UNCRPD a'r ymrwymïadau a amlinellir yn: Gweithredu ar Anabledd: Y fframwaith hawl i fyw'n annibynnol a'r cynllun gweithredu, rhaid i Lywodraeth Cymru:



- a) ddarparu cyllid digonol i bob awdurdod lleol i sicrhau bod hawl pobl anabl i fyw'n annibynnol yn cael ei hamddiffyn yn ystod ac yn dilyn y pandemig. Dylid darparu cyllid trwy fecanweithiau priodol, megis clustnodi, i sicrhau bod yr arian yn cael ei ddefnyddio at y diben hwnnw.
  - b) sicrhau bod yr ymrwymadau a amlinellir yn y Fframwaith yn cael eu hystyried wrth wneud penderfyniadau polisi sy'n ymwneud â phobl anabl mewn lleoliad gofal preswyl, gan gynnwys yr ymrwymadau i ymgysylltu, cynnwys a chyd-gynhyrchu ystyrllon, ac ymgorffori'r model cymdeithasol o anabled.
  - c) ymgorffori'r hawl i fyw'n annibynnol mewn cyfraith ddomestig i amddiffyn hawliau dynol pobl anabl a hŷn yn ystod ac yn dilyn y pandemig.
- (12) Dylid cynyddu goruchwyliaeth ar y newidiadau i'r ddarpariaeth gofal cymdeithasol ar draws ardaloedd lleol er mwyn sicrhau bod cynllunio adferiad a phenderfyniadau polisi cenedlaethol yn cael eu llywio gan ddata cywir a diweddar. Dylai Llywodraeth Cymru ystyried pob dull posibl i sicrhau bod awdurdodau lleol a darparwyr gofal yn gallu diwallu anghenion gofal a chymorth cynyddol yn ystod y pandemig a sy'n deillio ohono.
- (13) Dylai Llywodraeth Cymru ofyn i Senedd y DU ddiddymu'r pŵer o dan Ddeddf Coronafeirws 2020 i atal y gofynion deddfwriaethol o dan Ddeddf Gwasanaethau Cymdeithasol a Lles (Cymru). Dylai Llywodraeth Cymru ddefnyddio'r fframwaith cudd-wybodaeth a chyfreithiol a ddarperir yn y briff hwn i sicrhau bod pobl hŷn ac anabl mewn lleoliadau gofal preswyl yn cael y safonau gofal uchaf, fel y bwriadwyd o dan y Ddeddf Rheoleiddio ac Arolygu Gofal Cymdeithasol (Cymru).

#### Llywodraeth Cymru a'r holl gyrff cyhoeddus perthnasol

- (14) Yn unol â'r dyletswyddau cydraddoldeb penodol yng Nghymru, dylai Llywodraeth Cymru a'r holl gyrff cyhoeddus perthnasol yng Nghymru:
- a) sicrhau bod ymgysylltu â phobl hŷn ac anabl yn cael ei wneud, ei ystyried a'i gofnodi wrth ddatblygu ymateb Covid-19 mewn cartrefi gofal;
  - b) cyhoeddi asesiadau o effaith ar gydraddoldeb ar y pwynt cwblhau, gyda ffynonellau data clir (yma mae dulliau casglu data arferol yn cael eu tarfu neu maent yn annigonol, dylid defnyddio ffynonellau newydd a dulliau amgen er mwyn cael mewnwelediad i effeithiau posibl a gwirioneddol ar gyfer gwahanol nodweddion gwarchoddedig); amserlenni ar gyfer camau a gynlluniwyd a sut y bydd y camau hyn yn cael eu monitro a'u gwerthuso;

- c) sicrhau bod asesiadau o effaith ar gydraddoldeb ac unrhyw gyfathrebu cysylltiedig yn hygyrch, clir a phriodol;
- d) sicrhau bod canllawiau ar gyfer cartrefi gofal yn hawdd eu cyrraedd a bod y fersiwn ddiweddaraf yn hawdd ei hadnabod, gyda rhesymeg a sylfaen dystiolaeth glir ar gyfer penderfyniadau.

Llywodraeth Cymru, Comisiynwyr, Cynllunwyr Gwasanaeth a Darparwyr Gofal

- (15) O dan Ddeddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014, dylai Llywodraeth Cymru, comisiynwyr a chynllunwyr gwasanaeth a darparwyr gofal:
- a) ystyried y meysydd llesiant ehangach a gwmpesir o dan Adran 5 Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) mewn penderfyniadau ynghylch yr ymateb i'r pandemig fel bod ansawdd bywyd yn cael ei ddeall a'i ystyried yn well mewn penderfyniadau polisi yn y dyfodol.
  - b) cymryd camau i gynnwys pobl hŷn yn y broses benderfynu a chipio eu straeon a'u profiad er mwyn cyflawni rhwymedigaethau o dan Adran 6 ac o dan y ddyletswydd i roi sylw dyledus i Egwyddorion y Cenhedloedd Unedig ar gyfer Pobl Hŷn.<sup>120</sup>
  - c) gweithredu i wella dealltwriaeth pobl hŷn o'u hawliau mewn lleoliadau gofal preswyl, fel y darperir o dan Adran 17. Dylai hyn ystyried y rhai sydd wedi'u gwahardd yn ddigidol neu sydd ag anghenion mynediad ychwanegol i sicrhau bod ffynonellau gwybodaeth a chymorth ar gael i'r holl bobl hŷn.
  - d) sicrhau bod gwasanaethau eirioli o dan adran 181 ar gael, yn cael adnoddau digonol ac yn cael cyhoeddusrwydd o fewn lleoliadau gofal preswyl yr holl bobl hŷn. Mae hyn yn cynnwys ailafael mewn ymweliadau Eiriolwyr Annibynnol i sicrhau bod pobl hŷn yn cael eu cefnogi i gymryd rhan mewn penderfyniadau sy'n effeithio arnynt.
- (16) Dylai Llywodraeth Cymru, comisiynwyr a chynllunwyr gwasanaeth a darparwyr gofal sy'n cyfathrebu penderfyniadau polisi Covid-19 sicrhau bod cynnwys yn hygyrch yn Gymraeg a Saesneg. Dylai gwasanaethau Cymraeg gael eu prif ffrydio fel nad ydynt yn ychwanegiad 'dewisol'.

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<sup>120</sup> [Deddf Gwasanaethau Cymdeithasol a Lles \(Cymru\) 2014](#), adran 6.

## Arolygiaeth Gofal Cymru

- (17) Dylai Arolygiaeth Gofal Cymru sicrhau bod cynlluniau ar waith I gael goruchwyliaeth barhaus effeithiol ar gyfer cartrefi gofal drwy gydol y pandemig, ehangu arolygiadau cyn belled ag y bo modd gan roi blaenoriaeth i'r gwasanaethau hynny lle mae'r safonau fwyaf mewn perygl (fel y'u hysbyswyd gan arolygiadau blaenorol a chasglu gwybodaeth yn lleol ), ac adfer arolygiadau llawn pryd bynnag y mae'n ddiogel gwneud hynny. Dylai CIW ystyried ymhellach gymryd camau ar unwaith y tu hwnt i'r llwybrau presennol i sicrhau bod preswylwyr, perthnasau a staff yn gallu riportio pryderon tra bo ymweliadau'n gyfyngedig.
- (18) Dylai Arolygiaeth Gofal Cymru ddefnyddio'r pwerau a ddarperir o dan Ddeddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) yn llawn i sicrhau bod llais a llesiant pobl hŷn wrth wraidd rheoleiddio gwasanaethau gofal a chymorth preswyl yn ystod y pandemig. Er enghraifft, trwy siarad a gwranddo'n uniongyrchol ar bobl hŷn ac anabl yn ystod gweithdrefnau cwynion ac arolygu a gweithredu ar bryderon trwy fecanweithiau ffurfiol ac anffurfiol.

## Gwybodaeth bellach

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I gael rhagor o wybodaeth, cysylltwch ag:

**Uwch Gydymaith**

Claire Cunliffe

[wales@equalityhumanrights.com](mailto:wales@equalityhumanrights.com)

Elin Jones AS

Y Llywydd a Chadeirydd y Pwyllgor Busnes

22 Hydref 2020

Annwyl Elin

## **Craffu ar reoliadau Covid-19**

Diolch am eich llythyr dyddiedig 8 Hydref 2020, a drafodwyd gennym yn ein cyfarfodydd ar 12 Hydref a 19 Hydref 2020.

Roedd eich llythyr yn ceisio canfod a fyddai'n briodol bod Llywodraeth Cymru yn tynnu sylw at Reoliadau newydd lle'r oedd yr egwyddor sylfaenol eisoes wedi bod yn destun craffu, er mwyn galluogi'r Pwyllgor Busnes i wneud penderfyniad ynghylch lefel y gwaith craffu pellach a allai fod yn ofynnol cyn y ddadl. O ganlyniad, gwnaethoch ofyn am ein barn ynghylch a oedd posibilrwydd o alluogi rhai Rheoliadau sy'n gysylltiedig â Covid-19 i gael eu blaenoriaethu i'w trafod mewn amgylchiadau o'r fath.

Nid ydym yn credu bod yr opsiwn a awgrymwyd gan y Pwyllgor Busnes yn briodol am sawl rheswm. Yn ein barn ni, ni ddylai cymeradwyaeth ar gyfer unrhyw fath o ddeddfwriaeth fod ar sail 'mewn egwyddor'. Felly nid ydym yn gweld y bydd gennym rôl wrth gymeradwyo (neu wrthod) unrhyw asesiad gan Lywodraeth Cymru bod cyfres benodol o reoliadau, mewn egwyddor, yr un fath â chyfres flaenorol. At hynny, byddai gwerth asesiad o'r fath yn amheus yn ein barn ni, o gofio er y gallai cyfres newydd o reoliadau ddilyn amcan polisi tebyg, y gallent fod yn destun pwyntiau i adrodd yn eu cylch o dan Reol Sefydlog 21.2 neu 21.3 o hyd.

Credwn fod ein gwaith craffu ar yr holl reoliadau Covid-19 wedi bod yn effeithlon ac amserol. Rydym wedi adrodd ar y mwyafrif o reoliadau sy'n ddarostyngedig i'r weithdrefn gwneud cadarnhaol cyn pen 14 diwrnod ar ôl gosod yr offeryn. Yn y mwyafrif o achosion, mae hyn wedi galluogi'r Senedd i bleidleisio ar a ddylai'r rheoliadau aros mewn grym ymhell cyn yr 28 diwrnod a ganiateir yn ôl *Deddf Iechyd y Cyhoedd (Rheoli Clefydau) 1984* a'r 40 diwrnod a ganiateir yn ôl *Deddf y Coronafeirws 2020* (y cydsyniodd y Senedd iddi ym mis Mawrth eleni). Byddem hefyd yn dymuno tynnu sylw at y ffaith bod mwyafrif y rheoliadau gwneud cadarnhaol wedi'u gosod ar ddydd

Gwener; mae hyn, ynghyd â'n slot cyfarfod ar fore Llun yn golygu y bu, yn anochel, bwlch o wythnos rhwng y gosod a chraffu ar y rheoliadau gan y Pwyllgor, waeth beth fu'r gwaith a oedd yn angenrheidiol i baratoi adroddiadau i'w hystyried gan y Pwyllgor. Rydym hefyd yn tynnu sylw at sylwadau Vaughan Gething AS, y Gweinidog Iechyd a Gwasanaethau Cymdeithasol, yn y Cyfarfod Llawn ar [6 Hydref 2020](#), yr ydym yn eu croesawu:

“Rwyf i hefyd yn croesawu'r ffaith bod y pwyllgor, o bryd i'w gilydd, wedi ein helpu ni o ran cysondeb mewn darpariaethau deddfwriaethol. Mae hynny'n rhan o bwynt y craffu. Rydym ni'n gwneud y rheoliadau hyn mewn modd cyflym oherwydd y darlun sy'n newid yn gyflym o ran y coronafeirws, ac rwy'n credu bod gwerth i'r pwyllgor ymgymryd â'i swyddogaeth graffu cyn i'r ddeddfwrfa wedyn allu arfer ei swyddogaeth wrth benderfynu pa un a all y rheoliadau hyn barhau ai peidio.”

Rydym, serch hynny, wedi ystyried amrywiaeth o opsiynau i hwyluso proses graffu gyflymach fyth. Gwnaethom drafod a fyddai cyfarfod yn amlach nag unwaith yr wythnos yn hwyluso'r gwaith craffu ar reoliadau a osodir gan Lywodraeth Cymru ar wahanol adegau yn ystod yr wythnos waith flaenorol. O ystyried arfer Llywodraeth Cymru o osod mwyafrif y rheoliadau gwneud cadarnhaol ar ddydd Gwener, gwnaethom hefyd ystyried a fyddai'n ymarferol symud slot cyfarfod rheolaidd ein Pwyllgor i fore Mercher, er mwyn ystyried rheoliadau a wnaed y dydd Gwener blaenorol ac i osod adroddiad mewn pryd ar gyfer dadl y prynhawn hwnnw. Gwnaethom hefyd drafod a allem roi ymrwymiad ffurfiol i adrodd ar reoliadau gwneud cadarnhaol o fewn terfyn amser o 14 diwrnod.

Daethom i'r casgliad, fodd bynnag, bod dulliau o'r fath yn debygol iawn o arwain at broblemau sylweddol o ran amserlennu ar gyfer Llywodraeth Cymru ac Aelodau o'r Senedd. At hynny, o ystyried cymhlethdod y ddeddfwriaeth hon, mae unrhyw ffurfioli o ran ein trefniadau presennol ar gyfer craffu ar ddeddfwriaeth sy'n gysylltiedig â Covid-19 angen ei ystyried ochr yn ochr â nifer cynyddol o ddeddfwriaeth sy'n ymdrin ag ymadawiad y DU â'r UE, yn anad dim oherwydd y gallai ffurfioli o'r fath ei gwneud yn ofynnol i gael adnoddau ychwanegol neu batrymau gwaith gwahanol. Mae'r pwynt olaf hwn yn arbennig o berthnasol o ystyried bod ein cylch gwaith yn golygu bod ein rhaglen waith wedi'i chyfyngu'n fawr ar hyn o bryd gan y gwaith craffu angenrheidiol a phwysig ar is-ddeddfwriaeth sy'n ymwneud ag ymadael â'r UE a memoranda cydsyniad deddfwriaethol ar gyfer Biliau sy'n ymwneud ag ymadawiad y DU â'r UE, gan gynnwys Bil Marchnad Fewnol y DU sy'n arwyddocaol o ran y cyfansoddiad.

Rydym yn cydnabod bod materion sy'n ymwneud â'r pandemig wedi'u blaenoriaethu yn amser y llywodraeth yn ystod sesiynau'r Cyfarfod Llawn. Gwnaethom hefyd ystyried a allai Llywodraeth Cymru ystyried defnyddio'r weithdrefn gadarnhaol ddrafft os yn bosibl o gwbl wrth lunio deddfwriaeth sy'n gysylltiedig â Covid-19 o dan adran 45C o Ddeddf 1984. Er ein bod yn gwerthfawrogi efallai na fydd hyn yn ymarferol, byddem yn annog Llywodraeth Cymru i ystyried a oes cyfleoedd o gwbl i'w defnyddio.

Byddwn yn parhau i wneud popeth o fewn ein gallu i sicrhau bod gwaith craffu ar reoliadau sy'n gysylltiedig â Covid-19 yn cael ei gynnal mewn modd amserol. Fodd bynnag, nid ydym yn credu y dylid peryglu ein swyddogaeth graffu o dan unrhyw amgylchiadau.

Anfonaf gopi o'r llythyr hwn at Gadeiryddion pob pwyllgor.

Yn gywir

A handwritten signature in black ink that reads "Mick Antoniw". The signature is written in a cursive style with a horizontal line underneath the name.

**Mick Antoniw AS**  
Cadeirydd

Croesewir gohebiaeth yn Gymraeg neu Saesneg  
We welcome correspondence in Welsh or English

## **The Domestic Abuse Bill 2019-21: Key priorities for survivors in Wales**

The Domestic Abuse Bill 2019-21 (“the Bill”) was introduced in the House of Commons on 3 March 2020.<sup>1</sup>

We have warmly welcomed the Bill’s recognition that children are victims of domestic abuse in their own right, this means children and young people must now be recognised as deserving adequately funded specialist support. We also greatly welcome the abolishment of the ‘rough sex defence’<sup>2</sup>. There however remains several amendments and priorities for the Bill we support which we believe are vital for its success in supporting *all* survivors and aligning with existing Welsh legislation.

### **Welsh Women’s Aid’s Key priorities for the Bill:**

- Equal protection and support for migrant women and the abolishment of no recourse to public funds (NRPF).
- Family Justice and recognition of the serious impacts of domestic abuse to children.
- Alignment with existing Welsh legislation and inclusion of representation for Welsh survivors

### **Equal protection and support for migrant women and NRPF**

In [our original briefing](#) to the public bill committee we highlighted the impact no recourse to public funds had on survivors.

*All agencies see is an immigration status they do not see us as human beings. We need help. (Survivor)*

*They told me to go back home to Africa as I would be safe there because he now has his stay [leave to remain]. I called the police 100s of times about him and he nearly killed me. The police know all about it. But they let him stay anyway. (Survivor)*

*He told me no one will believe me because of my status, that they will take my children from me. (Survivors)*

We strongly support the following amendments:

- Abolish the no recourse to public funds (NRPF) policy which prevents many migrant women with insecure immigration status from accessing vital, often life-saving support and routes to safety.
- Ensure all survivors, regardless of age or immigration status, are entitled to support, equal access to welfare systems and legal tools that can provide protection from abuse, in accordance with the requirements of the Istanbul Convention which the Bill seeks to ratify.
- Extend eligibility for the existing Domestic Violence (DV) Rule, to ensure all women with insecure immigration status, not only those on spousal visas, are eligible to apply for indefinite leave to remain, and extend the time period for the Destitution Domestic Violence Concession (DDVC) to at least six months.

<sup>1</sup> <https://www.gov.uk/government/publications/domestic-abuse-bill-2020-factsheets>

<sup>2</sup> <https://homeofficemedia.blog.gov.uk/2020/07/07/7626/>



- Deliver safe reporting mechanisms which ensure immigration enforcement is kept completely separate from the domestic abuse response and the safety of the victim is paramount.
- Provide long-term ring-fenced funding to ensure sustainability of BME and migrant 'by and for' specialist services.

### **Family Justice**

There is now a significant body of evidence demonstrating the harm caused to children, young people and their non abusive parents/carers (survivors of domestic abuse) by the family justice system.<sup>3</sup>

*They put you back in the same room as the abuser, to try to get you to mediate with him when he holds all the power and has dominated you for years, you haven't got a chance it's not equal. (Survivor)*

*He went to prison, but the family courts were just interested in him seeing the children. I'm not sure they even knew about the prison stuff. (Survivor)*

*Court services aren't utilising all the services in place that victims need. (Survivor)*

We strongly support the following amendments:

- Ban direct cross-examination in any family, criminal or civil proceedings in all cases involving domestic abuse, sexual abuse, stalking or harassment.
- Guarantee access to special measures for survivors of domestic abuse, sexual abuse, harassment or stalking in the family and civil courts.
- End the assumption of contact in cases where children are at risk of harm from domestic abuse, with contact arrangements in domestic abuse cases based on informed judgement of a child's best interests and safety.
- Prohibit unsupervised contact for a parent waiting for trial, or on bail for, a domestic abuse related offence, or where there are ongoing criminal proceedings for domestic abuse. Amend the proposed definition of domestic abuse to make clear that children experience domestic abuse, and the Children Act 1989 needs to name coercive control as 'harm to children'.

### **Alignment with existing Welsh legislation**

It is crucial that the Domestic Abuse Bill and the VAWDASV (Wales) 2015 Act are complimentary and not contradictory to one another. Welsh Women's Aid remain concerned about the different approaches to legislation and Strategy, which in Wales, reflects the reality that survivors may experience a myriad of different forms of abuse.

- Ensure that proposals for service models and their sustainability are aligned with similar work being carried out in Wales. There needs to be equivalent funding being allocated to support specialist organisations in Wales, that is secure and enables their sustainability. There needs

<sup>3</sup> <https://www.welshwomensaid.org.uk/wp-content/uploads/2019/09/WWA-response-to-MOJ-inquiry-into-family-courts.pdf>

to assurance that duties on non-devolved and devolved public sector funders can work together to ensure that there are not gaps created by the differing legislative agendas.

- Acknowledge the gendered nature of domestic abuse and situate it within the myriad of violence against women and girls, in line with the UK's commitments under international law - including the Convention of the Elimination of All Forms of Discrimination against Women (CEDAW) and the Istanbul Convention and the UN Convention on the Rights of Persons with Disabilities (Article 16).
- The Domestic Abuse Commissioner has effective consultative remit with survivors and services in Wales to ensure there is an understanding of the context as to how devolved and non-devolved competency areas interact and can work effectively to ensure a holistic response in Wales as elsewhere in the UK. To enable this the Commissioners Advisory board should have representation from Wales to ensure the representation of non-devolved of survivors and services in Wales. (Currently the Bill only allows for representation from voluntary organisations for England under Duties of public authority for the Commissioner section 11 Advisory board subsection 4 (b).)

*Any comments or questions regarding this briefing can be directed to:*

**Jordan Brewer**

Welsh Women's Aid

Policy and Research Officer

02920 541 551

[JordanBrewer@welshwomensaid.org.uk](mailto:JordanBrewer@welshwomensaid.org.uk)



Llywodraeth Cymru  
Welsh Government

Ein cyf/Our ref MA/JH/3432/20

Mick Antoniw AS  
Cadeirydd, y Pwyllgor Deddfwriaeth, Cyfiawnder a'r Cyfansoddiad  
Senedd Cymru  
Tŷ Hywel  
Bae Caerdydd  
CF99 1SN  
[Mick.Antoniw@senedd.cymru](mailto:Mick.Antoniw@senedd.cymru)

John Griffiths AS  
Cadeirydd, y Pwyllgor Cydraddoldeb, Llywodraeth Leol a Chymunedau  
Senedd Cymru  
Tŷ Hywel  
Bae Caerdydd  
CF99 1SN  
[John.Griffiths@senedd.cymru](mailto:John.Griffiths@senedd.cymru)

15 Hydref 2020

Annwyl Gadeirydd,

Diolch am eich llythyr ar y cyd, dyddiedig 13 Hydref, mewn ymateb i'm llythyr dyddiedig 30 Medi, ynghylch y Memorandwm Cydsyniad Deddfwriaethol a osodwyd ar 3 Awst mewn perthynas â Bil Cam-drin Domestig Llywodraeth y DU ("y Bil").

Mae cynnydd y Mesur drwy Dŷ'r Arglwyddi yn cael ei ohirio, ac ni ddisgwylir i Ail Ddarlleniad yr Arglwyddi ddechrau tan fis Rhagfyr, gyda champau dilynol y broses graffu Seneddol i ddilyn yn y Flwyddyn Newydd. O ganlyniad, mae'r ddadl yn y Cyfarfod Llawn a oedd i gael ei chynnal ar 10 Tachwedd wedi'i gohirio.

Yn y cyfamser, mae fy swyddogion wrthi'n parhau i drafod gyda'u cymheiriaid yn Llywodraeth y DU ynglŷn â'n hymgais am welliannau i ddarpariaethau penodol yn y Bil. Byddaf yn ysgrifennu atoch i roi'r wybodaeth ddiweddaraf ichi am unrhyw gytundeb ar y materion hyn, gan fynd i'r afael â'r pwyntiau yn eich llythyr diweddaraf wrth i'r trafodaethau fynd rhagddynt.

Yn gywir,

A handwritten signature in black ink, appearing to read 'Jane', with a horizontal line above the first letter.

**Jane Hutt AS/MS**

Y Dirprwy Weinidog a'r Prif Chwip  
Deputy Minister and Chief Whip

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John Griffiths MS – Cadeirydd y Pwyllgor Cydraddoldeb,  
Llywodraeth Leol a Chymunedau

13 Hydref 2020

Annwyl John

**Adroddiad Archwilydd Cyffredinol Cymru: Cysgu Allan yng Nghymru – Problem i Bawb;  
Cyfrifoldeb i Neb**

Cyhoeddodd archwilydd Cyffredinol Cymru yr **Adroddiad** hwn ym mis Gorffennaf, a chafodd ei drafod yn y Pwyllgor Cyfrifon Cyhoeddus fis Medi.

Gan fod eich Pwyllgor chi wedi ymgymryd â gwaith gwerthfawr yn y maes hwn, roedd yr Aelodau o'r farn y dylwn ofyn i'ch Pwyllgor ystyried yr agweddau polisi a drafodwyd yn yr adroddiad.

Bydd y Pwyllgor Cyfrifon Cyhoeddus yn ystyried yr adolygiad o Bartneriaethau Strategol fel rhan o'n hymchwiliad i'r Rhwystrau i weithrediad llwyddiannus Deddf Llesiant Cenedlaethau'r Dyfodol (Cymru) 2015 ac mae'n bosibl y byddwn yn defnyddio'r mater hwnnw fel astudiaeth achos.

Yn gywir,



**Nick Ramsay AS**  
Cadeirydd

Croesewir gohebiaeth yn Gymraeg neu Saesneg / We welcome correspondence in Welsh or English.



Mr John Griffiths MS  
Welsh Parliament  
Cardiff Bay  
Cardiff  
CF99 1SN

Ysgol Cyfraith a  
Gwleidyddiaeth  
Rhodfa'r Amgueddfa  
Caerdydd CF10 3AX

School of Law and Politics  
Museum Avenue  
Cardiff CF10 3AX

029 2068 8059  
[wgc@cardiff.ac.uk](mailto:wgc@cardiff.ac.uk)  
<http://sites.cardiff.ac.uk/wgc/>

22 October 2020

Annwyl Mr Griffiths,

At the end of November 2020 the Wales Governance Centre's *Justice and Jurisdiction* project will come to an end. Our research into the criminal justice system in Wales has uncovered a range of issues including those relating to prison conditions, alternative criminal justice models, the legal economy, and racial disproportionality within the criminal justice system in Wales.

As our project nears its conclusion, I am writing to state that I believe that the Equality, Local Government and Communities Committee should carry out an inquiry into racial disproportionality within the criminal justice system in Wales. Our research over the past two years has identified a wide range of problems that, I believe, require urgent attention. The events over the summer following the tragic killing of George Floyd in May have only added to the case for an inquiry in Wales. And while it is true that Members of the Senedd have referred to our findings on racial disproportionality, there has been no substantial scrutiny of those findings to date.

To further underline the case for an in-depth inquiry I have provided a brief summary of some of the key areas of concern that I feel are worthy of further consideration. The points below include previously unpublished data as well as those taken from our most recent *Prisons, Probation and Sentencing in Wales* report.

## Policing

- Home Office data show that there is a disproportionate use of stop and search on Black and Minority Ethnic (BAME) communities in Wales. In 2018/19, there were 13 stop and searches per 1,000 BAME people in Wales, compared with 5 searches per 1,000 White people. There were 36 stop and searches per 1,000 Black (or Black British) people in Wales in 2018/19, while Asian and Mixed groups shared the same rate of 11 searches per 1,000 people.
- Data on the number of times police tactics were used show that individuals from a BAME background were overrepresented in police use of force statistics in 2018/19. While the 2011 Census found that 4.4% of the Welsh population belonged to a BAME ethnic group, 8.9% of all incidents of police restraint were against individuals from a BAME ethnic background in 2018/19. These incidents include handcuffing (8.9%), limb/body restraints (9.1%), and ground restraints (9%).
- Individuals belonging to a BAME ethnic group in Wales were also overrepresented within police use of 'Less lethal weapons' in 2018/19. One in nine (12.4%) of all incidents where a Conducted Energy Device (i.e. a TASER) was used by Welsh forces was against someone from a BAME background in 2018/19.<sup>1</sup> 13.7% of all incidents where a police dog was used involved individuals from a BAME background.
- 6.6% all arrests made by Welsh police forces in 2018/19 were individuals from a BAME background. Despite comprising 0.6% of the general population, 2.4% of all those arrested in 2018/19 belonged to a Black ethnic group.

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<sup>1</sup> This total includes all incidents including where a CED device is drawn, aimed, arced, red-dot, drive-stun, fired and angle drive-stun.

## **Pleas**

- The Lammy Review in 2017 found that individuals from a BAME background were less likely to enter guilty pleas due to a lack of trust in the criminal justice system. Disaggregated data obtained from the Ministry of Justice show that a slightly higher proportion of White defendants (82.5%) pleaded guilty at the Crown Court in 2019 compared to individuals from a BAME (80.9%) background.

## **First Entrants**

- Although the number of children first entering the criminal justice system has fallen in Wales, the rate has declined unevenly across different ethnic groups since 2010. While the number of White children first entering the criminal justice system in Wales fell by 87%, the number of Asian children declined by 69% and those from Black backgrounds fell by 59%.

## **Sentencing**

- Individuals from a Black (76%), Asian (75%) and Mixed (70%) ethnic group recorded a higher custody rate at the Crown Court in Wales than White (64%) defendants in 2019.
- Those from BAME backgrounds are more likely to receive longer custodial sentences than those belonging to a White ethnic group. The average custodial sentence length in Wales was higher for Mixed (35 months), Asian (33.8 months) and Black (30.4 months) defendants sentenced in Wales in 2019 than for those from White (19.5 months) ethnic groups.

## **The Prison and Probation Population**

- Since 2017, the number of BAME prisoners from Wales (based on home address prior to entering custody) has increased by 14% from 426 in 2017 to 484 in 2019. The overall Welsh prison population fell by 2% during this period.



- In 2019, there were 91 Black people from Wales in prison for every 10,000 of the population. This rate compared to just 14 White people per 10,000 of the population. There were 28 Asian people in prison per 10,000 and 41 people from a Mixed background per 10,000 in prison in 2019.
- Individuals from Black and Mixed ethnic groups are over-represented amongst the probation population in Wales. While White and Asian individuals were under-represented, people from a Black background were 2.5 times over-represented and individuals from Mixed ethnic group were 1.6 times overrepresented in 2019.
- For every 10,000 Black people living in Wales 129 were under probation supervision in 2019. This compared to a rate of 46 per 10,000 for individuals from a White background, 48 for Asian and 80 for those from a Mixed ethnic group.
- The Ministry of Justice's most recent *Statistics on Race in the Criminal Justice System* report found that Black prisoners are more likely to serve a higher proportion of their determinate sentences in prison than any other ethnic group. Disaggregated data show that between 2015 and 2018, Mixed prisoners from Wales (63%) served a higher proportion of their determinate sentences in prison followed by Black (61%), White (57%) and Asian (57%) prisoners.

While criminal justice is reserved to the UK Government, the Welsh Government has a clear set of responsibilities for promoting equality and tackling all forms of discrimination in Wales. The overlap and intersection between the reserved and devolved areas means that this topic has yet to receive any kind of serious analysis or scrutiny. The lack of publicly available Welsh-only criminal justice data has only added to the problem of effective oversight. The Ministry of Justice's own *Statistics on Race in the Criminal Justice System* report, for example, fails to provide a disaggregated picture for Wales and England, while the Lammy review in 2017 also focussed exclusively upon trends in 'England and Wales'.

As it currently stands, there is no clear or authoritative understanding of how different communities across Wales experience and interact with the criminal justice system. It is also unknown what steps could and should to be taken by the Welsh Government to promote

fairness and tackle discrimination within the criminal justice system. I believe that the points outlined above underscore just how important an inquiry into racial disproportionality within the Welsh criminal justice system is at this time.

I would like to take this opportunity to thank you for your time in considering this letter. If you wish to discuss this subject further or require any additional information please do not hesitate to contact me.

Yours sincerely,

Dr Robert Jones