



**Cynulliad Cenedlaethol Cymru  
The National Assembly for Wales**

**Cofnod y Trafodion  
The Record of Proceedings**

**Dydd Mercher, 23 Mehefin 2010  
Wednesday, 23 June 2010**

**Cynnwys**  
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Yn y golofn chwith, cofnodwyd y trafodion yn yr iaith y llefarwyd hwy ynndi yn y Siambr.  
Yn y golofn dde, cynhwyswyd cyfieithiad o'r areithiau hynny.

In the left-hand column, the proceedings are recorded in the language in which they were spoken in the Chamber. In the right-hand column, a translation of those speeches has been included.

*Cyfarfu'r Cynulliad am 1.30 p.m. gyda'r Llywydd (Dafydd Elis-Thomas) yn y Gadair.  
The Assembly met at 1.30 p.m. with the Presiding Officer (Dafydd Elis-Thomas) in the Chair.*

**Y Llywydd:** Trefn ar gyfer cwestiynau i'r Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol.  
**The Presiding Officer:** Order for questions to the Minister for Health and Social Services.

### **Cwestiynau i'r Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol Questions to the Minister for Health and Social Services**

**Y Llywydd:** Tynnwyd cwestiynau 1, OAQ(3)1561(HSS), a 2, OAQ(3)1591(HSS), yn ôl.  
**The Presiding Officer:** Questions 1, OAQ(3)1561(HSS), and 2, OAQ(3)1591(HSS), are withdrawn.

#### **Palliative Care Services**

**Q3 Mark Isherwood:** Will the Minister make a statement on support for palliative care services in Wales? OAQ(3)1582(HSS)

**The Minister for Health and Social Services (Edwina Hart):** I expect health boards to plan, organise and deliver high-quality palliative care to their resident populations. I have increased central recurrent funding to £6.888 million in 2010-11 to improve palliative and end-of-life care across Wales, of which £2.021 million is being offered directly to hospices.

**Mark Isherwood:** I am sure that you will agree that if voluntary hospices were to cease to exist, the provision of integrated health and social care to those in Wales with palliative care needs would be adversely affected and the cost to the public purse much increased. At a time when there is strong downward pressure on levels of public spending and more intense competition for resources, that clearly cannot make sense. Last October, you made an oral statement on palliative care in which you reported that Viv Sugar had agreed to undertake an informal review of the work of the palliative care implementation board to provide assurance that the direction of travel set by her was in line with the requirements of her original report. I would be grateful if you could tell us what timescales and terms of reference were set for that, and what progress has been made with the review so far.

#### **Gwasanaethau Gofal Lliniarol**

**C3 Mark Isherwood:** A wnaiff y Gweinidog ddatganiad am gefnogaeth ar gyfer gwasanaethau gofal lliniarol yng Nghymru? OAQ(3)1582(HSS)

**Y Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol (Edwina Hart):** Yr wyf yn disgwyl i fyrddau iechyd gynllunio, trefnu a darparu gofal lliniarol o safon i'w trigolion. Yr wyf wedi cynyddu cyllid rheolaidd canolog i £6.888 miliwn yn 2010-11 i wella gofal lliniarol a gofal diwedd oes ledled Cymru, a chaiff £2.021 miliwn o hwnnw ei gynnig yn uniongyrchol i hosbisau.

**Mark Isherwood:** Pe bai hosbisau gwirfoddol yn peidio â bod, yr wyf yn siŵr y cytunwch y byddai hynny'n cael effaith andwyol ar y ddarpariaeth o ran gofal iechyd a gofal cymdeithasol integredig i'r rheini yng Nghymru sydd ag anghenion o ran gofal lliniarol, ac y byddai'r gost i bwrs y wlad dipyn yn fwy. Ar adeg pan fo pwysau enfawr ar lefelau gwariant cyhoeddus a phan fo cystadleuaeth ddwysach am adnoddau, mae'n amlwg na all hynny fod yn synhwyrol. Fis Hydref diwethaf, gwnaethoch ddatganiad llafar am ofal lliniarol, ac ynddo bu ichi nodi bod Viv Sugar wedi cytuno i gynnal adolygiad anffurfiol o waith y bwrdd gweithredu gofal lliniarol er mwyn cynnig sicrwydd bod y cyfeiriad yr eir iddo, a bennwyd ganddi hi, yn cyd-fynd â gofynion ei hadroddiad gwreiddiol. Byddwn yn ddiolchgar pe gallech ddweud wrthym pa amserlen a chylch gorchwyl a bennwyd ar gyfer hynny, a pha gynnydd a wnaed hyd yma o safbwynt yr adolygiad.

**Edwina Hart:** I will be happy to share the outcomes of this with Members in due course.

**Edwina Hart:** Yr wyf yn fodlon rhannu canlyniadau hynny â'r Aelodau maes o law.

### Supporting Army Veterans

### Cefnogi Cyn-filwyr

**Q4 Leanne Wood:** Will the Minister outline her department's commitment to supporting army veterans? OAQ(3)1568(HSS)

**C4 Leanne Wood:** A wnaiff y Gweinidog amlinellu ymrwymiad ei hadran i gefnogi cyn-filwyr? OAQ(3)1568(HSS)

**Edwina Hart:** Local health boards have specific targets to consider veterans' needs when planning services, and an obligation to offer priority treatment for veterans with service-related conditions. All LHBs have appointed veterans' health champions. I am fully committed to supporting veterans and recently announced a new mental health service funded from April.

**Edwina Hart:** Mae gan fyrddau iechyd lleol dargedau penodol i ystyried anghenion cyn-filwyr wrth gynllunio gwasanaethau, ac mae'n rhaid iddynt gynnig triniaeth fel mater o flaenoriaeth i gyn-filwyr sydd ag anhwylderau'n ymwneud â'u gwasanaeth milwrol. Mae pob bwrdd iechyd lleol wedi penodi hyrwyddwyr iechyd cyn-filwyr. Yr wyf wedi ymrwymo'n llawn i gefnogi cyn-filwyr, ac yn ddiweddar gwneuthum gyhoeddiad am wasanaeth iechyd meddwl newydd a ariennir o fis Ebrill ymlaen.

**Leanne Wood:** I have recently obtained figures that show that one in 10 soldiers assessed for post-traumatic stress disorder were discharged from the army over a two-year period. The Welsh Assembly Government contributes nearly £0.5 million to an all-Wales service that provides support, but the Rhondda veterans support group has spoken this week about the difficulties of managing without a full trauma care facility. The last time that I raised the issue here in the Senedd, I asked for greater funding to be provided by the Ministry of Defence, because Wales supplies a disproportionate number of people to the British Army. Are you in a position to provide us with any updates on discussions that you have held with your counterparts in Westminster on this issue, and will you also provide us with updates and information on the expert group that you are chairing? I am particularly interested in whether or not army veterans are included on that group.

**Leanne Wood:** Yn ddiweddar, cefais ffigurau sy'n dangos bod un o bob 10 milwr a aseswyd i weld a oeddent yn dioddef o anhwylder straen wedi trawma wedi cael eu rhyddhau o'r fyddin dros gyfnod o ddwy flynedd. Mae Llywodraeth y Cynulliad yn cyfrannu bron i £0.5 miliwn i wasanaeth Cymru gyfan sy'n darparu cymorth, ond mae grŵp cymorth cyn-filwyr y Rhondda wedi sôn yr wythnos hon mor anodd yw ymdopi heb gyfleuster cyflawn ar gyfer gofal trawma. Y tro diwethaf imi godi'r mater yn y fan hon yn y Senedd, gofynnais i'r Weinyddiaeth Amddiffyn ddarparu mwy o gyllid, oherwydd mae Cymru yn cyflenwi nifer uwch na'r cyffredin o bobl i Fyddin Prydain. A ydych mewn sefyllfa i roi'r wybodaeth ddiweddaraf inni am drafodaethau yr ydych wedi'u cynnal â'ch cymheiriaid yn San Steffan ynglŷn â'r mater hwn, ac a wnewch chi hefyd roi'r wybodaeth a'r manylion diweddaraf inni am y grŵp arbenigol yr ydych yn ei gadeirio? Mae gennyf ddiddordeb yn benodol mewn gwybod a gaiff cyn-filwyr o'r fyddin eu cynnwys ai peidio yn y grŵp hwnnw.

**Edwina Hart:** As you are aware, I have requested that each health board designate a champion to articulate on behalf of service and veteran personnel and to ensure that our services are fully in order. I hope that those

**Edwina Hart:** Fel y gwyddoch, yr wyf wedi gofyn i bob bwrdd iechyd benodi hyrwyddwr i siarad ar ran milwyr a chyn-filwyr, a sicrhau bod ein gwasanaethau'n hollol briodol. Gobeithiaf y bydd yr hyrwyddwyr hynny'n

champions will allow us to consider what further resources need to be made available to LHBs. Also, LHBs must look specifically at issues around targeting services when they are planning them; this integrated approach will deal with some of the issues that the Rhondda veterans have dealt with. There is a wider issue here, which you highlighted, around how we get proper service provision across the piece. I would be happy to discuss that with my colleague Carl Sargeant, who has overall responsibility for the armed forces. We have been concentrating in Wales on what services we can deliver in the devolved area, and perhaps we need to look more closely at some of the wider issues across the UK.

**Eleanor Burnham:** There was a statement yesterday and we asked some questions of your colleague Carl Sargeant. I asked whether you would look again at the comments made by Dr Jones, who used to run the specialist psychiatric residential hospital in Llandudno. He commented on the amount of money going to one particular group called 'Combat Stress', and, without criticising, he suggested that other bodies do exist. Mark, Janet and I have mentioned Pathways, which we have visited at different times. Could you reassess that situation? I also mentioned international best practice. I heard a report on the radio recently about the Netherlands, where medical teams are based in combat units while young men are at war, but where post-combat teams are also available, particularly for mental health issues. Could you assure us that you will consider all these matters?

**Edwina Hart:** I was present in the Chamber yesterday for most of Carl Sargeant's statement, which included a considerable number of health issues. I have asked my officials to go through the Record of that statement, and I will respond directly to all Assembly Members who raised health issues.

**Brian Gibbons:** You will be aware, Minister, that probably 10 per cent of British

caniatáu inni ystyried pa adnoddau pellach y mae angen eu darparu i fyrddau iechyd lleol. Yn ogystal, rhaid i fyrddau iechyd lleol edrych yn benodol ar faterion sy'n ymwneud â thargedu gwasanaethau wrth eu cynllunio; bydd y dull gweithredu integredig hwn yn ymdrin â rhai o'r problemau y mae cyn-filwyr y Rhondda wedi ymdrin â hwy. Ceir problem ehangach yma, y bu ichi dynnu sylw ati, ynghylch sut mae cael darpariaeth briodol o ran gwasanaethau'n gyffredinol. Byddwn yn fodlon trafod hynny â'm cydweithiwr, Carl Sargeant, sydd â chyfrifoldeb cyffredinol am y lluoedd arfog. Yr ydym wedi bod yn canolbwyntio yng Nghymru ar y gwasanaethau y gallwn eu darparu yn yr ardal sydd wedi'i datganoli, ac efallai fod angen inni edrych yn fanylach ar rai o'r problemau ehangach ledled y DU.

**Eleanor Burnham:** Cafwyd datganiad ddoe, a bu inni ofyn rhai cwestiynau i'ch cydweithiwr, Carl Sargeant. Gofynnais a fydech yn fodlon ailystyried y sylwadau a wnaed gan Dr Jones, a arferai redeg yr ysbyty preswyl seiciatrig arbenigol yn Llandudno. Gwnaeth sylwadau ynghylch yr arian sy'n mynd i un grŵp penodol o'r enw 'Combat Stress', a heb feirniadu, awgrymodd fod cyrff eraill yn bodoli. Mae Mark, Janet a minnau wedi sôn am ganolfan Pathways, yr ydym wedi ymweld â hi ar wahanol adegau. A allech ailasesu'r sefyllfa honno? Soniais hefyd am arfer gorau rhyngwladol. Clywais adroddiad ar y radio'n ddiweddar am yr Iseldiroedd, lle caiff timoedd meddygol eu lleoli mewn unedau ymladd tra bydd dynion ifanc yn rhyfela, ond lle mae timoedd ar gael hefyd ar ôl i filwyr fod yn ymladd, yn enwedig i ymdrin â phroblemau iechyd meddwl. A allech roi sicrwydd inni y byddwch yn ystyried yr holl faterion hyn?

**Edwina Hart:** Yr oeddwn yn bresennol yn y Siambr ddoe yn ystod y rhan fwyaf o ddatganiad Carl Sargeant, a oedd yn cynnwys nifer sylweddol o faterion yn ymwneud ag iechyd. Yr wyf wedi gofyn i'm swyddogion fynd drwy'r Cofnod o'r datganiad hwnnw, ac ymatebaf yn uniongyrchol i'r holl Aelodau Cynulliad a gododd faterion yn ymwneud ag iechyd.

**Brian Gibbons:** Weinidog, byddwch yn ymwybodol bod 10 y cant, fwy na thebyg, o

armed forces recruits are from Wales. The number of casualties as a consequence probably mirrors the number of people who are recruited. However, considering the distribution of convalescence centres for armed forces personnel, those in Wales are few and far between, compared with Scotland and parts of England. Has any needs assessment been undertaken of the specific needs for convalescence facilities in Wales?

**Edwina Hart:** As an Assembly Government, we have been working with the MOD to forge stronger links between the NHS and the military, in order to improve care and treatment for veterans and service personnel. Several projects have been commissioned to investigate the varying and specific health needs of veterans. Public Health Wales is conducting a needs assessment to support the planning of specialist services for veterans over the next five years, which is due for completion by the end of August. As you will be aware, Professor Bisson is leading a project that is due to report to me in October. We need to recognise that the treatment of injured service personnel is the responsibility of the MOD, and that service personnel receive care in MOD facilities in the first instance.

While armed forces policy is not devolved, we are trying to use all our powers to help to improve the life of veterans. As you know, all major treatment of injured service personnel is carried out in Birmingham. Patients are transferred for specialist care, such as neurology, orthopaedics and so on, to the defence medical rehabilitation centre in Headley Court, or they are discharged to regional rehabilitation units for physiotherapy. Therefore, your question—and Leanne Wood's question—contain several issues that I need to consider further. As we mark Armed Forces Day this week, it is important that we as a Government recognise and fulfil our obligations to service personnel.

recruiwtaid lluoedd arfog Prydain yn hanu o Gymru. Mae nifer y bobl a gaiff eu hanafu, o ganlyniad, fwy na thebyg yn adlewyrchu nifer y bobl a gaiff eu recruiwio. Fodd bynnag, o ystyried dosbarthiad canolfannau gwella ar gyfer aelodau'r lluoedd arfog, prin iawn yw'r rhai a geir yng Nghymru, o'i chymharu â'r Alban a rhannau o Loegr. A oes unrhyw asesiad o anghenion wedi'i gynnal o'r angen penodol am gyfleusterau gwella yng Nghymru?

**Edwina Hart:** Fel Llywodraeth yn y Cynulliad, yr ydym wedi bod yn cydweithio â'r Weinyddiaeth Amddiffyn i feithrin cysylltiadau cryfach rhwng y GIG a'r lluoedd arfog er mwyn gwella gofal a thriniaeth ar gyfer cyn-filwyr a milwyr. Mae llawer o brosiectau wedi'u comisiynu i ymchwilio i anghenion amrywiol a phenodol cyn-filwyr o ran iechyd. Mae Iechyd Cyhoeddus Cymru wrthi'n cynnal asesiad o anghenion i gynorthwyo'r broses o gynllunio gwasanaethau arbenigol ar gyfer cyn-filwyr dros y pum mlynedd nesaf, a disgwylir i'r asesiad gael ei gwblhau erbyn diwedd mis Awst. Fel y gwyddoch, mae'r Athro Bisson yn arwain prosiect y disgwylir iddo adrodd yn ôl wrthyf ym mis Hydref. Mae angen inni gydnabod mai cyfrifoldeb y Weinyddiaeth Amddiffyn yw trin milwyr a gaiff eu hanafu, ac y bydd milwyr yn cael gofal yng nghyfleusterau'r Weinyddiaeth Amddiffyn i ddechrau.

Er nad yw'r polisi ar y lluoedd arfog wedi'i ddatganoli, yr ydym yn ceisio defnyddio ein holl bwerau i helpu i wella bywydau cyn-filwyr. Fel y gwyddoch, caiff pob triniaeth o bwys ar gyfer milwyr sydd wedi'u hanafu ei rhoi yn Birmingham. Os oes ar gleifion angen gofal arbenigol, er enghraifft, ym maes niwroleg, orthopedeg ac yn y blaen, cânt eu trosglwyddo i ganolfan adsefydlu meddygol y Weinyddiaeth Amddiffyn yn Headley Court, neu cânt eu rhyddhau i unedau adsefydlu rhanbarthol i gael ffisiotherapi. Felly, mae eich cwestiwn chi—a chwestiwn Leanne Wood—yn cynnwys llawer o faterion y mae angen imi eu hystyried ymhellach. Wrth inni nodi Diwrnod y Lluoedd Arfog yr wythnos hon, mae'n bwysig ein bod ni fel Llywodraeth yn cydnabod ac yn cyflawni ein rhwymedigaethau i filwyr.

**Homecare Services**

**Q5 Janet Ryder:** Will the Minister make a statement on homecare services for the elderly? OAQ(3)1562(HSS)

**The Deputy Minister for Social Services (Gwenda Thomas):** Local authorities have the statutory responsibility for providing homecare where this best meets individuals' assessed care needs. We have a clear strategy under 'Fulfilled Lives, Supportive Communities' to increase the independence of older people through effective homecare provision. Last year, homecare services were provided to approximately 20,000 older people in Wales.

**Janet Ryder:** I have a constituent in my region who is waiting to be discharged from hospital. She is elderly and needs homecare support, but she needs it through the medium of Welsh. This lady lives in Denbighshire, where the council informs me that many of its services are contracted out, and that it is not a part of its contract to employ people who can work through the medium of Welsh—that is not stipulated, the council just hopes that it happens. Unfortunately, at present, it says that it has no-one who can support this lady through the medium of Welsh. Would you consider it part of your department's role, Deputy Minister, to ensure that everyone receives the homecare service that they need, whether it is delivered by a local authority or not? Furthermore, would you ensure that older people, especially, can receive this service through a necessary language and their language of first choice? If that is the case, will you take this issue up with Denbighshire council?

**Gwenda Thomas:** I sympathise with the points that you make, Janet. I agree that language is important, and can be a preventative measure as well. If you write to me specifically on that issue, I would be glad to investigate. However, on a broader aspect of what you raise, the Welsh language task group that I chair, and which the Minister set up, has done a lot of work on developing front-line services so that they can be

**Gwasanaethau Gofal Cartref**

**C5 Janet Ryder:** A wnaiff y Gweinidog ddatganiad am wasanaethau gofal cartref ar gyfer yr henoed? OAQ(3)1562(HSS)

**Y Dirprwy Weinidog dros Wasanaethau Cymdeithasol (Gwenda Thomas):** Mae gan awdurdodau lleol gyfrifoldeb statudol dros ddarparu gofal cartref, os dyna yw'r ffordd orau o ddiwallu anghenion asesedig unigolion o ran gofal. Mae gennym strategaeth glir dan 'Bywydau Bodlon, Cymunedau Cefnogol' i gynyddu annibyniaeth pobl hŷn drwy ddarpariaeth effeithiol o ran gofal cartref. Y llynedd, darparwyd gwasanaethau gofal cartref i oddeutu 20,000 o bobl hŷn yng Nghymru.

**Janet Ryder:** Mae gennyf etholwraig yn fy rhanbarth sy'n aros i gael ei rhyddhau o'r ysbyty. Mae'n hen ac mae angen cymorth gofal cartref arni, ond mae angen y cymorth hwnnw arni drwy gyfrwng y Gymraeg. Mae'r ddynes hon yn byw yn sir Ddinbych, lle dywed y cyngor wrthyf y caiff llawer o'i wasanaethau eu contractio allan, ac nad yw cyflogi pobl a all weithio drwy gyfrwng y Gymraeg yn rhan o'i contract—ni chaiff hynny ei nodi, a'r cyfan a wna'r cyngor yw gobeithio y bydd yn digwydd. Yn anffodus, ar hyn o bryd, dywed nad oes ganddo neb a all gynorthwyo'r ddynes hon drwy gyfrwng y Gymraeg. A fydddech yn ystyried mai rhan o rôl eich adran chi, Ddirprwy Weinidog, yw sicrhau bod pawb yn cael y gwasanaeth gofal cartref y mae ei angen arnynt, boed yn wasanaeth a ddarperir gan awdurdod lleol ai peidio? At hynny, a fydddech yn fodlon sicrhau bod pobl hŷn, yn enwedig, yn gallu cael y gwasanaeth hwn drwy iaith angenrheidiol ac iaith sy'n ddewis cyntaf iddynt? Os felly, a wnewch chi godi'r mater hwn gyda chyngor sir Ddinbych?

**Gwenda Thomas:** Yr wyf yn cydymdeimlo â'r pwyntiau a wnewch, Janet. Cytunaf fod iaith yn bwysig, ac y gall fod yn fesur ataliol hefyd. Pe baech yn ysgrifennu ataf ynghylch y mater hwnnw'n benodol, byddwn yn fwy na pharod i ymchwilio iddo. Fodd bynnag, o ran agwedd ehangach ar y pwynt a godwyd gennych, mae'r grŵp gorchwyl iaith Gymraeg yr wyf yn ei gadeirio, ac a sefydlwyd gan y Gweinidog, wedi gwneud

delivered through the medium of Welsh, and every public body is subject to its own Welsh language scheme. However, I am concerned about this specific case, and if you send me the details, I will investigate it.

llawer o waith ar ddatblygu gwasanaethau rheng flaen er mwyn iddynt allu cael eu darparu drwy gyfrwng y Gymraeg, ac mae pob corff cyhoeddus yn rhwym wrth ei gynllun iaith Gymraeg ei hun. Fodd bynnag, yr wyf yn pryderu am yr achos penodol hwn, ac ymchwiliad iddo os anfonwch y manylion ataf.

1.40 p.m.

**William Graham:** Deputy Minister, you will be aware of the recent report by the Care and Social Services Inspectorate Wales on third-party payments for homecare fees. The report highlighted that these payments, which are charged across most local authority boundaries, are a bigger issue in some areas than others, with greater numbers of people being affected in certain areas. The lowest rate surveyed was in parts of the south Wales Valleys, and the highest in the urban communities of Cardiff, Swansea and Newport. How is your Government monitoring the prevalence of third-party payments to ensure fairness across all sectors in Wales?

**William Graham:** Ddirprwy Weinidog, byddwch yn ymwybodol o'r adroddiad diweddar gan Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru ar daliadau trydydd parti ar gyfer ffioedd gofal cartref. Tynnodd yr adroddiad sylw at y ffaith bod y taliadau hyn, a godir ar draws ffiniau'r rhan fwyaf o awdurdodau lleol, yn fwy o broblem mewn rhai ardaloedd nag eraill, a bod y broblem yn effeithio ar fwy o bobl mewn rhai ardaloedd. Yr oedd y gyfradd isaf a arolygwyd mewn rhannau o Gymoedd de Cymru, ac yr oedd y gyfradd uchaf yng nghymunedau trefol Caerdydd, Abertawe a Chasnewydd. Sut mae eich Llywodraeth yn monitro cyffredinolrwydd taliadau trydydd parti er mwyn sicrhau tegwch ar draws pob sector yng Nghymru?

**Gwenda Thomas:** This report deals with residential care, and the variation in third-party top-ups charged is quite significant. I saw the report yesterday, and I am considering it in detail. As you probably know, the report made two recommendations, and I will consider the best way of taking them forward.

**Gwenda Thomas:** Mae'r adroddiad hwn yn ymdrin â gofal preswyl, ac mae'r taliadau trydydd parti atodol a godir yn amrywio'n eithaf sylweddol. Gwelais yr adroddiad ddoe, ac yr wyf yn ei ystyried yn fanwl. Fel y gwyddoch, fwy na thebyg, gwnaeth yr adroddiad ddau argymhelliad, a byddaf yn ystyried y ffordd orau o'u symud yn eu blaen.

**Jenny Randerson:** Last week, the British Lung Foundation Wales came to the Assembly, and many Members met patients with lung disease. The problems that those patients face include the fact that pulmonary rehabilitation—I am sorry; I have not asked my original question.

**Jenny Randerson:** Yr wythnos diwethaf, daeth Sefydliad Prydeinig yr Ysgyfaint Cymru i'r Cynulliad, a chyfarfu llawer o'r Aelodau â chleifion sydd â chlefyd yr ysgyfaint. Mae'r problemau y mae'r cleifion hynny'n eu hwynebu yn cynnwys y ffaith bod gwasanaethau adsefydlu ysgyfeiniol—mae'n flin gennyf; nid wyf wedi gofyn fy nghwestiwn gwreiddiol.

**The Presiding Officer:** Order. That did occur to me. [*Laughter.*]

**Y Llywydd:** Trefn. Yr oeddwn wedi sylwi. [*Chwerthin.*]

**Jenny Randerson:** I will ask the original question, Presiding Officer; you were very indulgent to let me go on for so long.

**Jenny Randerson:** Gofynnaf y cwestiwn gwreiddiol, Lywydd; buoch yn garedig iawn wrth adael imi siarad gyhyd.



**Health Pledges**

**Q6 Jenny Randerson:** Will the Minister make a statement on the health pledges in 'One Wales'? OAQ(3)1618(HSS)

**Edwina Hart:** Over half of the 'One Wales' commitments on health and social services have been met, and we are on target to deliver the remaining commitments by 2011. A table containing progress on all health and social services 'One Wales' commitments is published quarterly on the Assembly Government website.

**Jenny Randerson:** As you may have guessed, my supplementary question is about pulmonary rehabilitation. Some parts of Wales still do not have this service, and in other areas the waiting times are too long. The patients with whom I spoke talked with a very positive attitude about the positive impact that this treatment had had on their lives. However, they said that there were two issues that need to be addressed, particularly in my area of Cardiff. The first is awareness by general practitioners that they can prescribe this treatment; many GPs do not appear to be aware of this and have to be reminded. The second issue that they raised is that, having had their pulmonary rehabilitation, they tend to fall back with their fitness, and they asked whether it would be possible to have repeated exercise classes in order to maintain their improved levels of fitness. Both of those issues could be addressed easily, particularly raising the awareness of GPs through the training and information that they receive from your department. Would you be prepared to tackle those problems?

**Edwina Hart:** Thank you for raising these issues with me. I am aware that there was very good attendance at that event, with AMs meeting many of their constituents. I take on board the two points that you raised, on

**Addewidion Iechyd**

**C6 Jenny Randerson:** A wnaiff y Gweinidog ddatganiad am yr addewidion iechyd yn 'Cymru'n Un'? OAQ(3)1618(HSS)

**Edwina Hart:** Mae dros hanner ymrwymadau 'Cymru'n Un' ym maes iechyd a gwasanaethau cymdeithasol wedi'u cyflawni, ac yr ydym ar y trywydd iawn i gyflawni'r ymrwymadau sy'n weddill erbyn 2011. Caiff tabl sy'n dangos y cynnydd yng nghyswllt pob ymrwymiad ym maes iechyd a gwasanaethau cymdeithasol yn 'Cymru'n Un' ei gyhoeddi bob chwarter ar wefan Llywodraeth y Cynulliad.

**Jenny Randerson:** Efallai eich bod wedi dyfalu bod fy nghwestiwn atodol yn ymwneud â gwasanaethau adsefydlu ysgyfeiniol. Nid oes gwasanaeth o'r fath ar gael o hyd mewn rhai rhannau o Gymru, ac mae amseroedd aros yn rhy hir mewn ardaloedd eraill. Yr oedd y cleifion y siaredais i â hwy yn canmol yr effaith gadarnhaol yr oedd y driniaeth hon wedi'i chael ar eu bywydau. Fodd bynnag, dywedasant fod angen mynd i'r afael â dwy broblem, yn enwedig yn fy ardal i o Gaerdydd. Y broblem gyntaf yw ymwybyddiaeth meddygon teulu o'r ffaith y gallant ragnodi'r driniaeth hon; ymddengys nad yw llawer o feddygon teulu'n ymwybodol o hynny a bod yn rhaid eu hatgoffa. Yr ail broblem a godwyd ganddynt oedd bod lefel eu ffïtrwydd yn tueddu i ddirywio, ar ôl cael eu triniaeth adsefydlu ysgyfeiniol, ac yr oeddent yn gofyn a fyddai'n bosibl cael dosbarthiadau ymarfer corff mynych er mwyn cynnal eu lefelau gwell o ffïtrwydd. Gellid mynd i'r afael yn hawdd â'r ddwy broblem o dan sylw, yn enwedig yr un sy'n ymwneud â chodi ymwybyddiaeth meddygon teulu drwy'r hyfforddiant a'r wybodaeth a gânt gan eich adran. A fydddech yn barod i fynd i'r afael â'r problemau hynny?

**Edwina Hart:** Diolch am godi'r materion hyn gyda mi. Yr wyf yn ymwybodol i lawer iawn o bobl fynychu'r digwyddiad hwnnw, ac i Aelodau'r Cynulliad gyfarfod â llawer o'u hetholwyr. Yr wyf yn derbyn y ddau

raising awareness among GPs and the fall back in patients' fitness levels after their initial treatment; I am more than happy to look at these issues, and will discuss them with my officials before reporting back to the Assembly.

**Joyce Watson:** Minister, I know that you have pledged to make the facilities of hospitals in Wales fit for the twenty-first century, and I thank you for visiting Ystradgynlais General Day Hospital in my region recently to witness its transformation into a modern facility that we can be proud of. Work on the building was done in stages so that patients and staff would not have to be relocated at any stage, providing the best possible care for patients while those important improvements were being made. Do you agree that the investment in Ystradgynlais hospital, and the manner in which the work was carried out, has helped to secure its future?

**Edwina Hart:** I was very pleased to visit Ystradgynlais hospital, and I was impressed by the quality of the building; it is a much more modern building as a result of the work that was undertaken. It was a pleasure to meet the committed staff and representatives of the local community, who felt that the hospital could be developed further for additional services, which I thought was important, with more consultants coming out from the district general hospitals to do things, perhaps. There was also a suggestion of looking at the travel issues within the area to see what areas are closer to Ystradgynlais hospital than other hospitals and where it could perhaps do more outpatient work. I concur with your comments, and it is something that I will be asking officials to look at in order to make maximum use of such excellent facilities.

**Andrew R.T. Davies:** Minister, I wonder whether I could elicit from you an explanation of how the work done by McKinsey and Company for the Welsh Assembly Government has informed the Government's thinking. Is what it has produced a working document or a detailed

bwynt a godwyd gennych ynghylch yr angen i godi ymwybyddiaeth ymhlith meddygon teulu, a'r dirywiad yn lefelau ffitrwydd cleifion ar ôl eu triniaeth ddechreuol. Yr wyf yn fwy na pharod i ystyried y materion hyn, ac fe'u trafodaf â'm swyddogion cyn adrodd yn ôl i'r Cynulliad.

**Joyce Watson:** Weinidog, gwn eich bod wedi addo sicrhau bod cyfleusterau ysbytai yng Nghymru yn addas i'r unfed ganrif ar hugain, a diolchaf ichi am ymweld ag Ysbyty Dydd Cyffredinol Ystradgynlais yn fy rhanbarth yn ddiweddar i weld y modd y mae'r ysbyty wedi'i drawsnewid yn gyfleuster modern y gallwn ymfalchïo ynddo. Cafodd y gwaith ar yr adeilad ei gyflawni fesul cam fel na fyddai'n rhaid adleoli'r cleifion na'r staff o gwbl, gan ddarparu'r gofal gorau posibl i gleifion tra oedd y gwelliannau pwysig hynny'n cael eu gwneud. A gytunwch fod y buddsoddiad yn ysbyty Ystradgynlais, a'r modd y cyflawnwyd y gwaith, wedi helpu i sicrhau ei ddyfodol?

**Edwina Hart:** Yr oeddwn yn falch iawn o ymweld ag ysbyty Ystradgynlais, a gwnaeth ansawdd yr adeilad argraff fawr arnaf; mae'n adeilad mwy modern o lawer o ganlyniad i'r gwaith a gyflawnwyd. Yr oedd yn bleser cyfarfod â'r staff ymroddedig a chynrychiolwyr y gymuned leol, a deimlai y gellid datblygu'r ysbyty ymhellach ar gyfer gwasanaethau ychwanegol, a oedd yn bwysig yn fy marn i, gyda mwy o feddygon ymgynghorol efallai'n dod allan o'r ysbytai cyffredinol i gyflawni gwaith. Awgrymwyd hefyd y gellid ystyried y materion sy'n ymwneud â thrafnidiaeth yn yr ardal, er mwyn gweld pa ardaloedd sy'n nes i ysbyty Ystradgynlais nag ysbytai eraill, a lle gallai'r ysbyty wneud mwy o waith ar gyfer cleifion allanol efallai. Cytunaf â'ch sylwadau, ac mae'n rhywbeth y byddaf yn gofyn i swyddogion ei ystyried er mwyn sicrhau bod y cyfleusterau hyn sydd mor ardderchog yn cael eu defnyddio gymaint â phosibl.

**Andrew R.T. Davies:** Weinidog, tybed a allaf ofyn ichi esbonio sut mae'r gwaith a wnaed gan McKinsey a'i Gwmni ar gyfer Llywodraeth y Cynulliad wedi llywio syniadau'r Llywodraeth. A yw'r hyn a luniwyd ganddo'n ddogfen weithio ynteu'n adroddiad manwl y mae Llywodraeth y

report on the basis of which the Assembly Government is working? I meet many organisations who have expressed concern about the work that has been done, or interest in that work, and how that it is informing the Assembly Government's thinking on healthcare. There is a report available on the internet about a national medicine management programme, which refers to McKinsey's work as a reference point and a base to start from. Many healthcare professionals and Assembly Members would welcome the opportunity to understand what work was undertaken by McKinsey. Was it a report or was it advice that prompted certain facilities within the Assembly Government to work on strands for future healthcare?

**Edwina Hart:** I am delighted by the level of interest in the work that McKinsey has undertaken for us as the Welsh Assembly Government and within the NHS. There is no doubt, nor any confusion, within NHS organisations about the work that has been undertaken by McKinsey on how to help to develop any future plans. It might be useful for me to issue a written statement on this issue, given the level of interest, to inform Members of progress in this area.

**Andrew R.T. Davies:** Minister, thank you for indicating that you will issue a written statement. It would be greatly appreciated by Members, healthcare professionals and people within the health fraternity. However, would it be fair to say that the annual operating framework, which envisages a 3 per cent reduction in band 6 and above 'Agenda for Change' posts, would have emanated from the McKinsey work on staff modelling and workforce planning? Later this afternoon, we will talk about the stroke services inquiry undertaken by the Health, Wellbeing and Local Government Committee. Many of the positions that would fall within the remit of expanding stroke services and filling some of the gaps in the service would fall into the category of band 5 and above.

**Edwina Hart:** I am sure that Members will raise those issues in the debate later on, to

Cynulliad yn gweithio ar ei sail? Byddaf yn cyfarfod â llawer o sefydliadau sydd wedi mynegi pryder am y gwaith a wnaed, neu sydd wedi mynegi diddordeb yn y gwaith hwnnw, a'r modd y mae'n llywio syniadau Llywodraeth y Cynulliad am ofal iechyd. Mae adroddiad ar gael ar y rhyngwrwyd am raglen genedlaethol ar gyfer rheoli meddyginiaethau, sy'n cyfeirio at waith McKinsey fel cyfeirbwynt a sail i ddechrau gweithio arni. Byddai llawer o weithwyr proffesiynol ym maes gofal iechyd a llawer o Aelodau'r Cynulliad yn croesawu'r cyfle i ddeall pa waith a gyflawnwyd gan McKinsey. Ai adroddiad ydoedd ynteu cyngor a sbardunodd rai cyfleusterau yn Llywodraeth y Cynulliad i weithio ar linyddau ar gyfer gofal iechyd yn y dyfodol?

**Edwina Hart:** Yr wyf yn falch iawn o lefel y diddordeb sydd yn y gwaith y mae McKinsey wedi'i gyflawni ar ein rhan ni fel Llywodraeth y Cynulliad ac yn y GIG. Nid oes dim amheuaeth, na dim dryswch, yn sefydliadau'r GIG ynghylch y gwaith y mae McKinsey wedi'i gyflawni ynghylch sut i helpu i ddatblygu unrhyw gynlluniau yn y dyfodol. Hwyrach y byddai'n ddefnyddiol pe bawn yn cyhoeddi datganiad ysgrifenedig ar y mater hwn, o ystyried lefel y diddordeb, er mwyn rhoi gwybod i'r Aelodau am gynnydd yn y maes hwn.

**Andrew R.T. Davies:** Weinidog, diolch am awgrymu y byddwch yn cyhoeddi datganiad ysgrifenedig. Byddai'r Aelodau, gweithwyr proffesiynol ym maes gofal iechyd a phobl ym maes iechyd yn gwerthfawrogi hynny'n fawr. Fodd bynnag, a fyddai'n deg dweud bod y fframwaith gweithredu blynyddol, sy'n rhagweld gostyngiad o 3 y cant mewn swyddi 'Agenda ar gyfer Newid' band 6 ac uwch, wedi deillio o waith McKinsey ar fodelu staff a chynllunio'r gweithlu? Yn hwyrach y prynhawn yma, byddwn yn sôn am yr ymchwiliad i wasanaethau strôc, a gynhaliwyd gan y Pwyllgor Iechyd, Lles a Llywodraeth Leol. Byddai llawer o'r swyddi a fyddai'n perthyn i'r cylch gorchwyl sy'n ymwneud ag ehangu gwasanaethau strôc, a llenwi rhai o'r bylchau yn y gwasanaeth, yn perthyn i gategori band 5 ac uwch.

**Edwina Hart:** Yr wyf yn siŵr y bydd yr Aelodau yn codi'r materion hynny yn y ddadl

which I will respond. The committee's report on stroke services is excellent. As regards annual operating framework targets, we look at these in the round. We have work available from various sources, we have discussions with officials and LHBs, and these targets emanate from those discussions.

**David Lloyd:** O ran y cwestiwn gwreiddiol am yr addewidion iechyd sydd yn 'Cymru'n Un', un o'r addewidion bendigedig hynny yw'r ymrwymiad i beidio â defnyddio mentrau cyllid preifat o'r newydd yn y gwasanaeth iechyd. Y cwestiwn sy'n deillio o hynny yw: o gofio'r cyfyngiadau ariannol dybryd sydd gerbron, a all y Gweinidog gadarnhau nad oes unrhyw fwrriad i ddefnyddio mentrau cyllid preifat yn y gwasanaeth iechyd yng Nghymru o'r newydd, gan fod mentrau cyllid preifat mor eithriadol o gostus, ac ni allwn ei fforddio beth bynnag?

**Edwina Hart:** As regards the private finance initiative, my position has always related to the cost of PFI in the long term. I am glad that we do not have those exorbitant costs within the Welsh NHS. As I understand it, there are issues about funding PFI projects across the border in England, which go to the heart of the issues that it will face with regard to revenue management. There are particular issues around that. I am pleased that we had the commitment in 'One Wales' regarding PFI and we have worked well within the capital budgets that I have had to provide sustainable capital projects in Wales for the development of the NHS.

#### Access to Healthcare

**Q7 Alun Davies:** Will the Minister provide an update on Welsh Assembly Government initiatives to improve patient access to healthcare? OAQ(3)1616(HSS)

**Edwina Hart:** I have put in place a wide range of programmes to improve access to healthcare services across Wales. I hope that those are bearing fruition as regards patient

yn nes ymlaen, y byddaf yn ymateb iddi. Mae adroddiad y pwyllgor ar wasanaethau strôc yn ardderchog. O ran targedau'r fframwaith gweithredu blynyddol, byddwn yn ystyried y rheini yn eu cyfanrwydd. Mae gwaith ar gael inni o amryw ffynonellau, byddwn yn cael trafodaethau â swyddogion a byrddau iechyd lleol, ac mae'r targedau'n deillio o'r trafodaethau hynny.

**David Lloyd:** On the original question on the health pledges in 'One Wales', one of those wonderful pledges is the commitment not to use private finance initiatives in the health service. The question that arises from that is: bearing in mind the terrible financial restrictions that we currently face, can the Minister confirm that there are no new plans to use PFI in the health service in Wales, given that PFI is so incredibly expensive, and we cannot afford it in any case?

**Edwina Hart:** O ran mentrau cyllid preifat, mae fy safbwynt i bob amser wedi bod yn gysylltiedig â chost mentrau cyllid preifat yn y tymor hir. Yr wyf yn falch nad yw'r costau eithafol hynny gennym yn y GIG yng Nghymru. Caf ar ddeall fod problemau ynghylch ariannu prosiectau mentrau cyllid preifat ar draws y ffin yn Lloegr, sy'n mynd i wraidd y problemau y bydd yn eu hwynebu o safbwynt rheoli refeniw. Ceir problemau penodol ynghylch hynny. Yr wyf yn falch inni gynnwys yr ymrwymiad yn 'Cymru'n Un' ynghylch mentrau cyllid preifat, ac yr ydym wedi gweithio ymhell o fewn y cyllidebau cyfalaf a fu gennyf i ddarparu prosiectau cyfalaf cynaliadwy yng Nghymru i ddatblygu'r GIG.

#### Mynediad at Ofal Iechyd

**C7 Alun Davies:** A wnaiff y Gweinidog ddarparu'r wybodaeth ddiweddaraf am gynlluniau Llywodraeth Cynulliad Cymru i wella mynediad cleifion at ofal iechyd? OAQ(3)1616(HSS)

**Edwina Hart:** Yr wyf wedi rhoi ystod eang o raglenni ar waith i wella mynediad i wasanaethau gofal iechyd ledled Cymru. Gobeithiaf fod y rheini'n dwyn ffrwyth o

access to up-to-date information.

safbwynt mynediad cleifion i'r wybodaeth ddiweddaraf.

1.50 p.m.

**Alun Davies:** Thank you for that response, Minister. You made an announcement recently on the investment in state-of-the-art mobile breast screening units, which has been widely welcomed in the Chamber and in communities throughout Wales. Visiting 100 locations and screening 100,000 women will have a real impact on women's health and on meeting the healthcare needs of communities throughout Wales. Minister, many of us were concerned to hear the UK Government's budget yesterday, and there are real concerns in communities throughout Wales that this type of investment will be lost because of the Liberal-Tory cuts. Minister, will you assure us that you will work hard to ensure that this investment demonstrates our determination to continue to support the front line through these difficult times, and that we will continue to reach out to ensure that healthcare reaches everyone in Wales, despite the best efforts of the Liberal-Conservative coalition to prevent us from doing that?

**Edwina Hart:** The development of the mobile breast care screening units has been welcomed across Wales, and people appreciate that this is the type of investment that you need in those particular services. We have to be realistic in that there are key challenges and a growing pressure on public finances as they impact on jobs and services, and we need to prepare for that proactively within increasingly tight budget settlements. Therefore, it is important that we focus on the investment that we require in the front line within the current budget priorities.

**Jonathan Morgan:** Minister, given the commitment in 'One Wales' to eliminate the use of private sector hospitals by 2011 and that a significant number of patients in Wales are treated and cared for by the independent sector—those living with the consequences

**Alun Davies:** Diolch am yr ymateb hwnnw, Weinidog. Gwnaethoch gyhoeddiad yn ddiweddar am y buddsoddiad mewn unedau teithiol o'r radd flaenaf ar gyfer sgrinio'r fron, a groesawyd gan lawer yn y Siambr ac mewn cymunedau ledled Cymru. Bydd ymweld â 100 o leoliadau a sgrinio 100,000 o fenywod yn cael effaith wirioneddol ar iechyd menywod ac o safbwynt diwallu anghenion gofal iechyd cymunedau ledled Cymru. Weinidog, yr oedd llawer ohonom yn pryderu o glywed cyllideb Llywodraeth y DU ddoe, a cheir pryderon gwirioneddol mewn cymunedau ledled Cymru y bydd y math hwn o fuddsoddiad yn cael ei golli oherwydd y toriadau gan y Torïaid a'r Rhyddfrydwyr. Weinidog, a wnewch chi roi sicrwydd inni y byddwch yn gweithio'n ddiwyd i wneud yn siŵr bod y buddsoddiad hwn yn dangos mor benderfynol yr ydym o barhau i gefnogi'r rheng flaen drwy'r amseroedd anodd hyn, ac y byddwn yn parhau i estyn llaw er mwyn sicrhau bod gofal iechyd yn cyrraedd pawb yng Nghymru, er gwaethaf holl ymdrechion y glymblaid Geidwadol-Ryddfrydol i'n hatal rhag gwneud hynny?

**Edwina Hart:** Mae'r gwaith o ddatblygu'r unedau teithiol ar gyfer sgrinio'r fron wedi'i groesawu ledled Cymru, ac mae pobl yn gwerthfawrogi'r ffaith mai hwn yw'r math o fuddsoddiad y mae ei angen arnoch yn y gwasanaethau penodol hynny. Rhaid inni fod yn realistig o ran sylweddoli bod heriau allweddol, a phwysau cynyddol ar arian cyhoeddus wrth iddynt effeithio ar swyddi a gwasanaethau, ac mae angen inni baratoi'n rhagweithiol ar gyfer hynny o fewn setliadau cyllidebol sy'n fwyfwy tynn. Felly, mae'n bwysig ein bod yn canolbwyntio ar y buddsoddiad y mae arnom ei angen yn y rheng flaen o fewn y blaenoriaethau cyllidebol cyfredol.

**Jonathan Morgan:** Weinidog, o ystyried yr ymrwymiad yn 'Cymru'n Un' i roi'r gorau i ddefnyddio ysbytai'r sector preifat erbyn 2011, a'r ffaith y caiff nifer sylweddol o gleifion yng Nghymru driniaeth a gofal gan y sector annibynnol—y sawl sy'n byw gyda

of mental ill health, for example—can you guarantee that there will be enough capacity in the public sector to care for these patients come May of next year, when this commitment is due to be implemented? If the Minister cannot give that commitment, does this mean that the independent sector will still have a role to play after May of next year?

**Edwina Hart:** This is a commitment in ‘One Wales’ that we are working towards. Like you, I want to ensure that when I give answers to the Chamber, I can give a total commitment. I am currently assessing what my needs and requirements will be during the next few months.

**Rhodri Glyn Thomas:** Weinidog, byddwch yn ymwybodol y bûm yn ymgyrchu i sicrhau gwasanaeth deintyddol i drigolion ardal Castellnewydd Emlyn, lle mae'r ddeintyddfa wedi cau a rhyw 4,000 o gleifion bellach yn gorfod derbyn gwasanaeth o Aberteifi a Hendy-gwyn ar Daf. Cefais gyfarfod ddechrau'r wythnos gyda'r bwrdd iechyd lleol, sydd bellach wedi clustnodi dau ddeintydd a fyddai'n barod i sefydlu deintyddfa yng Nghastellnewydd Emlyn. Fodd bynnag, mae'r deintyddion yn ddibynnol ar eu cytundebau gyda Llywodraeth Cymru i sicrhau bod yr arian a glustnodwyd ar gyfer hyn ar gael iddynt. A allwch roi ymrwymiad y byddwch yn cydweithio â'r bwrdd iechyd lleol i sicrhau bod trigolion Castellnewydd Emlyn yn cael y gwasanaeth y maent yn ei haeddu?

**Edwina Hart:** I am aware of the concerns that your constituents have had about this issue, and the way in which the local health board has tried to deal with it. I give you my commitment that I will do what I can to assist the local health board. If it would be helpful to the Member, it is a point that I am more than happy to discuss with the chair of Hywel Dda Local Health Board when I meet him tomorrow.

**Peter Black:** Minister, you will be aware of the recent report comparing emergency response times for ambulances in Wales with those in England, and I know that you have answered questions on this in the past. That report found that despite an improvement in

chanlyniadau afiechyd meddwl, er enghraifft—a allwch warantu y bydd digon o gapasiti yn y sector cyhoeddus i ofalu am y cleifion hyn erbyn mis Mai y flwyddyn nesaf, pan ddisgwylir i'r ymrwymiad hwn ddod i rym? Os na all y Gweinidog ymrwymo i hynny, a yw'n golygu y bydd gan y sector annibynnol rôl i'w chwarae o hyd ar ôl mis Mai y flwyddyn nesaf?

**Edwina Hart:** Mae hwn yn ymrwymiad ‘Cymru'n Un’ yr ydym yn gweithio tuag ato. Fel chithau, yr wyf finnau am sicrhau y gallaf ymrwymo'n llwyr pan fyddaf yn rhoi atebion i'r Siambr. Yr wyf ar hyn o bryd yn asesu beth fydd fy anghenion a'm gofynion yn ystod yr ychydig fisoedd nesaf.

**Rhodri Glyn Thomas:** Minister, you will know that I have campaigned to secure a dental service for the residents of Newcastle Emlyn, where the dental surgery has closed and some 4,000 patients now have to receive treatment in Cardigan and Whitland. I had a meeting at the beginning of the week with the local health board, which has now earmarked two dentists who would be willing to establish a surgery in Newcastle Emlyn. However, the dentists are dependent on their contracts with the Welsh Government to ensure that the money allocated for this is available to them. Can you give me a commitment that you will work with the local health board to ensure that the residents of Newcastle Emlyn will receive the service that they deserve?

**Edwina Hart:** Yr wyf yn ymwybodol o'r pryderon a fu gan eich etholwyr am y mater hwn, a'r modd y mae'r bwrdd iechyd lleol wedi ceisio ymdrin ag ef. Yr wyf yn addo ichi y gwnaf bopeth posibl i gynorthwyo'r bwrdd iechyd lleol. Mae'n bwynt y byddwn yn fwy na pharod i'w drafod â chadeirydd Bwrdd Iechyd Lleol Hywel Dda pan fyddaf yn cyfarfod ag ef yfory, pe bai hynny o gymorth i'r Aelod.

**Peter Black:** Weinidog, byddwch yn ymwybodol o'r adroddiad diweddar a oedd yn cymharu amseroedd ymateb i argyfwng ar gyfer ambiwlansys yng Nghymru ag amseroedd yn Lloegr, a gwn eich bod wedi ateb cwestiynau ar y mater hwn yn y

response times for emergencies in Wales, Wales is still lagging behind England in the time that it takes to get to emergencies, and that that performance is unsatisfactory. What new targets will you give to the ambulance service to try to put right this deficiency?

**Edwina Hart:** It is important, first of all, to recognise the significant improvement that the ambulance service has made across Wales in recent months. That is down to the hard work and dedication of staff in the ambulance services. I read reports regarding the ambulance provision across the border with interest, and I also discuss this with the ambulance trust; I recently met the chief executive of the ambulance trust to discuss some of these issues. I am also aware that rapid response vehicles are sometimes used in England rather than ambulances, which enhances the time performance. We are currently looking at those areas and you will be aware of my statement on ambulance services.

**Peter Black:** Thank you for that answer, Minister. I recently had some case work in which a constituent of mine was trying to access specialist treatment at a private hospital in Cardiff in a unit owned by a charitable trust. The treatment was funded by Health Commission Wales. The problem was accessing that treatment, because the Welsh Ambulance Services NHS Trust would not provide transport to the facility. After a great deal of fuss, we have managed to secure the transport and yet I recently received a letter from the Welsh Ambulance Services NHS Trust saying that it had not provided transport initially because although the facility is owned and run by a charitable trust it is based in a private hospital and, therefore, it was not prepared to provide the transport. That seems bizarre, given that the treatment was being funded by public money. Is that a common occurrence and does the Welsh Ambulance Services NHS Trust now understand that when patients are accessing services that are publicly funded, irrespective of where those

gorffennol. Canfu'r adroddiad hwnnw fod Cymru, er gwaethaf gwelliant mewn amseroedd ymateb ar gyfer argyfyngau yng Nghymru, yn dal y tu ôl i Loegr o ran yr amser a gymer i gyrraedd argyfyngau, a bod y perfformiad hwnnw'n anfoddfaol. Pa dargedau newydd y byddwch yn eu rhoi i'r gwasanaeth ambiwlans i geisio cywiro'r diffyg hwn?

**Edwina Hart:** Yn gyntaf, mae'n bwysig cydnabod y cynnydd sylweddol y mae'r gwasanaeth ambiwlans wedi'i wneud ledled Cymru yn ystod y misoedd diwethaf. Canlyniad gwaith caled ac ymroddiad staff y gwasanaethau ambiwlans yw hynny. Byddaf yn darllen adroddiadau am y ddarpariaeth o ran ambiwlansys ar draws y ffin gyda diddordeb mawr, a byddaf hefyd yn trafod y mater gyda'r ymddiriedolaeth ambiwlans. Yn ddiweddar, cyfarfûm â phrif weithredwr yr ymddiriedolaeth ambiwlans i drafod rhai o'r materion hyn. Yr wyf hefyd yn ymwybodol y caiff cerbydau ymateb cyflym eu defnyddio weithiau yn Lloegr yn hytrach nag ambiwlansys, sy'n gwella'r perfformiad o ran amser. Yr ydym yn ystyried y meysydd hynny ar hyn o bryd, a byddwch yn ymwybodol o'm datganiad am wasanaethau ambiwlans.

**Peter Black:** Diolch am yr ateb hwnnw, Weinidog. Yn ddiweddar, yr oedd gennyf rywfaint o waith achos lle'r oedd un o'm hetholwyr yn ceisio cael mynediad i driniaeth arbenigol mewn ysbyty preifat yng Nghaerdydd, mewn uned sy'n eiddo i ymddiriedolaeth elusennol. Câi'r driniaeth ei hariannu gan Gomisiwn Iechyd Cymru. Y broblem oedd cael mynediad i'r driniaeth honno, oherwydd nid oedd Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru yn fodlon darparu cludiant i'r cyfleuster. Ar ôl cryn dipyn o ffwdan, yr ydym wedi llwyddo i sicrhau'r cludiant. Eto i gyd, cefais lythyr yn ddiweddar gan Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru i ddweud nad oedd wedi darparu cludiant i ddechrau oherwydd bod y cyfleuster, er mai ymddiriedolaeth elusennol sy'n berchen arno ac sy'n ei redeg, wedi'i leoli mewn ysbyty preifat ac nad oedd, felly, yn barod i ddarparu'r cludiant. Ymddengys hynny'n rhyfedd, o gofio y câi'r driniaeth ei hariannu gan arian cyhoeddus. A yw hynny'n digwydd

services are located, it should in future provide transport without question?

**Edwina Hart:** I thank the Member for drawing this issue to my attention, because it is the first time that a Member has raised an issue of this nature with me. I will have to look at it, discuss it with the various people involved and report back to you.

### Cross-border Health Services

**Q8 The Leader of the Opposition (Nick Bourne):** Will the Minister outline her policies for cross-border health services in Wales? OAQ(3)1604(HSS)

**Edwina Hart:** I wrote to all AMs on 8 June to clarify my expectations and policies in this regard. I refer you to my letter.

**Nick Bourne:** I thank the Minister for that response and, first of all, pay tribute to the many charities, organisations and volunteers who help to provide transport to patients, particularly from Powys to Shropshire and Herefordshire, which, as the Minister knows, can be a long journey from towns and communities such as Rhayader, Nantmel and so on. The Institute of Rural Health has found examples of patients having to pay return taxi fares of up to £70 for a round trip when an ambulance was not appropriate and when they were unable to access Dial-a-Ride. Has the Minister given any thought as to how these sorts of costs can be met? These are often old or vulnerable people who have no way of finding that sort of money and who, therefore, are not accessing the treatment that they need.

**Edwina Hart:** I thank the Member for raising those issues with me, because I expect these costs are of enormous concern to the families and the patients involved. We have to recognise the cross-border dimension in

yn fynych, ac a yw Ymddiriedolaeth GIG Gwasanaethau Ambiwylans Cymru yn deall yn awr y dylai ddarparu cludiant heb os yn y dyfodol pan fydd cleifion yn cael mynediad i wasanaethau a ariennir yn gyhoeddus, ni waeth ymhle y mae'r gwasanaethau hynny wedi'u lleoli?

**Edwina Hart:** Diolchaf i'r Aelod am dynnu fy sylw at y mater hwn, oherwydd dyma'r tro cyntaf i Aelod godi mater o'r fath gyda mi. Bydd yn rhaid imi ei ystyried, ei drafod â'r amryw bobl y mae a wnelo â hwy, ac adrodd yn ôl wrthyh.

### Gwasanaethau Iechyd Trawsffiniol

**C8 Arweinydd yr Wrthblaid (Nick Bourne):** A wnaiff y Gweinidog amlinellu ei pholisïau ar gyfer gwasanaethau iechyd trawsffiniol yng Nghymru? OAQ(3)1604(HSS)

**Edwina Hart:** Ysgrifennais at bob Aelod o'r Cynulliad ar 8 Mehefin i egluro fy nisgwyliadau a'm polisïau yn y cyswllt hwn. Fe'ch cyfeirïaf at fy llythyr.

**Nick Bourne:** Diolchaf i'r Gweinidog am yr ymateb hwnnw. Yn gyntaf, hoffwn roi teyrnged i'r elusennau, y mudiadau a'r gwirfoddolwyr niferus sy'n helpu i ddarparu cludiant i gleifion, yn enwedig o Bowys i Swydd Amwythig a Swydd Henffordd, sydd, fel y gŵyr y Gweinidog, yn gallu bod yn daith hir o drefi a chymunedau megis Rhaeadr Gwy, Nantmel ac yn y blaen. Mae'r Sefydliad Iechyd Gwledig wedi canfod enghreifftiau o gleifion sy'n gorfod talu hyd at £70 am siwrnai ddwy ffordd mewn tacsï, pan nad oedd ambiwlans yn briodol a phan nad oedd modd iddynt ddefnyddio gwasanaeth Galw'r Gyrrwr. A yw'r Gweinidog wedi ystyried sut y gellir talu'r costau hyn? Yn aml, mae'r rhain yn bobl hŷn neu'n bobl agored i niwed nad oes modd iddynt ddod o hyd i arian o'r fath ac nad ydynt, felly, yn cael mynediad i'r driniaeth y mae arnynt ei hangen.

**Edwina Hart:** Diolchaf i'r Aelod am godi'r materion hynny gyda mi, oherwydd tybiaf fod y costau hyn yn peri pryder enfawr i'r teuluoedd a'r cleifion dan sylw. Rhaid inni gydnabod yr agwedd drawsffiniol yn



rural Powys with regard to these particular issues. I am more than happy to take this matter up and will come back to Members on it, because it raises points of real concern.

**Nerys Evans:** Yesterday's UK emergency budget showed the priorities of the Tory and Lib Dem Government in regressive tax proposals such as increasing value-added tax and severe cuts to the benefits system, which will hit us disproportionately in Wales. Do you agree that the new priorities of the Tories and the Lib Dems are directly at odds with the priorities of the Assembly Government, reflected in such policies as free prescriptions, and do you believe that the current cross-border flow from England to Wales for healthcare of around 21,000 people is likely to increase as the harsh reality of the new UK Government's policies and cuts begin to kick in?

**Edwina Hart:** We have to recognise that there are substantial policy differences between us, and free prescriptions is one of those. It is a policy that I am proud that we have introduced, and I am particularly proud that Northern Ireland and Scotland are following in our steps. It is important that the devolved administrations have decided to put their resources into what I think is an important provision that is widely supported by the medical and clinical community as being important for overall health. I think that we will see further divergence in health policy over time. We see changes emerging already from the Department of Health, which makes decisions relating to England. I can criticise those decisions if I wish, but I must also make my own decisions, so we will see increasing divergence. However, it is important that we do not forget what our priorities are. The NHS is in all our souls and hearts in Wales and there it should remain, as should its founding principles.

**Mick Bates:** I listened with interest to your response to Nick Bourne, Minister, about the

ardaloedd gwledig Powys o safbwynt y materion penodol hyn. Yr wyf yn fwy na pharod i godi'r mater hwn, a dof yn ôl at yr Aelodau yn ei gylch, oherwydd mae'n codi pwyntiau sy'n peri pryder gwirioneddol.

**Nerys Evans:** Dangosodd cyllideb frys y DU ddoe beth yw blaenoriaethau Llywodraeth y Torïaid a'r Democratïaid Rhyddfrydol gyda chynigion sy'n mynd â ni tuag yn ôl o ran trethi, megis cynigion i gynyddu treth ar werth a chyflwyno torïadau llym i'r system fudd-daliadau, a fydd yn effeithio'n waeth na'r cyffredin arnom ni yng Nghymru. A gytunwch fod blaenoriaethau newydd y Torïaid a'r Democratïaid Rhyddfrydol yn hollol groes i flaenoriaethau Llywodraeth y Cynulliad, a adlewyrchir mewn polisïau megis presgripsiynau am ddim, ac a gredwch ei bod yn debygol y bydd yr oddeutu 21,000 o bobl sy'n dod ar draws y ffin o Loegr i Gymru i gael gofal iechyd ar hyn o bryd yn cynyddu wrth i wirionedd caled polisïau a thoriadau Llywodraeth newydd y DU ddechrau brathu?

**Edwina Hart:** Rhaid inni gydnabod bod gwahaniaethau sylweddol rhyngom o ran polisi, ac un o'r rheini yw presgripsiynau am ddim. Mae'n bolisi yr wyf yn falch inni ei gyflwyno, ac yr wyf yn arbennig o falch bod Gogledd Iwerddon a'r Alban yn ein dilyn yn hynny o beth. Mae'n bwysig bod y gweinyddiaethau datganoledig wedi penderfynu rhoi eu hadnoddau mewn darpariaeth sy'n bwysig yn fy marn i, ac a gefnogir yn helaeth gan weithwyr meddygol a chlinigol fel rhywbeth sy'n bwysig ar gyfer iechyd yn gyffredinol. Credaf y byddwn yn gweld mwy o wahaniaeth o ran polisi iechyd gydag amser. Gwelwn newidiadau'n ymddangos yn barod o'r Adran Iechyd, sy'n gwneud penderfyniadau yng nghyswllt Lloegr. Gallaf feirniadu'r penderfyniadau hynny os dymunaf, ond rhaid hefyd imi wneud fy mhenderfyniadau fy hun, felly byddwn yn gweld gwahaniaeth cynyddol. Fodd bynnag, mae'n bwysig nad anghofiwn beth yw ein blaenoriaethau. Mae'r GIG yn agos iawn at galon pob un ohonom yng Nghymru, a dylai barhau felly, fel y dylai ei egwyddorion sylfaenol.

**Mick Bates:** Gwrandewais gyda diddordeb ar eich ymateb i Nick Bourne, Weinidog,

position in Powys and the transport problems that are often faced by constituents. I want to ask you about the increasing specialisation of services among English providers and especially cardiac and cancer services, and their impact on Welsh patients. As you know, the local district general hospital for Montgomeryshire is the Royal Shrewsbury Hospital, but discussions are afoot about moving services to more specialist centres, further away in the English midlands. What assessment have you made, and what discussions have you had with Welsh local health boards and English providers, about the impact of moving those services to more specialist centres, and especially on the transport of our patients?

ynghylch y sefyllfa ym Mhowys, a'r problemau cludiant y bydd etholwyr yn aml yn eu hwynebu. Hoffwn eich holi am y modd y mae arbenigedd gwasanaethau'n cynyddu ymhlith darparwyr yn Lloegr, yn enwedig o safbwynt gwasanaethau cardiaidd a gwasanaethau canser, ac am effaith hynny ar gleifion yng Nghymru. Fel y gwyddoch, yr ysbyty cyffredinol lleol ar gyfer sir Drefaldwyn yw Ysbyty Brenhinol yr Amwythig, ond mae trafodaethau ar y gweill ynghylch symud gwasanaethau i ganolfannau mwy arbenigol, ymhellach i ffwrdd yng nghanolbarth Lloegr. Pa asesiad yr ydych wedi'i gynnal, a pha drafodaethau yr ydych wedi'u cael â byrddau iechyd lleol yng Nghymru, a darparwyr yn Lloegr, ynghylch effaith symud y gwasanaethau hynny i ganolfannau mwy arbenigol, yn enwedig yr effaith ar drefniadau cludo cleifion?

2.00 p.m.

**Edwina Hart:** This is not just a Powys issue—it is a wider issue for specialist services across our borders. I have asked the director of the NHS in Wales to look closely at the discussions that are going on across the border about where specialised services might change, and the implications that that might have for Wales, regarding where services are provided for Welsh patients. There is an ongoing piece of work in this area that I will be happy to share with Assembly Members if it is of interest in the future, when I report again on this cross-border issue.

**Edwina Hart:** Nid mater i Bowys yn unig yw hwn—mae'n fater ehangach ar gyfer gwasanaethau arbenigol ar draws ein ffiniau. Yr wyf wedi gofyn i gyfarwyddwr y GIG yng Nghymru edrych yn fanwl ar y trafodaethau sy'n mynd rhagddynt ar draws y ffin ynghylch ble y gallai gwasanaethau arbenigol newid, a goblygiadau posibl hynny i Gymru, o ran ble y caiff gwasanaethau eu darparu ar gyfer cleifion o Gymru. Mae gwaith ar y gweill yn y maes hwn, a byddaf yn barod i'w rannu ag Aelodau'r Cynulliad, os bydd o ddiddordeb yn y dyfodol, pan fyddaf yn adrodd yn ôl eto ynghylch y mater trawsffiniol hwn.

### Training Opportunities in the NHS

**Q9 Jeff Cuthbert:** What is the Welsh Assembly Government doing to increase training opportunities in the NHS? OAQ(3)1595(HSS)

**Edwina Hart:** Ensuring that staff have access to appropriate training opportunities is the responsibility of the employer. The Welsh Assembly Government ensures that there are sufficient training opportunities for new professionals. I have continued to invest in this training annually.

**Jeff Cuthbert:** Thank you very much for that

### Cyfleoedd Hyfforddi yn y GIG

**C9 Jeff Cuthbert:** Beth mae Llywodraeth Cynulliad Cymru yn ei wneud i gynyddu cyfleoedd hyfforddi yn y GIG? OAQ(3)1595(HSS)

**Edwina Hart:** Cyfrifoldeb y cyflogwr yw sicrhau bod gan staff fynediad i gyfleoedd hyfforddi priodol. Mae Llywodraeth y Cynulliad yn sicrhau bod digon o gyfleoedd hyfforddi ar gael i weithwyr proffesiynol newydd. Yr wyf wedi parhau i fuddsoddi yn yr hyfforddiant hwn bob blwyddyn.

**Jeff Cuthbert:** Diolch yn fawr iawn am yr

reply, Minister. According to figures obtained by the Royal College of Midwives, there are presently just under 2,000 registered midwives in Wales. However, the birth rate has gone up by 19 per cent since 2001 and the number of midwives has risen by only 11 per cent in the same period. These days, many more births are complicated, often requiring more than one midwife in attendance. It is not hard to see why we in Wales are starting to feel the pinch given our shortage of midwives. If we are to give women as much choice as possible as to where they give birth, what is the Welsh Assembly Government doing to increase training provision for midwives, so that we are able to train and employ more of them in Wales?

**Edwina Hart:** One hundred and twenty-three training places have been commissioned in 2010, which is an increase from 110 in 2009 and 95 in 2008. The 2010 commissioned figures exceed the workforce plans, which ask for 115 places based on advice from the Royal College of Midwives on retirement rates and birth rates. It is quite a complicated process, but in fact we did not go for the lower figure of 115 that was advised, we went for the higher figure. Also, all LHBs are in the process of training maternity support workers to assist midwives in providing high quality care in the hospital and community setting.

**David Melding:** You will know that it is Learning Disability Week, and I am sure that you will want to welcome Mencap's presence today in the Oriel, where it has been promoting knowledge of annual health checks—a highly innovative policy undertaken by the Welsh Assembly Government. To date, about 47 per cent of people with learning difficulties are receiving an annual health check, which is a considerable achievement, but of course we want that figure to be higher, and there is quite a variation between parts of Wales—the percentage varies from something like 17 per cent up to 70 per cent. Do you agree that some primary healthcare teams need more training in how this excellent policy should

ateb hwnnw, Weinidog. Yn ôl ffigurau a gafwyd gan Goleg Brenhinol y Bydwagedd, mae ychydig dan 2,000 o fydwragedd cofrestredig yng Nghymru ar hyn o bryd. Fodd bynnag, mae'r gyfradd genedigaethau wedi codi 19 y cant er 2001, ond dim ond 11 y cant o gynnydd a gafwyd yn nifer y bydwagedd dros yr un cyfnod. Y dyddiau hyn, mae mwy o lawer o enedigaethau'n gymhleth, ac yn aml bydd angen i fwy nag un fydwraig fod yn bresennol. Nid yw'n anodd gweld pam yr ydym ni, yng Nghymru, yn dechrau dioddef, o ystyried ein prinder bydwagedd. Os ydym am roi cymaint o ddewis â phosibl i fenywod ynghylch ble'r hoffent eni eu plant, beth y mae Llywodraeth y Cynulliad yn ei wneud i gynyddu'r ddarpariaeth o ran hyfforddiant ar gyfer bydwagedd, er mwyn inni allu hyfforddi a chyflogi mwy ohonynt yng Nghymru?

**Edwina Hart:** Mae 123 o leoedd hyfforddi wedi'u comisiynu yn 2010, sy'n fwy na'r 110 yn 2009 a'r 95 yn 2008. Mae'r ffigurau a gomisiynwyd yn 2010 yn uwch na ffigurau'r cynlluniau ar gyfer y gweithlu, sy'n gofyn am 115 o leoedd ar sail cyngor gan Goleg Brenhinol y Bydwagedd ynghylch cyfraddau ymddeol a chyfraddau genedigaethau. Mae'n broses eithaf cymhleth, ond mewn gwirionedd bu inni benderfynu peidio â dewis y ffigur isaf a gynghorwyd, sef 115, gan ddewis y ffigur uchaf. Yn ogystal, mae pob bwrdd iechyd lleol wrthi'n hyfforddi gweithwyr cymorth mamolaeth i gynorthwyo bydwagedd i ddarparu gofal o safon yn yr ysbty ac mewn lleoliadau cymunedol.

**David Melding:** Byddwch yn gwybod ei bod yn Wythnos Anabledd Dysgu, ac yr wyf yn siŵr y byddwch am groesawu presenoldeb Mencap heddiw yn yr Oriel, lle mae wedi bod yn hyrwyddo gwybodaeth am archwiliadau iechyd blynyddol—polisi arloesol tu hwnt a weithredir gan Lywodraeth y Cynulliad. Hyd yma, mae oddeutu 47 y cant o bobl ag anawsterau dysgu'n cael archwiliad iechyd blynyddol, sy'n gamp sylweddol, ond yr ydym wrth reswm am i'r ffigur hwnnw fod yn uwch, ac mae'n amrywio tipyn rhwng gwahanol rannau o Gymru—mae'r ganran yn amrywio o rywbeth tebyg i 17 y cant i hyd at 70 y cant. A gyfunwch fod ar rai timoedd gofal iechyd sylfaenol angen rhagor o hyfforddiant

be delivered?

**Edwina Hart:** Like you, I extend a welcome to Mencap. I am concerned about variations in delivery in the NHS across all areas, and this is of particular concern because, if we are aiming for 40 per cent across the piece, we should not have this level of variation. I am more than happy to ask my officials to look at it, and it is important that we consider what the targets should be across the piece in Wales to ensure that we achieve equity.

**Chris Franks:** How do you intend to monitor and develop training opportunities for practice nurses? As you are aware, they do not automatically fall under the Agenda for Change terms and conditions package for NHS staff. Nurses employed by GPs often find it difficult to access training opportunities. Could you outline the development of nurse-led primary health care and walk-in centres in the Welsh NHS? How will the attack on public services by the UK Government impact on our health training opportunities?

**Edwina Hart:** It is important that we continue to support the shift to primary and community care, even in difficult financial times, and the commissioning of education to support nurses working in the community. We have very good programmes on a modular basis to enable experienced secondary care nurses to work in the community. We now have the community nursing strategy for Wales, which looks at the needs of nurses and the opportunities for training opportunities in the community. The chief nursing officer is chairing an implementation group, which will look closely at the national programme for primary care to ensure that community nurses are integral to it and that the training of nurses is considered. We also have the five-year service, workforce and financial strategic framework for the NHS and an enabling group, which is considering the matter of training in the community.

ynghylch sut y dylid gweithredu'r polisi ardderchog hwn?

**Edwina Hart:** Fel chithau, yr wyf finnau'n estyn croeso i Mencap. Yr wyf yn pryderu ynghylch y modd y mae'r ddarpariaeth yn amrywio yn y GIG ar draws pob ardal. Mae'n peri pryder arbennig gan na ddylem fod yn gweld cymaint o amrywiaeth os ydym yn anelu at 40 y cant yn gyffredinol. Yr wyf yn fwy na pharod i ofyn i'm swyddogion edrych ar y mater, ac mae'n bwysig ein bod yn ystyried pa dargedau y dylid eu pennu'n gyffredinol yng Nghymru i wneud yn siŵr ein bod yn sicrhau tegwch.

**Chris Franks:** Sut yr ydych yn bwriadu monitro a datblygu cyfleoedd hyfforddi ar gyfer nyrsys practis? Fel y gwyddoch, nid yw pecyn amodau a thelerau Agenda ar gyfer Newid i staff y GIG yn berthnasol iddynt yn awtomatig. Yn aml, bydd nyrsys a gyflogir gan feddygon teulu'n ei chael yn anodd cael mynediad i gyfleoedd hyfforddi. A allech amlinellu'r broses ar gyfer datblygu gofal iechyd sylfaenol a arweinir gan nyrsys, a chanolfannau galw i mewn yn y GIG yng Nghymru? Sut y bydd ymosodiad Llywodraeth y DU ar wasanaethau cyhoeddus yn effeithio ar ein cyfleoedd hyfforddi ym maes iechyd?

**Edwina Hart:** Mae'n bwysig ein bod yn parhau i gefnogi'r newid i ofal sylfaenol a chymunedol, hyd yn oed mewn cyfnod ariannol anodd, a chomisiynu addysg i gynorthwyo nyrsys sy'n gweithio yn y gymuned. Mae gennym raglenni modwlar da iawn i alluogi nyrsys profiadol ym maes gofal eilaidd i weithio yn y gymuned. Erbyn hyn, mae gennym y strategaeth nyrsio cymunedol i Gymru, sy'n ystyried anghenion nyrsys a'r cyfleoedd i gael hyfforddiant yn y gymuned. Mae'r prif swyddog nyrsio yn cadeirio grŵp gweithredu, a fydd yn edrych yn fanwl ar y rhaglen genedlaethol ar gyfer gofal sylfaenol er mwyn sicrhau bod nyrsys cymunedol yn rhan annatod ohoni a bod gwaith hyfforddi nyrsys yn cael ei ystyried. Yn ogystal, mae gennym y fframwaith strategol pum mlynedd i'r GIG ar gyfer gwasanaethau, y gweithlu a chyllid, ynghyd â grŵp galluogi sy'n ystyried hyfforddiant yn y gymuned.

Your point on practice nurses is quite right. If local health boards employ general practitioners and practice nurses, then they are subject to Agenda for Change and should be given the relevant time off for training. However, that is not necessarily the case across the piece, and that issue has been raised with me by the Royal College of Nursing and by UNISON, which represents nurses. The terms and conditions of practice nurses may not conform to the national indicators, and they do not necessarily have any time off for training. However, general practitioners are contractors to the NHS and they are effectively running small businesses. That is a matter of concern for me.

We are making good progress on nurse-led issues. We recently had discussions with the RCN and, as you know, I am keen to ensure that that 'One Wales' commitment is delivered.

#### **Gwasanaethau Sgrinio'r Coluddyn**

**C10 David Lloyd:** A wnaiff y Gweinidog ddatganiad am wasanaethau sgrinio'r coluddyn yng Nghymru? OAQ(3)1579(HSS)

**Edwina Hart:** The aim of Bowel Screening Wales is to reduce the mortality rate for bowel cancer by 15 per cent in the screened population by 2020. In the first year of the programme, 195,633 people have been invited to participate and an uptake of 58.5 per cent was achieved.

**David Lloyd:** Diolch am yr ateb hwnnw, Weinidog. Yr ydych yn ymwybodol mai sgrinio pobl dros 60 mlwydd oed a wneir ar hyn o bryd, ond bod cancer y coluddyn hefyd yn effeithio ar bobl sy'n iau na hynny. Yr wyf wedi cael llythyrau yn gofyn pryd y byddwn yn ymestyn y rhaglen sgrinio fendigedig hon ar gyfer cancer y coluddyn i gynnwys pobl iau na'r rhai yr ydym yn eu sgrinio ar hyn o bryd.

**Edwina Hart:** As you indicated, the national screening committee has recommended that there should be a national screening programme for men and women aged 50 to

Mae eich pwynt ynghylch nyrsys practis yn ddigon cywir. Os yw byrddau iechyd lleol yn cyflogi meddygon teulu a nyrsys practis, yna bydd Agenda ar gyfer Newid yn berthnasol iddynt a dylent gael yr amser priodol i ffwrdd i gael hyfforddiant. Fodd bynnag, nid yw hynny o reidrwydd yn digwydd yn gyffredinol, ac mae'r mater hwnnw wedi'i godi gyda mi gan y Coleg Nyrsio Brenhinol ac UNSAIN, sy'n cynrychioli nyrsys. Efallai nad yw amodau a thelerau nyrsys practis yn cydymffurfio â'r dangosyddion cenedlaethol, ac nid ydynt o reidrwydd yn cael amser i ffwrdd i gael hyfforddiant. Fodd bynnag, mae meddygon teulu yn contractwyr i'r GIG, ac maent i bob pwrpas yn rhedeg busnesau bach. Yr wyf yn pryderu ynghylch hynny.

Yr ydym yn gwneud cynnydd da o ran materion a arweinir gan nyrsys. Yn ddiweddar, cawsom drafodaethau â'r Coleg Nyrsio Brenhinol ac, fel y gwyddoch, yr wyf yn awyddus i sicrhau y caiff yr ymrwymiad 'Cymru'n Un' hwnnw ei gyflawni.

#### **Bowel Screening Services**

**Q10 David Lloyd:** Will the Minister make a statement on bowel screening services in Wales? OAQ(3)1579(HSS)

**Edwina Hart:** Nod Sgrinio Coluddion Cymru yw lleihau'r gyfradd marwolaethau ar gyfer cancer y coluddyn 15 y cant ymysg y boblogaeth a gaiff ei sgrinio, erbyn 2020. Yn ystod blwyddyn gyntaf y rhaglen, cafodd 195,633 o bobl eu gwahodd i gymryd rhan, a manteisiodd 58.5 y cant ohonynt ar y cyfle i gael eu sgrinio.

**David Lloyd:** Thank you for that answer, Minister. You will be aware that, currently, it is those over the age of 60 who are screened, but that bowel cancer also affects those who are younger than that. I have received letters asking when we will extend this wonderful screening programme for bowel cancer to include those who are younger than those whom we screen at the moment.

**Edwina Hart:** Fel yr oeddech yn nodi, mae'r pwyllgor sgrinio cenedlaethol wedi argymhell y dylid cael rhaglen sgrinio genedlaethol ar gyfer dynion a menywod sydd rhwng 50 a 74

74, given that they are the high-risk group. People with a family history of bowel cancer can be referred to the genetic service, and, where appropriate, they have regular surveillance. People of any age with any symptoms can also go to their general practitioner. All issues around screening are dictated by the advice of the national screening committee. There are other areas of screening, such as ovarian screening, that people want to look at, which will be subject to a determination at a national level based on the advice given to me. Even in these difficult circumstances with the financial settlement, I hope that if the advice is to carry out further screening in any area, then the Assembly Government would prioritise that.

**Brynle Williams:** I can speak from experience of the excellent services provided by the national health service for people with bowel conditions. Minister, I am sure that you share my concern that the bowel cancer screening pilot initiative showed that Wales has a cancer rate on a par with the poorest regions of England. However, given the value of early intervention with regard to this disease, as you just highlighted, can you provide reassurance that your Government is fully committed to continuing to work to raise public awareness and to encourage those who are at risk, but have no symptoms, to come forward for testing?

**Edwina Hart:** You make a good point about public awareness and on what more we need to do on some of these issues to increase it. I am disappointed with the uptake figure for screening in Wales of 58.5 per cent that I quoted to you earlier. If we are only getting that response from those who are deliberately targeted, then what would be the case for the rest of the population? Therefore, there is a wider issue for me about the screening programme, and, importantly, to raise people's awareness of symptoms. I am happy to take this forward in discussions with the chief medical officer who, as you know, regularly produces publications.

oed, o gofio mai nhw sy'n perthyn i'r grŵp risg uchel. Gall pobl â pherthnasau sydd wedi dioddef o ganser y coluddyn gael eu cyfeirio at y gwasanaeth genetig, a chedwir golwg arnynt yn rheolaidd, os yw hynny'n briodol. Yn ogystal, gall pobl o unrhyw oed sydd ag unrhyw symptomau fynd at eu meddyg teulu. Caiff unrhyw faterion sy'n ymwneud â sgrinio eu rheoli gan gyngor y pwyllgor sgrinio cenedlaethol. Ceir agweddau eraill ar sgrinio, megis sgrinio ofariau, y mae pobl yn dymuno'u hystyried, a fydd yn dibynnu ar benderfyniad a wneir ar lefel genedlaethol ar sail y cyngor a roddir imi. Hyd yn oed yn yr amgylchiadau anodd hyn o safbwynt y setliad ariannol, gobeithiaf y byddai Llywodraeth y Cynulliad yn rhoi blaenoriaeth i ragor o waith sgrinio yn y maes hwnnw, os dyna'r cyngor a geir.

**Brynle Williams:** Gallaf siarad o brofiad am y gwasanaethau ardderchog a ddarperir gan y gwasanaeth iechyd gwladol i bobl sy'n dioddef o anhwylderau'r coluddyn. Weinidog, yr wyf yn siŵr eich bod chithau, fel finnau, yn pryderu i'r prosiect peilot ar gyfer sgrinio canser y coluddyn ddangos bod gan Gymru gyfradd canser sydd yr un mor wael â rhanbarthau tlotaf Lloegr. Fodd bynnag, o gofio gwerth ymyrryd yn gynnar yng nghyswllt y clefyd hwn, fel yr ydych newydd bwysleisio, a allwch roi sicrwydd bod eich Llywodraeth wedi ymrwymo'n llawn i barhau i weithio i godi ymwybyddiaeth y cyhoedd, ac annog y rheini sydd mewn perygl ond nad oes ganddynt symptomau i ddod i gael prawf?

**Edwina Hart:** Yr ydych yn gwneud pwynt da ynghylch ymwybyddiaeth y cyhoedd ac ynghylch beth arall y mae angen inni ei wneud yng nghyswllt rhai o'r materion hyn i hybu ymwybyddiaeth. Mae canran y bobl yng Nghymru sydd wedi manteisio ar y cyfle i gael eu sgrinio, sef 58.5 y cant, y ffigur a ddyfynnais yn gynharach, yn siomedig. Os dyna'r ymateb a gawn gan y sawl a dargedir yn fwriadol, beth fyddai'r ymateb yn achos gweddill y boblogaeth? Felly, yn fy marn i, mae problem ehangach ynghlwm wrth y rhaglen sgrinio, ac yn bwysicach na hynny, wrth yr angen i godi ymwybyddiaeth pobl o symptomau. Yr wyf yn fodlon codi'r mater hwn mewn trafodaethau â'r prif swyddog meddygol sydd, fel y gwyddoch, yn

cynhyrchu cyhoeddiadau'n rheolaidd.

### Capital Expenditure Projects in the NHS

**Q11 Jonathan Morgan:** Will the Minister confirm when she last reviewed the process for approving capital expenditure projects in the NHS? OAQ(3)1615(HSS)

**Edwina Hart:** Guidance was issued to the NHS in June 2007 and some amendments have subsequently been made.

2.10 p.m.

We are now undertaking a fundamental review of the process to reflect my reforms of the NHS and the need for investment and decisions to be better evidenced.

**Jonathan Morgan:** I am grateful to the Minister for that reply. As you will know, I have been concerned for some time with the way in which the proposed redevelopment of Whitchurch Hospital has been handled. As I understand it, the local health board decided to start the project after outline approval was obtained from the Welsh Assembly Government but before the full business case was approved. Furthermore, I understand that the commencement of the project, with £6 million being spent, took place despite reservations being voiced by the current chief executive of the NHS, Paul Williams. I discovered this after meeting the current chief executive of Cardiff and Vale University Local Health Board. Surely you will agree with me that a process that allows a public body to spend money before a full business case has been submitted and approved, and a process that allows a public body to spend £6 million despite serious reservations by the most senior official within the Welsh Assembly Government, is a process that is in need of fundamental review. It is fundamentally flawed. I welcome the announcement this afternoon that you are now taking this seriously.

**Edwina Hart:** I was not party to your discussions with the chief executive of the local health board, but I need to review some of these issues. I am quite happy with the

### Prosiectau Gwariant Cyfalaf yn y GIG

**C11 Jonathan Morgan:** A wnaiff y Gweinidog gadarnhau pa bryd oedd y tro diwethaf iddi adolygu'r broses ar gyfer cymeradwyo prosiectau gwariant cyfalaf yn y GIG? OAQ(3)1615(HSS)

**Edwina Hart:** Rhoddwyd arweiniad i'r GIG ym mis Mehefin 2007, a gwnaed rhai newidiadau yn dilyn hynny.

Yn awr, yr ydym yn cynnal adolygiad sylfaenol o'r broses i adlewyrchu fy niwygiadau i'r GIG a'r angen am fwy o dystiolaeth ar gyfer gwaith buddsoddi a phenderfyniadau.

**Jonathan Morgan:** Yr wyf yn ddiolchgar i'r Gweinidog am yr ateb hwnnw. Fel y gwyddoch, bûm yn pryderu ers cryn amser am y modd yr ymdriniwyd â'r gwaith arfaethedig i ailddatblygu Ysbyty'r Eglwys Newydd. Caf ar ddeall i'r bwrdd iechyd lleol benderfynu dechrau'r prosiect ar ôl cael caniatâd amlinellol gan Lywodraeth y Cynulliad, ond cyn i'r achos busnes llawn gael ei gymeradwyo. At hynny, deallaf i'r prosiect ddechrau, ac i £6 miliwn gael ei wario, er gwaethaf amheuan a fynegwyd gan brif weithredwr presennol y GIG, Paul Williams. Bu imi ddarganfod hynny ar ôl cyfarfod â phrif weithredwr presennol Bwrdd Iechyd Lleol Prifysgol Caerdydd a'r Fro. Mae'n siŵr y cytunwch â mi fod unrhyw broses sy'n caniatáu i gorff cyhoeddus wario arian cyn i achos busnes llawn gael ei gyflwyno a'i gymeradwyo, ac unrhyw broses sy'n caniatáu i gorff cyhoeddus wario £6 miliwn er gwaethaf amheuan difrifol gan y swyddog uchaf yn Llywodraeth y Cynulliad, yn broses y mae angen ei hadolygu'n sylfaenol. Mae'n broses wallus yn ei hanfod. Croesawaf y cyhoeddiad y prynhawn yma eich bod yn cymryd y mater hwn o ddifrif erbyn hyn.

**Edwina Hart:** Nid oeddwn yn rhan o'ch trafodaethau â phrif weithredwr y bwrdd iechyd lleol, ond mae angen imi adolygu rhai o'r materion hyn. Yr wyf yn eithaf bodlon â'r

principles that are used as we take cases through, but I now have to look at wider issues in light of my capital settlement and the prioritisation that I will need to make.

egwyddorion a ddefnyddir wrth inni symud achosion yn eu blaen, ond rhaid imi ystyried materion ehangach yn awr yng ngoleuni fy setliad cyfalaf, a'r blaenoriaethau y bydd angen imi eu pennu.

## **Cwestiynau i'r Dirprwy Brif Weinidog a'r Gweinidog dros yr Economi a Thrafnidiaeth**

### **Questions to the Deputy First Minister and Minister for the Economy and Transport**

#### **Small and Medium-sized Enterprises**

**Q1 Jonathan Morgan:** Will the Minister outline how small and medium-sized enterprises have benefited from public sector procurement? OAQ(3)1535(ECT)

**The Deputy First Minister and Minister for the Economy and Transport (Ieuan Wyn Jones):** 'Opening Doors: the Charter for SME Friendly Procurement' has been used to launch a number of initiatives to give greater access to Welsh public sector contracts. Expenditure analysis suggests that the proportion won by Wales-based companies has increased from 35 per cent in 2004 to 50 per cent in 2009.

**Jonathan Morgan:** I am grateful to the Deputy First Minister for that reply. In November 2008, you issued a joint communiqué with the then First Minister and the then Secretary of State for Wales, in which you said that you would continue to maximise opportunities for Welsh companies to benefit from public sector contracts. I welcome the overall increase that you have announced this afternoon of 35 per cent to 50 per cent. However, we have done some analysis of our own, using the Freedom of Information Act 2000, and it appears that less than 5 per cent of ICT procurement from NHS and local government in Wales benefits companies in Wales. That is of great concern when you consider the large number of ICT companies that we have in this nation. Will you consider the range of procurement that takes place within the public sector to ensure that all companies in Wales that are able to provide services and contracts with the public sector do so? Will the Government consider

#### **Busnesau Bach a Chanolig eu Maint**

**C1 Jonathan Morgan:** A wnaiff y Gweinidog amlinellu sut y mae busnesau bach a chanolig eu maint wedi elwa o weithgarwch caffael y sector cyhoeddus? OAQ(3)1535(ECT)

**Y Dirprwy Brif Weinidog a'r Gweinidog dros yr Economi a Thrafnidiaeth (Ieuan Wyn Jones):** Defnyddiwyd 'Agor Drysau: Y Siarter ar gyfer Caffael sy'n Gyfeillgar i Fusnesau Bach a Chanolig' i lansio nifer o fentrau i wneud contractau sector cyhoeddus Cymru yn fwy hygyrch. Mae dadansoddiad o wariant yn awgrymu bod y gyfran o gontractau a enillwyd gan gwmnïau o Gymru wedi cynyddu o 35 y cant yn 2004 i 50 y cant yn 2009.

**Jonathan Morgan:** Yr wyf yn ddiolchgar i'r Dirprwy Brif Weinidog am yr ymateb hwnnw. Ym mis Tachwedd 2008, bu ichi gyhoeddi cyd-hysbysiad gyda'r Prif Weinidog ar y pryd ac Ysgrifennydd Gwladol Cymru ar y pryd. Yn y cyd-hysbysiad hwnnw, dywedasoch y byddech yn parhau i amlhau cyfleoedd i gwmnïau o Gymru elwa o gontractau'r sector cyhoeddus. Croesawaf y cynnydd cyffredinol a gyhoeddwyd gennych y prynhawn yma o 35 y cant i 50 y cant. Fodd bynnag, yr ydym wedi gwneud ychydig o waith dadansoddi ein hunain, gan ddefnyddio Deddf Rhyddid Gwybodaeth 2000, ac ymddengys bod cwmnïau yng Nghymru yn elwa o lai na 5 y cant o weithgarwch caffael TGCh y GIG a llywodraeth leol yng Nghymru. Mae hynny'n peri pryder mawr o ystyried yr holl gwmnïau TGCh sydd gennym yn y wlad hon. A wnewch chi ystyried yr ystod o weithgarwch caffael sy'n digwydd yn y sector cyhoeddus er mwyn sicrhau bod yr holl gwmnïau yng



publishing its findings and presenting that information by category, and possibly leaving the information in the library for Members to consider? It is important that we see, sector by sector, how well Welsh companies are performing.

**The Deputy First Minister:** I cannot give you that assurance today, but I will take that away to see whether information can be given in the format that you have asked for. Although we accept that more work needs to be done, we also have to acknowledge that progress has been made. I am sure that you will be aware that, during my consultation with stakeholders through the economic renewal programme, the issue of public sector procurement has raised its head on a number of occasions. When we make an announcement on that, I hope that we will have some ideas as to how we might take it forward. It is also important to say that the national procurement websites, Sell2Wales and Buy4Wales, are continuing to evolve, and a facility has also been introduced on the website for main contractors to advertise sub-contracts online. We recognise that progress has been made, but more needs to be done and I will see whether I can provide the information, if it is readily available in the form that you have requested.

**Alun Davies:** We already know that the Office for Budget Responsibility has estimated that job losses as a direct consequence of yesterday's budget will be in excess of 100,000. From the *Financial Times*' analysis of the budget, we also know that Wales will suffer a greater impact than other parts of the United Kingdom. Given this backdrop, Deputy First Minister, can you outline the steps that you are taking to ensure that, where there is potential for major public sector interventions in the economy—I am thinking of projects such as the Heads of the Valleys road, which you have already made announcements on—local businesses, contractors and people will be able to gain work on those projects and that, using public intervention, we will be able to mitigate the

Nghymru sy'n gallu darparu gwasanaethau a chontractau i'r sector cyhoeddus yn gwneud hynny? A wnaiff y Llywodraeth ystyried cyhoeddi ei chanfyddiadau a chyflwyno'r wybodaeth honno fesul categori, a gadael y wybodaeth yn y llyfrgell, o bosibl, i'r Aelodau ei hystyried? Mae'n bwysig inni weld, sector wrth sector, pa mor dda y mae cwmnïau Cymru yn perfformio.

**Y Dirprwy Brif Weinidog:** Ni allaf roi'r sicrwydd hwnnw ichi heddiw, ond ystyriaif y pwynt a godwyd gennych er mwyn gweld a oes modd darparu'r wybodaeth ar y ffurf yr ydych wedi gofyn amdani. Er ein bod yn derbyn bod angen gwneud mwy o waith, rhaid inni gydnabod hefyd bod cynnydd wedi'i wneud. Yr wyf yn siŵr y gwyddoch fod gweithgarwch caffael y sector cyhoeddus yn fater sydd wedi codi droeon yn ystod fy ngwaith ymgynghori â rhanddeiliaid drwy raglen adnewyddu'r economi. Pan fyddwn yn gwneud cyhoeddiad ynghylch hynny, gobeithiaf y bydd gennym rai syniadau ynghylch sut y gallem symud y mater yn ei flaen. Mae'n bwysig dweud hefyd bod y gwefannau caffael cenedlaethol, GwerthwchiGymru a PrynwchiGymru, yn parhau i esblygu, ac mae cyfleuster hefyd wedi'i gyflwyno ar y wefan lle gall prif gontractwyr hysbysebu is-gontractau ar-lein. Yr ydym yn cydnabod bod cynnydd wedi'i wneud, ond mae angen gwneud mwy, a chaf weld a allaf ddarparu'r wybodaeth, os yw ar gael yn hawdd ar y ffurf yr ydych wedi gofyn amdani.

**Alun Davies:** Gwyddom eisoes fod Swyddfa Cyfrifoldeb y Gyllideb wedi amcangyfrif y bydd dros 100,000 o swyddi'n cael eu colli o ganlyniad uniongyrchol i'r gyllideb a gyhoeddwyd ddoe. Yn ôl dadansoddiad y *Financial Times* o'r gyllideb, gwyddom hefyd y bydd yr effaith ar Gymru yn fwy nag ar rannau eraill o'r Deyrnas Unedig. O ystyried y cefndir hwnnw, Ddirprwy Brif Weinidog, a allwch amlinellu'r camau yr ydych yn eu cymryd i sicrhau, lle ceir potensial i'r sector cyhoeddus ymyrryd yn helaeth yn yr economi—yr wyf yn meddwl am brosiectau megis ffordd Blaenau'r Cymoedd, yr ydych eisoes wedi gwneud cyhoeddiadau yn ei chylch—y bydd busnesau, contractwyr a phobl leol yn gallu cael gwaith ar y prosiectau hynny, ac y

worst aspects of the Liberal-Tory cuts agenda?

**The Deputy First Minister:** It is important to recognise that, in a recession, major capital projects funded by the public sector are a way of mitigating the worst impacts of job cuts across the private sector. This was one of the issues raised during the economic summits, where we were able to agree a programme to bring forward capital expenditure in order to maintain jobs, particularly in the construction sector. As well as doing that, there are a number of best practices employed across the procurement system in Wales, whereby we can introduce a number of social clauses into contracts to maximise local employment. Of course, the Church Village bypass is an example of how we were able to do that.

**Mick Bates:** I understand that you will shortly make an announcement on increasing access to broadband services using Government support. There are many small businesses that provide a variety of services, including equipment fitting, to improve broadband services, particularly in Powys. Will these small businesses benefit from your announcement, and will any public sector procurement benefit from your broadband announcement?

**The Deputy First Minister:** That is a difficult one to answer in the context of this question, but I can tell you that we will be making an announcement shortly about extending the ability of people to access funds to deliver broadband to hard-to-reach areas. We have to remember that there will be two schemes: the current regional innovative broadband support scheme that is being rolled out; and the new scheme to which people can apply for support backed by European Union funding. Individuals and businesses can apply to that scheme. I just wish to say that I recognise that improving and delivering good infrastructure, including ICT infrastructure, is an important part of the

byddwn yn gallu lliniaru'r agweddau gwaethaf ar agenda doriadau'r Rhyddfrydwyr a'r Toriaid drwy ddefnyddio arian cyhoeddus i ymyrryd?

**Y Dirprwy Brif Weinidog:** Mae'n bwysig cydnabod, mewn dirwasgiad, y gall prosiectau cyfalaf mawr a ariennir gan y sector cyhoeddus fod yn fodd i liniaru effeithiau gwaethaf torri swyddi ar draws y sector preifat. Yr oedd hwn yn un o'r materion a godwyd yn ystod yr uwchgynadleddau economaidd, lle bu modd inni gytuno ar raglen i ddwyn gwariant cyfalaf ymlaen er mwyn cynnal swyddi, yn enwedig yn y sector adeiladu. Yn ogystal â gwneud hynny, ceir llawer o enghreifftiau o arfer gorau a ddefnyddir ar draws y system gaffael yng Nghymru, lle gallwn gynnwys nifer o gymalau cymdeithasol mewn contractau er mwyn sicrhau bod cymaint o bobl leol â phosibl yn cael eu cyflogi. Wrth gwrs, mae ffordd osgoi Gartholwg yn enghraifft o sut yr oedd modd inni wneud hynny.

**Mick Bates:** Deallaf y byddwch yn gwneud cyhoeddiad cyn bo hir ar ddefnyddio cymorth y Llywodraeth i gynyddu mynediad i wasanaethau band eang. Ceir llawer o fusnesau bach sy'n darparu amrywiaeth o wasanaethau, gan gynnwys gwasanaeth gosod offer, i wella gwasanaethau band eang, yn enwedig ym Mhowys. A fydd y cwmnïau bach hyn yn elwa o'ch cyhoeddiad, ac a fydd unrhyw weithgarwch caffael yn y sector cyhoeddus yn elwa o'ch cyhoeddiad ynghylch band eang?

**Y Dirprwy Brif Weinidog:** Mae'n anodd ateb hynny yng nghyd-destun y cwestiwn hwn, ond gallaf ddweud wrthyh y byddwn yn gwneud cyhoeddiad cyn bo hir ynghylch ymestyn gallu pobl i gael mynediad i gronfeydd er mwyn darparu band eang i ardaloedd anodd eu cyrraedd. Rhaid inni gofio y bydd dau gynllun ar waith: y cynllun cymorth band eang arloesol rhanbarthol cyfredol sy'n cael ei gyflwyno; a'r cynllun newydd a gefnogir gan arian o'r Undeb Ewropeaidd, y gall pobl wneud cais iddo am gymorth. Gall unigolion a busnesau wneud cais i'r cynllun hwnnw. Yr wyf am ddweud fy mod yn cydnabod bod gwella'r seilwaith a darparu seilwaith da, sy'n cynnwys seilwaith

agenda for improving the economic performance of all parts of Wales, including mid Wales of course.

**Gareth Jones:** Ddirprwy Brif Weinidog, nid oes dim byd pwysicach i economi Cymru na sicrhau bod cwmnïau cynhenid yn cael cyfle teg i elwa ar gytundebau gan gyrff cyhoeddus, boed y cytundebau hynny am lafur, nwyddau neu wasanaethau. Yr wyf yn deall bod Llywodraeth Cymru eisoes wedi gweld bod y broses o rag-gymhwyso yn rhwystr mawr i fusnesau cynhenid fanteisio ar y cyfleoedd hyn, a bod y prosiect o dan yr acronym SQuID, sef cronfa ddata o wybodaeth am gyflenwyr, yn anelu at osod y gofynion cymhwyso ar lefel resymol a chymesur. Pa gamau y gall Llywodraeth Cymru eu cymryd gyda chyrff cyhoeddus os daw hi'n amlwg bod y gofynion rhag-gymhwyso wedi'u gosod ar lefel rhy uchel, er mwyn osgoi camgymeriadau'r gorffennol a sicrhau bod economi Cymru yn ei chyfanrwydd yn manteisio i'r eithaf ar y bunt gyhoeddus yng Nghymru?

**Y Dirprwy Brif Weinidog:** Yr ydym i gyd yn sylweddoli mor bwysig yw arian a chyfalaf cyhoeddus i sicrhau y gallwn wrthweithio effeithiau'r dirwasgiad ar economi Cymru i raddau. Un o'r gwersi yr ydym wedi eu dysgu yn ystod y dirwasgiad yw bod cwmnïau yn aml yn ei chael hi'n anodd cael mynediad at y cytundebau hyn oherwydd bod y drefn yn gymhleth. Yr ydym eisïau symleiddio'r drefn. Rhaid i ni dderbyn bod, ar hyn o bryd, ffordd wahanol o gael mynediad, drwy'r dulliau pwrcasu, at gytundebau pob corff cyhoeddus. Yr ydym eisïau safoni'r dulliau hynny a sicrhau y gallwn gydweithio ar draws y sector cyhoeddus fel y gallwn beri i'r gwasanaeth fod mor gyson â phosibl, yn y lle cyntaf, fel na fydd pobl yn ei chael hi'n anodd llenwi'r ffurflenni er mwyn cael eu cynnwys ar y rhestr dendro. Pan fyddant ar y rhestr honno, byddant mewn sefyllfa gryfach o lawer i wneud cais am yr arian.

2.20 p.m.

### Traffic Officers

**Q2 Brian Gibbons:** Will the Minister make a statement on the use of Welsh Assembly

TGCh, yn rhan bwysig o'r agenda ar gyfer gwella perfformiad economaidd pob rhan o Gymru, gan gynnwys y canolbarth wrth gwrs.

**Gareth Jones:** Deputy First Minister, there is nothing more important for the Welsh economy than ensuring that indigenous companies have a fair opportunity to benefit from public sector contracts, whether those are for labour, goods or services. I understand that the Welsh Government has already found that the process of pre-qualification is a great barrier to indigenous companies benefitting from these opportunities, and that a project under the acronym SQuID, supplier qualification information database, aims to set pre-qualification requirements at a reasonable and proportionate level. What steps can the Welsh Government take with public bodies if it becomes obvious that the pre-qualification requirements have been set too high, in order to avoid the errors of the past and ensure that the Welsh economy in its entirety gets maximum benefit from the public pound in Wales?

**The Deputy First Minister:** We all realise how important public funding and capital expenditure are in ensuring that we are able to counteract to some extent the effects of the recession on the Welsh economy. One of the lessons that we have learned during the recession is that companies often find it difficult to access these contracts, because the system is complex. We want to simplify the system. We must accept that, at present, there is a different way of accessing, through procurement processes, the contracts of every public body. We want to standardise those processes and ensure that we can collaborate across the public sector so that we can make the service as consistent as possible, first of all, so that people will not find it so difficult to complete the forms in order to be included on the tender list. Once they are on that list, they will be in a much stronger position to make a bid for that funding.

### Swyddogion Traffig

**C2 Brian Gibbons:** A wnaiff y Gweinidog ddatganiad am sut y mae Llywodraeth

Government designated traffic officers in policing the Welsh trunk road network in south Wales? OAQ(3)1525(ECT)

Cynulliad Cymru yn defnyddio swyddogion traffig dynodedig er mwyn plismona rhwydwaith cefnffyrdd Cymru yn y de? OAQ(3)1525(ECT)

**The Deputy First Minister:** The traffic officer scheme for south Wales was introduced on 1 February, and there are now 21 officers deployed on the trunk road network in south Wales. Early indications are that the service is proving to be effective.

**Y Dirprwy Brif Weinidog:** Cafodd y cynllun swyddogion traffig ar gyfer de Cymru ei gyflwyno ar 1 Chwefror, ac erbyn hyn mae 21 o swyddogion yn gweithio ar y rhwydwaith cefnffyrdd yn y de. Yn ôl yr adroddiadau cynnar, mae'r gwasanaeth hwn yn effeithiol.

**Brian Gibbons:** It is my understanding that the scheme extends from the Severn crossing to the Coryton roundabout and up the A470, and that among the duties of the designated traffic officers, they are to respond to incidents on the motorway and trunk road network, but also to look at areas where preventive activity can take place, particularly in areas of congestion. You will be aware that the area between junctions 38 and 41 in my constituency, close to Port Talbot, is in an area of significant congestion and a number of traffic incidents happen in that area. When will you be in a position to consider extending the role of these designated officers to that section of the M4 motorway?

**Brian Gibbons:** Caf ar ddeall bod y cynllun yn ymestyn o bont Hafren i gylchfan Coryton ac i fyny'r A470, a bod dyletswyddau'r swyddogion traffig dynodedig yn cynnwys ymateb i ddigwyddiadau ar y draffordd a'r rhwydwaith cefnffyrdd, ac edrych, yn ogystal, ar ardaloedd lle gellir ymgymryd â champau ataliol, yn enwedig mewn mannau lle ceir tagfeydd traffig. Gwyddoch fod yr ardal rhwng cyffyrdd 38 a 41 yn fy etholaeth i, ger Port Talbot, mewn man lle ceir tagfeydd sylweddol a llawer o ddigwyddiadau'n ymwneud â thraffig. Pryd y byddwch mewn sefyllfa i ystyried ymestyn rôl y swyddogion dynodedig hyn i'r rhan honno o draffordd yr M4?

**The Deputy First Minister:** I recognise that you have raised a number of issues around the section of road that you have described, Brian, and I can understand the concerns that you have. We started the 12-month trial on 1 February 2010. We will be holding an interim review after six months, which will happen later this year. It is slightly early for us to provide a meaningful evaluation, but the early indications from the evidence that I have seen and the anecdotal evidence that I have heard, show that this is a great help to people on the road network. It is a little early for me to be able to say whether I can extend it, but I will bear your comments very much in mind as the review takes place and as the evaluation at the end of the trial period comes before me.

**Y Dirprwy Brif Weinidog:** Yr wyf yn sylweddoli eich bod wedi codi llawer o faterion ynghylch y rhan o'r ffordd yr ydych wedi'i disgrifio, Brian, a gallaf ddeall y pryderon sydd gennych. Bu inni ddechrau'r cyfnod prawf o 12 mis ar 1 Chwefror 2010. Byddwn yn cynnal adolygiad interim ar ôl 6 mis, a fydd yn digwydd yn ddiweddarach eleni. Mae braidd yn gynnwys inni ddarparu gwerthusiad ystyrlon, ond dengys yr arwyddion cynnar, o'r dystiolaeth yr wyf wedi'i gweld a'r dystiolaeth anecdotaidd yr wyf wedi'i chlywed, fod y gwasanaeth o gymorth mawr i bobl ar y rhwydwaith ffyrdd. Mae braidd yn gynnwys imi allu dweud a allaf ymestyn y gwasanaeth, ond byddaf yn bendant yn cadw eich sylwadau mewn cof pan gynhelir yr adolygiad a phan fydd y gwerthusiad ar ddiwedd y cyfnod prawf yn cael ei gyflwyno imi.

**Nick Ramsay:** I am grateful to Brian Gibbons for raising this question. I will focus specifically on the M4. I have some figures

**Nick Ramsay:** Yr wyf yn ddiolchgar i Brian Gibbons am godi'r cwestiwn hwn. Yr wyf am ganolbwyntio'n benodol ar yr M4. Mae

up until the end of 2007 on casualties and collisions on that stretch of road. There were 864 casualties and 505 collisions over a two-year period up until the end of 2007. You might have more recent figures than that, but I do not.

I looked recently at an information brochure issued by the transport and strategic regeneration department regarding the corridor enhancement measures that are in play on that stretch of road which, in looking at the map, involve improvements to the southern distributor road as a way of bypassing the Brynglas tunnels. I also notice an upgrading of the road along the current Llanwern site when that is redeveloped. There are details about congestion, but there is very little information about road traffic incidents and collisions, as I mentioned before.

Could you give us an assurance that, as this is going forward, you will be consulting fully with the traffic officers and factoring in their experiences at an early stage, so that this does not go forward and then, at the end of the process, we end up in a position where we still have a certain rate of accidents that could have been dealt with at the initial planning stage?

**The Deputy First Minister:** I will be very happy to give you that assurance. The planned works for those improvements, which will alleviate congestion on the M4, are well under way. We have already purchased the land on the Corus site, which will enable us to have a dual carriageway that will link into the southern distributor road at Newport. That will then offer alternative access to people. In addition, we are looking at a possible reconfiguration of a number of junctions in the Newport area that would allow us to have better control over traffic flows going onto the motorway at peak times. Therefore, a lot of work is being done. However, there has been a big reduction in traffic accidents and incidents on the road network in Wales in recent years, which is testimony to the work that has already been done. I am sure that the work of the traffic officers will contribute to that.

gennyf rai ffigurau hyd at ddiwedd 2007 ar gyfer gwrthdrawiadau ar y rhan honno o'r ffordd, a nifer y bobl a anafwyd. Cafwyd 505 o wrthdrawiadau ac anafwyd 864 o bobl dros gyfnod o ddwy flynedd hyd at ddiwedd 2007. Hwyrach bod gennyf chi ffigurau mwy diweddar na hynny, ond nid oes gennyf i.

Yn ddiweddar, edrychais ar lyfryn gwybodaeth a gyhoeddwyd gan yr adran trafniadaeth ac adfywio strategol ynghylch y mesurau i wella'r coridor ar hyd y rhan honno o'r ffordd, sydd, o edrych ar y map, yn cynnwys gwelliannau i'r ffordd ddsbarthu ddeheuol fel ffordd o osgoi twnelau Brynglas. Sylwaf hefyd y bydd y ffordd ar hyd safle presennol Llanwern yn cael ei huwchraddio pan gaiff y safle hwnnw ei ailddatblygu. Ceir manylion am dagfeydd, ond bach iawn o wybodaeth a geir am wrthdrawiadau a digwyddiadau'n ymwneud â thraffig ar y ffyrdd, fel y dywedais o'r blaen.

A allech roi sicrwydd inni, wrth i'r gwasanaeth symud yn ei flaen, y byddwch yn ymgynghori'n llawn â'r swyddogion traffig ac yn ystyried eu profiadau'n gynnar yn y broses, fel na fydd y gwasanaeth yn mynd rhagddo ac y byddwn ninnau, wedyn, ar ddiwedd y broses, mewn sefyllfa lle mae gennym gyfradd benodol o ddamweiniau o hyd, y gellid bod wedi mynd i'r afael â hi wrth gynllunio ar y dechrau?

**Y Dirprwy Brif Weinidog:** Yr wyf yn barod i roi'r sicrwydd hwnnw ichi. Mae'r gwaith arfaethedig ar gyfer y gwelliannau hynny, a fydd yn lleihau tagfeydd ar yr M4, wedi hen ddechrau. Yr ydym eisoes wedi prynu'r tir ar safle Corus, a fydd yn ein galluogi i gael ffordd ddeuol a fydd yn cysylltu â'r ffordd ddsbarthu ddeheuol yng Nghasnewydd. Bydd honno, wedyn, yn cynnig mynediad arall i bobl. Yn ogystal, yr ydym yn edrych ar y posibilrwydd o aildrefnu nifer o gyffyrdd yn ardal Casnewydd, a fyddai'n caniatáu inni gael gwell rheolaeth ar y traffig sy'n ymuno â'r draffordd yn ystod yr oriau brig. Felly, mae llawer o waith yn cael ei wneud. Fodd bynnag, yn ystod y blynyddoedd diwethaf, gwelwyd gostyngiad mawr yn nifer y digwyddiadau a'r damweiniau traffig ar y rhwydwaith ffyrdd yng Nghymru, sy'n tystio i'r gwaith sydd eisoes wedi'i wneud. Yr wyf yn siŵr y bydd gwaith y swyddogion traffig

yn cyfrannu at hynny.

**Chris Franks:** I am delighted to hear about the forthcoming review, but I am concerned about the closure of the M4 following serious road accidents. Can you give us an update on the discussions that you have had regarding incidents of prolonged closure on trunk roads? We must pay due regard to the seriousness of the incidents; however, often the road closures have a devastating impact on the Welsh economy because of the disruption that they cause. Recent cases have resulted in huge tailbacks throughout Cardiff and which have extended as far as Pontypridd and Newport.

**Chris Franks:** Yr wyf yn falch iawn o glywed am yr adolygiad sydd i'w gynnal, ond yr wyf yn pryderu am gau'r M4 yn dilyn damweiniau difrifol. A allwch roi'r wybodaeth ddiweddaraf inni am y trafodaethau yr ydych wedi'u cael ynghylch achosion o gau cefnffyrdd am gyfnodau estynedig? Rhaid inni roi sylw dyledus i ddifrifoldeb y digwyddiadau; fodd bynnag, yn aml, bydd cau ffyrdd yn cael effaith ddinistriol ar economi Cymru oherwydd yr anhrefn y mae hynny'n ei achosi. Mae achosion diweddar wedi arwain at dagfeydd enfawr drwy Gaerdydd i gyd, sydd wedi ymestyn mor bell â Phontypridd a Chasnewydd.

When we see signs that indicate that there is chaos on the roads, the importance of a modern railway network is clear. Given that there was no announcement on it in yesterday's budget, can you indicate what discussions you have had regarding the electrification of Wales's rail network?

Pan welwn arwyddion sy'n dangos bod anhrefn ar y ffyrdd, bydd pwysigrwydd rhwydwaith rheilffyrdd modern yn amlwg. O gofio na chafwyd cyhoeddiad am hynny yn y gyllideb ddoe, a allwch ddweud pa drafodaethau yr ydych wedi'u cael ynghylch trydaneiddio rhwydwaith rheilffyrdd Cymru?

**The Deputy First Minister:** On the issue of road closures, the nature of the closure often depends on the nature of the accident. Where there are serious accidents, road closure is inevitable, as they have to be dealt with. For example, on 8 June, there was a multivehicle road traffic collision at junction 41 of the M4, for which an air ambulance was required in order to take away an injured driver. In those sorts of circumstances, we all understand the need for the road to be closed. If there is a fatality as a result of a collision, the scene is treated as a crime scene, and we need to make sure that it is surveyed properly. We have been working with the police to purchase equipment that will enable them to survey the scene a lot more quickly than they have been able to in the past. Therefore, that will help. The works that we are doing around Newport will also help in respect of having alternative access when there are serious accidents in that area.

**Y Dirprwy Brif Weinidog:** O ran cau ffyrdd, mae'r modd y gwneir hynny'n aml yn dibynnu ar natur y ddamwain. Mae'n anochel y bydd ffordd yn cael ei chau pan fydd damweiniau difrifol yn digwydd, oherwydd mae'n rhaid ymdrin â hwy. Er enghraifft, ar 8 Mehefin, cafwyd gwrthdrawiad rhwng sawl cerbyd ger cyffordd 41 yr M4, ac yr oedd angen ambiwlans awyr er mwyn cludo gyrrwr a anafwyd oddi yno. Mae pob un ohonom yn deall yr angen i gau'r ffordd mewn amgylchiadau o'r fath. Os oes rhywun yn marw o ganlyniad i wrthdrawiad, rhaid trin y safle fel man lle bu trosedd, ac mae angen inni sicrhau bod y man yn cael ei archwilio'n iawn. Yr ydym wedi bod yn gweithio gyda'r heddlu i brynu offer a fydd yn eu galluogi i archwilio manau lle cafwyd damweiniau'n gyflymach o lawer nag a oedd yn bosibl yn y gorffennol. Felly, bydd hynny'n helpu. Bydd y gwaith yr ydym yn ei wneud o amgylch Casnewydd yn helpu hefyd o ran cael mynediad arall pan fydd damweiniau difrifol yn digwydd yn yr ardal honno.

In relation to the electrification, it was disappointing that, although the Chancellor

O ran y gwaith trydaneiddio, er i'r Canghellor sôn ddoe am nifer o gynlluniau a

mentioned yesterday a number of schemes that would go ahead, he failed to mention a continued commitment to the electrification of the line to Swansea.

**Michael German:** A big problem that I have raised with you previously during questions in the Chamber relates to the delays that are caused for drivers when there are diversions away from the M4 around Newport, when there are serious incidents on the motorway. In an earlier reply to me, you said that you would examine the routes that people take and ensure the provision of sufficient signposting and traffic information. The last time that this happened there were severe delays, which were often of two to three hours, resulting in queues and affecting people who were, in many cases, trying to make short journeys. That was a result of there being insufficient information off the motorway network—the information was efficient in getting people off the motorway, but the next stage was much more difficult. What progress has been made on an action plan for traffic diversions when the M4 motorway is closed that will deal with the severely congested parts of the domestic road network?

**The Deputy First Minister:** I am aware that the police have been looking seriously at how they can give more information to people who are travelling on the motorway network when there is an accident and a diversionary route is necessary. Clearly, when the works around Newport have been completed it will be a lot easier to do that. We have to remember that it is possible to have illuminated signs on the motorway, but that it is not possible to have a similar scheme in place on the ordinary road network. However, I will confirm that I will ask the police and my officials how far they have got with evaluating the information that is given to people. Local radio is another valuable source of information. Therefore, I will come back to you on that.

#### **Derelict Land**

**Q3 Leanne Wood:** What assessment has the

fyddai'n mynd rhagddynt, yr oedd y ffaith iddo fethu â chrybwyll ymrwymiad parhaus i drydaneiddio'r llinell i Abertawe yn siomedig.

**Michael German:** Mae problem fawr yr wyf wedi'i chodi gyda chi o'r blaen yn ystod cwestiynau yn y Siambr yn ymwneud â'r oedi a achosir i yrwyr pan fydd traffig yn cael ei ddargyfeirio o'r M4 o amgylch Casnewydd, pan fydd digwyddiadau difrifol ar y draffordd. Mewn ymateb cynharach imi, dywedasoch y byddech yn archwilio'r ffyrdd y mae pobl yn eu defnyddio ac yn sicrhau bod digon o arwyddbyst a gwybodaeth yn cael eu darparu i draffig. Cafwyd oedi difrifol y tro diwethaf i hynny ddigwydd, a oedd yn aml yn para dwy neu dair awr, gan arwain at resi o draffig a chan effeithio ar bobl a oedd, mewn llawer o achosion, yn ceisio teithio pellter byr. Y rheswm am y broblem oedd diffyg gwybodaeth ddigonol oddi ar y rhwydwaith traffyrdd—yr oedd y wybodaeth yn effeithlon o ran cael pobl i adael y draffordd, ond yr oedd y cam nesaf yn anos o lawer. Pa gynnydd sydd wedi'i wneud ar gynllun gweithredu ar gyfer dargyfeirio traffig pan gaiff traffordd yr M4 ei chau, a fydd yn ymdrin â'r rhannau hynny o'r rhwydwaith ffyrdd domestig lle ceir tagfeydd difrifol?

**Y Dirprwy Brif Weinidog:** Yr wyf yn ymwybodol bod yr heddlu wedi bod yn edrych o ddifrif ar sut y gallant roi mwy o wybodaeth i bobl sy'n teithio ar y rhwydwaith traffyrdd pan fydd yn rhaid dargyfeirio'r traffig o ganlyniad i ddamwain. Yn amlwg, bydd yn llawer haws gwneud hynny pan fydd y gwaith o amgylch Casnewydd wedi'i gwblhau. Rhaid inni gofio ei bod yn bosibl cael arwyddion sy'n goleuo ar y draffordd, ond nad yw'n bosibl cael cynllun tebyg ar y rhwydwaith ffyrdd arferol. Fodd bynnag, cadarnhaf y byddaf yn gofyn i'r heddlu a'm swyddogion i ba raddau y maent wedi gwerthuso'r wybodaeth a roddir i bobl. Mae gorsafedd radio lleol yn ffynhonnell werthfawr arall o wybodaeth. Felly, dof yn ôl atoch ynghylch y pwynt hwnnw.

#### **Tir Diffaith**

**C3 Leanne Wood:** Pa asesiad y mae'r

Minister made of the possible uses for derelict land? OAQ(3)1528(ECT)

Gweinidog wedi'i wneud o'r posibiladau ar gyfer defnyddio tir diffaith? OAQ(3)1528(ECT)

**The Deputy First Minister:** A wide-ranging review of the land uses adopted to satisfy community, economic and environmental needs is being implemented by my department in relation to the land reclamation programme. The designation of other derelict land falls to local authorities through the planning process.

**Y Dirprwy Brif Weinidog:** Mae adolygiad eang ei gwmpas o'r ffordd y mae tir yn cael ei ddefnyddio i fodloni anghenion cymunedol, economaidd ac amgylcheddol yn cael ei gynnal gan fy adran mewn cysylltiad â'r rhaglen adfer tir. Mater i awdurdodau lleol, drwy gyfrwng y broses gynllunio, yw penderfynu sut i ddefnyddio unrhyw dir diffaith arall.

**Leanne Wood:** Thank you for that answer, Deputy First Minister. As you know, there has been an explosion recently of interest in growing food. However, in many areas, demand outstrips supply when it comes to the availability of land. In some areas, the waiting lists extend over several years. Given that there is a significant amount of land in Wales that has been left derelict after our industrial past, do you think that there may be opportunities to bring such land back into use for food-growing purposes? That would help to meet the existing demand for allotments, but also, potentially in the long term, it could enable Wales to move towards more self-sufficiency in food production. Do you have a view on that?

**Leanne Wood:** Diolch am yr ateb hwnnw, Ddirprwy Brif Weinidog. Fel y gwyddoch, gwelwyd cynnydd aruthrol yn ddiweddar yn y diddordeb sydd gan bobl mewn tyfu bwyd. Fodd bynnag, mewn llawer o ardaloedd, mae'r galw am dir yn fwy na'r tir sydd ar gael. Mewn rhai ardaloedd, mae'r rhestrau aros yn ymestyn dros nifer o flynyddoedd. O gofio bod llawer o dir yng Nghymru sydd wedi'i adael yn ddiffaith ar ôl ein gorffennol diwydiannol, a ydych yn credu y gallai fod cyfleoedd i ddechrau aildefnyddio tir o'r fath at ddibenion tyfu bwyd? Byddai hynny'n helpu i fodloni'r galw sy'n bodoli am randiroedd, ond hefyd, yn y tymor hir, gallai alluogi Cymru i symud tuag at fod yn fwy hunangynhaliol o ran cynhyrchu bwyd. A oes gennych farn am hynny?

2.30 p.m.

**The Deputy First Minister:** We all recognise that more and more people would like to have allotments, and the waiting lists for existing allotments are particularly high, as you said. That is true not just in Valleys communities but also in many rural communities. As you said, encouraging people to grow their own food not only promotes a healthy lifestyle, but also promotes the eating of healthy food, which we should all encourage. As you will appreciate, there are sometimes difficulties with derelict land because of contamination issues, and we need to ensure that that is not a barrier. However, we should all encourage the release of land, where possible, for further use through allotments—and not only derelict land, but land across the Assembly Government's estate. I would be happy to take that issue back and look at it, and if any

**Y Dirprwy Brif Weinidog:** Mae pob un ohonom yn cydnabod y byddai nifer cynyddol o bobl yn hoffi cael rhandir, a bod y rhestrau aros am y rhandiroedd sydd ar gael yn arbennig o faith, fel y dywedasoeh. Nid yng nghymunedau'r Cymoedd yn unig y mae hynny'n wir, ond mewn llawer o gymunedau gwledig hefyd. Fel y dywedasoeh, yn ogystal â hybu ffordd iach o fyw, mae annog pobl i dyfu eu bwyd eu hunain hefyd yn hybu'r arfer o fwyta'n iach, sy'n rhywbeth y dylai pob un ohonom ei annog. Fel y byddwch yn sylweddoli, ceir anawsterau gyda thir diffaith weithiau oherwydd problemau'n ymwneud â halogi, ac mae angen inni sicrhau nad yw hynny'n rhwystr. Fodd bynnag, dylai pob un ohonom annog camau i ryddhau tir, lle bo hynny'n bosibl, i'w ddefnyddio ymhellach fel rhandiroedd—ac nid tir diffaith yn unig, ond tir ar draws ystad Llywodraeth y Cynulliad.



Member wishes to bring to my attention the need for allotments in various parts of Wales, we as a Government will look at that.

**Nick Bourne:** The Member made a valid point, and the Minister's response about the Welsh Assembly Government's estate is also appropriate. I appreciate that he may not have this information to hand, so would the Minister consider publishing the land holdings of his portfolio in Wales, detailing its current use and whether any of it is derelict or could be put to use as allotments or for similar worthwhile purposes?

**The Deputy First Minister:** Without giving any detail at this stage, I can say that the whole issue of land holdings within my department is being reviewed in the light of the economic renewal programme. In that context, it may well be that some information around that can be given when I make the announcement, hopefully at the beginning of next month. However, I recognise the point that Nick makes, and I am happy to discuss with colleagues whether we can look at the Welsh Assembly Government's entire estate to see whether land can be made available for allotments. There will be more information on my department's holdings when we announce the economic renewal programme.

**Alun Davies:** I very much agree with the point that has been raised by the leader of the opposition this afternoon. In wider terms, a number of issues affects the viability of using derelict and brownfield sites, whether they be the risk assessment to which you have already referred, Deputy First Minister, or the physical characteristics of the site, transport links and the views and attitudes of the local community. This is a very good opportunity for you, working alongside the Minister for environment, who spoke in a debate on planning yesterday, to look creatively at how derelict land can be used and brought into use for housing and economic development purposes.

Byddwn yn falch o fynd â'r mater hwnnw'n ôl a'i ystyried, ac os oes unrhyw Aelod yn dymuno tynnu fy sylw at yr angen am randiroedd mewn gwahanol rannau o Gymru, byddwn ni, fel Llywodraeth, yn edrych ar hynny.

**Nick Bourne:** Gwnaeth yr Aelod bwynt dilys, ac mae ymateb y Gweinidog ynghylch ystad Llywodraeth y Cynulliad hefyd yn briodol. Yr wyf yn sylweddoli nad yw'r wybodaeth ganddo wrth law efallai, felly a fyddai'r Gweinidog yn ystyried cyhoeddi manylion am y daliadau tir sy'n perthyn i'w bortffolio yng Nghymru, gan roi manylion am y modd y mae'r tir yn cael ei ddefnyddio ar hyn o bryd, a ph'un a oes unrhyw ran ohono'n ddiffaith neu a ellid ei ddefnyddio fel rhandiroedd neu at ddibenion buddiol tebyg?

**Y Dirprwy Brif Weinidog:** Heb roi unrhyw fanylion ar hyn o bryd, gallaf ddweud bod daliadau tir yn fy adran yn fater sy'n cael ei adolygu yng ngoleuni rhaglen adnewyddu'r economi. Yn y cyd-destun hwnnw, mae'n bosibl iawn y bydd modd rhoi rhywfaint o wybodaeth ynghylch hynny pan fyddaf yn gwneud y cyhoeddiad, ddechrau mis nesaf, gobeithio. Fodd bynnag, yr wyf yn cydnabod y pwynt a wna Nick, ac yr wyf yn fodlon trafod â chydweithwyr y posibilrwydd o edrych ar holl ystad Llywodraeth y Cynulliad i weld a oes modd darparu tir ar gyfer rhandiroedd. Bydd mwy o wybodaeth am ddaliadau fy adran ar gael pan fyddwn yn cyhoeddi rhaglen adnewyddu'r economi.

**Alun Davies:** Yr wyf yn cytuno'n gryf â'r pwynt a godwyd gan arweinydd yr wrthblaid y prynhawn yma. O safbwynt ehangach, ceir nifer o faterion sy'n effeithio ar ymarferoldeb defnyddio safleoedd tir llwyd a diffaith, boed yr asesiad risg yr ydych eisoes wedi'i grybwyll, Ddirprwy Brif Weinidog, neu nodweddion ffisegol y safle, cysylltiadau trafndiaeth, a safbwyntiau ac agweddau'r gymuned leol. Mae hwn yn gyfle da iawn ichi edrych yn greadigol ar sut y gellir defnyddio tir diffaith ar gyfer tai ac at ddibenion datblygu economaidd, gan gydweithio ochr yn ochr â'r Gweinidog dros yr amgylchedd, a fu'n siarad mewn dadl ar gynllunio ddoe.

I very much welcome what you said and your commitment to the economic renewal programme. I see that as an opportunity for several different departments to work together to ensure that derelict land is no longer a blot on the landscape affecting local people, but is a resource that we can use to deliver on our commitments on affordable housing and economic development.

**The Deputy First Minister:** That is an excellent point, which perhaps takes the issue a little wider than the initial question, but that is no bad thing. It is important for me to say yet again that we are reviewing our land holdings in connection with the economic renewal programme, as part of the improvements that we want to make to the infrastructure in Wales. I very much agree with the point, and I know that discussions have been held between my officials and those of the Deputy Minister for Housing and Regeneration on releasing land for housing and on working together on housing and regeneration. The health agenda is another one, and there is a lot that we can do right across the Government.

#### Research and Development

**Q4 David Melding:** Will the Minister make a statement on the rate of private sector research and development? OAQ(3)1523(ECT)

**The Deputy Minister for Science, Innovation and Skills (Lesley Griffiths):** The private sector currently performs 46 per cent of the total research and development undertaken in Wales.

**David Melding:** Deputy Minister, has the Welsh Assembly Government yet taken note of the Dyson review, which I know was produced for the UK Government? It contains a target of 25 per cent of research contracts coming from small and medium-sized enterprises. Given that large companies that are involved in research will often sub-contract a lot, do you not think that this is an area of great potential for the Welsh economy? We could see more spin-offs, especially from those universities that are involved in the life sciences, for instance.

Croesawaf yn fawr yr hyn a ddywedwyd gennych a'ch ymrwymiad i raglen adnewyddu'r economi. Fe'i gwelaf yn gyfle i sawl adran wahanol gydweithio i sicrhau nad yw tir diffaith mwyach yn ddolur llygad sy'n effeithio ar bobl leol, ond yn rhywbeth y gallwn ei ddefnyddio i wireddu ein hymrwymiaidau o ran tai fforddiadwy a datblygu economaidd.

**Y Dirprwy Brif Weinidog:** Mae hwnnw'n bwynt ardderchog, sy'n ehangu'r mater ychydig y tu hwnt i'r cwestiwn gwreiddiol, efallai, ond nid yw hynny'n ddrwg o beth. Mae'n bwysig imi ddweud eto ein bod yn adolygu ein daliadau tir mewn cysylltiad â rhaglen adnewyddu'r economi, yn rhan o'r gwelliannau yr ydym am eu gwneud i'r seilwaith yng Nghymru. Yr wyf yn cytuno'n gryf â'r pwynt, a gwn fod trafodaethau wedi'u cynnal rhwng fy swyddogion i a swyddogion y Dirprwy Weinidog dros Dai ac Adfywio ynghylch rhyddhau tir ar gyfer tai, a chydweithio ar dai ac adfywio. Mae'r agenda iechyd yn elfen arall, a cheir llawer y gallwn ei wneud ar draws y Llywodraeth i gyd.

#### Ymchwil a Datblygu

**C4 David Melding:** A wnaiff y Gweinidog ddatganiad am gyfradd ymchwil a datblygu yn y sector preifat? OAQ(3)1523(ECT)

**Y Dirprwy Weinidog dros Wyddoniaeth, Arloesi a Sgiliau (Lesley Griffiths):** Ar hyn o bryd, y sector preifat sy'n cynnal 46 y cant o'r holl waith ymchwil a datblygu a gyflawnir yng Nghymru.

**David Melding:** Ddirprwy Weinidog, a yw Llywodraeth y Cynulliad wedi nodi adolygiad Dyson eto, y gwn iddo gael ei gynhyrchu ar gyfer Llywodraeth y DU? Mae'n cynnwys targed, sef y dylai 25 y cant o gontractau ymchwil ddod o fusnesau bach a chanolig eu maint. O ystyried y bydd cwmnïau mawr sy'n ymwneud â gwaith ymchwil yn is-gontractio llawer o waith yn aml, oni chredwch fod hwn yn faes sy'n cynnig potensial mawr i economi Cymru? Gallem weld mwy o gwmnïau'n deillio o sefydliadau eraill, yn enwedig o'r prifysgolion hynny sy'n ymwneud â

gwyddorau bywyd, er enghraifft.

**Lesley Griffiths:** The Dyson report has been brought to my attention. You will be aware that I have recently chaired an expert panel to look into many aspects of research and development. I have had discussions with many employers around Wales, who have told me that there is a problem with accessing funding for research and development. One issue that SMEs have raised with me is that the recession has had an effect on their ability to access funding to undertake research and development. We are therefore considering that issue.

**Lesley Griffiths:** Mae adroddiad Dyson wedi'i ddwyn i'm sylw. Gwyddoch imi gadeirio panel arbenigol yn ddiweddar i edrych ar lawer o agweddau ar ymchwil a datblygu. Yr wyf wedi cael trafodaethau â llawer o gyflogwyr ar hyd a lled Cymru, sydd wedi dweud wrthyf bod problem o ran cael mynediad i gyllid ar gyfer gwaith ymchwil a datblygu. Un broblem y mae busnesau bach a chanolig eu maint wedi'i chodi gyda mi yw bod y dirwasgiad wedi effeithio ar eu gallu i gael mynediad i gyllid i ymgymryd â gwaith ymchwil a datblygu. Yr ydym yn ystyried y broblem honno, felly.

**David Melding:** Could you inform the Assembly whether the Welsh Assembly Government is still pursuing the target formerly mentioned by it of achieving research and development funding of 1 per cent of our gross value added by 2010?

**David Melding:** A allech ddweud wrth y Cynulliad a yw Llywodraeth y Cynulliad yn dal i weithio tuag at y targed a grybwyllwyd ganddi'n flaenorol, sef sicrhau bod cyllid ar gyfer ymchwil a datblygu'n 1 y cant o'n gwerth ychwanegol crynswth erbyn 2010?

**Lesley Griffiths:** I have just mentioned the review panel, and I am feeding figures from that campaign into the economic renewal programme. We will certainly be looking at the levels. As I said, we are not accessing enough research and development funding. We need to do it through the private sector, as well as through our higher education institutions, and we will be looking at that target then.

**Lesley Griffiths:** Yr wyf newydd sôn am y panel adolygu, ac yr wyf yn bwydo ffigurau o'r ymgyrch honno i raglen adnewyddu'r economi. Yn sicr, byddwn yn edrych ar y lefelau. Fel y dywedais, nid ydym yn cael mynediad i ddigon o gyllid ar gyfer ymchwil a datblygu. Mae angen inni wneud hynny drwy'r sector preifat, yn ogystal â thrwy ein sefydliadau addysg uwch, a byddwn yn ystyried y targed hwnnw bryd hynny.

**David Melding:** I accept that you do not have all the details of this review yet, and that you will not have decided how you will take forward research and development policy. However, now that you are the Government's Deputy Minister for science, can we not expect a range of targets or aspirations, because we need some way of measuring our ambition? I am particularly concerned about the pharmaceutical industry. It constitutes 25 per cent, by value, of UK research and development, and yet, in Wales, although we have some outstanding HE institutions involved in the life sciences, we are still not performing as well as we should be. Will you bring forward some ambitious targets—perhaps set for a five and a 10-year period—so that we can really make sense of how we will ensure that Wales is a small, clever country?

**David Melding:** Yr wyf yn derbyn nad yw holl fanylion yr adolygiad hwn gennych eto, ac na fyddwch wedi penderfynu sut y byddwch yn symud polisi ymchwil a datblygu yn ei flaen. Fodd bynnag, gan eich bod yn Ddirprwy Weinidog y Llywodraeth dros wyddoniaeth erbyn hyn, oni allwn ddisgwyl ystod o dargedau neu ddyheadau, oherwydd mae arnom angen rhyw fodd i fesur ein huchelgais? Yr wyf yn pryderu'n benodol am y diwydiant fferyllol. Yn ôl gwerth, mae'n gyfwerth â 25 y cant o waith ymchwil a datblygu'r DU, ac eto, yng Nghymru, er bod gennym rai sefydliadau addysg uwch rhagorol sy'n ymwneud â gwyddorau bywyd, nid ydym o hyd yn perfformio gystal ag y dylem. A wnewch chi gyflwyno rhai targedau uchelgeisiol—a bennir ar gyfer cyfnod o bum a 10 mlynedd efallai—fel y gallwn fynd ati o ddifrif i

wneud synnwyr o sut y byddwn yn sicrhau bod Cymru yn wlad fach, ddeallus?

**Lesley Griffiths:** I have also met with the chief executive and members of the technology strategy board, and the pharmaceutical industry was discussed. We need to attract more manufacturing companies that are research and development intensive to Wales, and pharmaceuticals are an area in which we could do that. Following the appointment of the chief scientific adviser, I am sure that he will help us with those points.

**Lynne Neagle:** I am sure that we would all agree that Government investment in research and development is vital if we want to rebalance our economy, and ensure that we have a thriving manufacturing and technology sector. In yesterday's budget, the coalition Government confirmed that it is to consult on proposals to refocus research and development tax credits towards start-ups and high-tech businesses. While I would welcome any additional investment in companies of that type, I fear that it will be at the expense of many of the 6,000 or so businesses that have benefitted from this tax credit in the last few years. I have already been contacted by an important and long-standing local company in my constituency, which is concerned about the implications that this change in approach will have for the support that it can access. Do you agree that it would be unfair and wrong-headed to restrict Government support for research and development in this way, and that it is essential that all businesses, including long-standing ones, be given the support that they need to innovate and prosper in the future?

**Lesley Griffiths:** It is essential that we support any company that comes to us with excellent research and development ideas and cutting-edge technologies. I will look into that for you, Lynne.

**ProAct**

**Lesley Griffiths:** Yr wyf hefyd wedi cwrdd â phrif weithredwr ac aelodau'r bwrdd strategaeth technoleg, a thrafodwyd y diwydiant fferyllol. Mae angen inni ddenu mwy o gwmnïau gweithgynhyrchu i Gymru, sy'n gwneud llawer o waith ymchwil a datblygu, ac mae'r maes fferyllol yn un maes lle gallem wneud hynny. Yn dilyn penodi'r prif gynghorydd gwyddonol, yr wyf yn siŵr y bydd yn ein helpu gyda'r pwyntiau hynny.

**Lynne Neagle:** Yr wyf yn siŵr y byddai pob un ohonom yn cytuno bod cael y Llywodraeth i fuddsoddi mewn ymchwil a datblygu'n hanfodol os ydym am ailfantoli ein heconomi a sicrhau bod gennym sector gweithgynhyrchu a thechnoleg sy'n ffynnu. Yn y gyllideb ddoe, cadarnhaodd y Llywodraeth glymbleidiol y bydd yn ymgynghori ynghylch cynigion i sicrhau bod credydau treth ymchwil a datblygu'n canolbwyntio unwaith eto ar fusnesau newydd a busnesau uwch-dechnoleg. Er fy mod yn croesawu unrhyw fuddsoddiad ychwanegol mewn cwmnïau o'r fath, ofnaf y gallai hynny ddigwydd ar draul llawer o'r 6,000 o fusnesau, fwy neu lai, sydd wedi elwa o'r credyd treth hwn yn ystod yr ychydig flynyddoedd diwethaf. Yr wyf eisoes wedi clywed gan un cwmni lleol yn fy etholaeth i, sy'n bwysig ac sydd wedi'i sefydlu ers amser, sy'n pryderu am oblygiadau'r newid hwn mewn dull gweithredu ar gyfer y cymorth y gall gael mynediad iddo. A ydych yn cytuno y byddai'n annheg ac yn bengam i gyfyngu ar gymorth y Llywodraeth ar gyfer ymchwil a datblygu yn y modd hwn, a'i bod yn hanfodol bod pob busnes, gan gynnwys y rheini sydd wedi'u sefydlu ers amser, yn cael y cymorth y mae ei angen arnynt i arloesi a ffynnu yn y dyfodol?

**Lesley Griffiths:** Mae'n hanfodol ein bod yn cynorthwyo unrhyw gwmni sy'n dod atom gyda'r technolegau diweddaraf a syniadau gwych ar gyfer ymchwil a datblygu. Edrychaf ar hynny ar eich rhan, Lynne.

**ProAct**

**Q5 Jenny Randerson:** Will the Minister make a statement on the amount of money spent through the ProAct scheme, by region across Wales? OAQ(3)1563(ECT)

**Lesley Griffiths:** The total amount of ProAct expenditure to date is approximately £9 million. The spend by region is not available at present, but a detailed breakdown by unitary authority is available, which shows the funding committed for each unitary authority and region. That totals more than £26 million.

**Jenny Randerson:** I have seen the unitary authority figures for ProAct. They do not make good reading in certain parts of Wales, particularly in Conwy and Ceredigion. Does your Government have any plans to upgrade and update ProAct so that it is suitable for all parts of Wales and not just certain hot spots?

2.40 p.m.

**Lesley Griffiths:** ProAct is available to every company in every part of Wales. It is a demand-led scheme, but various marketing activities have been undertaken to raise awareness. You mentioned Conwy, and particular attention has been paid to the north Wales region with these activities, as the area has had the lowest number of applications for the scheme. We have had meetings with the local authorities, and, when Anglesey Aluminium Metals Limited closed, the ProAct team undertook a detailed mailshot of all its suppliers.

**Jenny Randerson:** I am glad to hear that. There is another aspect to the problem with ProAct that was raised with us as members of the all-party group on the construction industries. ProAct is of very little use to the construction sector because of the temporary nature of employment in that sector. Do you have any plans to amend ProAct in any way, or to provide an alternative scheme that would be of use to the construction sector, which is suffering very badly at the moment?

**Lesley Griffiths:** I recently met with the

**C5 Jenny Randerson:** A wnaiff y Gweinidog ddatganiad am faint o arian a wariwyd drwy'r cynllun ProAct, fesul rhanbarth yng Nghymru? OAQ(3)1563(ECT)

**Lesley Griffiths:** Mae cyfanswm yr arian a wariwyd drwy ProAct hyd yn hyn yn rhyw £9 miliwn. Nid yw'r wybodaeth am wariant fesul rhanbarth ar gael ar hyn o bryd, ond mae dadansoddiad manwl fesul awdurdod unedol ar gael, sy'n dangos y cyllid a neilltuwyd ar gyfer pob awdurdod unedol a rhanbarth. Mae hwnnw'n dod i dros £26 miliwn.

**Jenny Randerson:** Yr wyf wedi gweld y ffigurau ar gyfer ProAct fesul awdurdod unedol. Nid ydynt yn dda mewn rhai rhannau o Gymru, yn enwedig yng Nghonwy a Cheredigion. A oes gan eich Llywodraeth unrhyw gynlluniau i uwchraddio a diweddarau ProAct er mwyn iddo fod yn addas i bob rhan o Gymru, ac nid i rai ardaloedd yn unig sydd â phroblemau dwys?

**Lesley Griffiths:** Mae ProAct ar gael i bob cwmni ym mhob rhan o Gymru. Mae'n gynllun sy'n cael ei arwain gan alw, ond mae gwahanol weithgareddau marchnata wedi'u cynnal i godi ymwybyddiaeth. Soniasoch am Gonwy, ac mae sylw penodol wedi'i roi i ranbarth y gogledd o ran y gweithgareddau hyn, gan mai o'r ardal honno y cafwyd y nifer isaf o geisiadau ar gyfer y cynllun. Yr ydym wedi cael cyfarfodydd â'r awdurdodau lleol, a phan gaeodd Alwminiwm Môn Cyf, anfonodd tîm ProAct ddeunydd drwy'r post at holl gyflenwyr y cwmni.

**Jenny Randerson:** Mae'n dda gennyf glywed hynny. Ceir agwedd arall ar y broblem gyda ProAct, a godwyd gyda ni fel aelodau o'r grŵp hollbleidiol ar y diwydiannau adeiladu. Nid yw ProAct o fawr ddim gwerth i'r sector adeiladu oherwydd natur dros dro swyddi yn y sector hwnnw. A oes gennych unrhyw gynlluniau i newid ProAct mewn unrhyw fodd, neu ddarparu cynllun arall a fyddai o werth i'r sector adeiladu, sy'n dioddef yn ddifrifol iawn ar hyn o bryd?

**Lesley Griffiths:** Cyfarfûm â'r cyngor

ConstructionSkills sector council, and it did not mention that problem to me. We will not be amending ProAct, because you will probably be aware that it is coming to an end. We had a three-month extension up to the end of June, and we now have a new scheme, Skills Growth Wales, which I am sure the construction sector will be able to access.

**Brian Gibbons:** The success of the ProAct scheme is evident in my particular part of Wales. In Neath Port Talbot, something of the order of 1,400 workers have benefited from the ProAct scheme, with assistance being given to 15 companies, supported to the level of £3.25 million. Deputy Minister, would you agree that this has been an excellent investment, which has left many companies in Wales in a ready condition to avail themselves of the opportunities of any upturn in the economy, notwithstanding the effects of the budget that was announced at Westminster yesterday?

**Lesley Griffiths:** I agree with you, Brian. More than 10,000 people have been kept in work as a result of ProAct. As the First Minister said yesterday in answers to questions, the people of Wales understand what we did with the £48 million that was put aside from European funding for that purpose. We spent it wisely, and we have kept people in work.

**Darren Millar:** Deputy Minister, one of the quantifiable goals in the prosperous society part of the 'One Wales' document was the target to achieve 80 per cent employment, and to produce a labour market strategy for Wales. A labour market framework was announced by the Department for Work and Pensions and the Welsh Assembly Government in December last year, but do you think that it is still realistic to aim for 80 per cent employment by the end of the One Wales Government term next year? The framework was put in place very late in the day—almost two and a half years into your Government—so it clearly has not been a priority. Do you accept that more work has to be done if you are ever to achieve that 80 per cent target?

sgiliau sector, SgiliauAdeiladu, yn ddiweddar, ac ni soniodd am y broblem honno wrthyf. Ni fyddwn yn newid ProAct, oherwydd mae'n siŵr y byddwch yn ymwybodol ei fod yn dod i ben. Cawsom estyniad o dri mis hyd at ddiwedd mis Mehefin, ac yn awr mae gennym gynllun newydd, sef Sgiliau Twf Cymru, ac yr wyf yn siŵr y bydd y sector adeiladu'n gallu cael mynediad i'r cynllun hwnnw.

**Brian Gibbons:** Mae llwyddiant cynllun ProAct yn amlwg yn fy rhan benodol i o Gymru. Yng Nghastell-nedd Port Talbot, mae oddeutu 1,400 o weithwyr wedi elwa o gynllun ProAct, lle mae 15 o gwmnïau wedi cael cymorth gwerth £3.25 miliwn. Ddirprwy Weinidog, a fydddech yn cytuno bod hwn wedi bod yn fuddsoddiad ardderchog, sy'n golygu bod llawer o gwmnïau yng Nghymru yn barod i fanteisio ar y cyfleoedd a ddaw yn sgîl unrhyw welliant yn yr economi, er gwaethaf effeithiau'r gyllideb a gyhoeddwyd yn San Steffan ddoe?

**Lesley Griffiths:** Yr wyf yn cytuno â chi, Brian. Mae dros 10,000 o bobl wedi cael eu cadw mewn gwaith o ganlyniad i ProAct. Fel y dywedodd y Prif Weinidog ddoe wrth ateb cwestiynau, mae pobl Cymru yn deall beth a wnaethom â'r £48 miliwn o gyllid Ewropeaidd a roddwyd o'r neilltu at y diben hwnnw. Bu inni ei wario'n ddoeth, ac yr ydym wedi cadw pobl mewn gwaith.

**Darren Millar:** Ddirprwy Weinidog, un o'r nodau mesuradwy yn y rhan honno o ddogfen 'Cymru'n Un' sy'n ymdrin â chymdeithas lewyrchus oedd y targed i sicrhau cyflogaeth ar raddfa o 80 y cant, a chynhyrchu strategaeth marchnad lafur ar gyfer Cymru. Ym mis Rhagfyr y llynedd, cyhoeddodd yr Adran Gwaith a Phensiynau a Llywodraeth y Cynulliad fframwaith marchnad lafur, ond a ydych yn credu ei bod yn dal yn realistig i anelu at gyflogaeth ar raddfa o 80 y cant erbyn diwedd tymor Llywodraeth Cymru'n Un y flwyddyn nesaf? Yr oedd yn hwyr yn y dydd arnoch yn cyflwyno'r fframwaith—bron i ddwy flynedd a hanner i mewn i'ch cyfnod mewn Llywodraeth—felly mae'n amlwg na fu'n flaenoriaeth. A ydych yn derbyn bod yn rhaid gwneud mwy o waith os ydych am gyrraedd y targed hwnnw o 80 y

cant?

**Lesley Griffiths:** We stand by that target, and we will be doing all that we can to reach it.

**Lesley Griffiths:** Yr ydym yn glynu wrth y targed hwnnw, a byddwn yn gwneud popeth a allwn i'w gyrraedd.

**Janet Ryder:** As you said, Deputy Minister, ProAct has kept nearly 10,000 people in work and off the dole. What work has your department done to try to quantify the cost to the public purse had those people become unemployed? If, at some point, you quantify that cost, will any claim be made against the Westminster Government to reimburse the Assembly Government for keeping those people in employment?

**Janet Ryder:** Fel y dywedasoeh, Ddirprwy Weinidog, mae ProAct wedi cadw bron i 10,000 o bobl mewn gwaith ac oddi ar dâl diweithdra. Pa waith y mae eich adran wedi'i wneud i geisio mesur y gost i bwrs y wlad pe bai'r bobl hynny wedi dod yn ddi-waith? Os byddwch yn mesur y gost, rywbyrd, a fyddwch yn hawlio arian gan Lywodraeth San Steffan i ad-dalu Llywodraeth y Cynulliad am gadw'r bobl hynny mewn gwaith?

**Lesley Griffiths:** I accept the point that you make. There have been no direct representations on the issue to the UK Government, because skills provision is a devolved matter. However, I believe that, in meetings between the Welsh Ministers and UK Ministers, the point has been made that ProAct and ReAct have saved millions of pounds by keeping people in work. Despite the savage cuts that are being made by the Conservative-Liberal coalition, which are now clear for everyone to see, we will do all that we can to continue to keep people in work.

**Lesley Griffiths:** Derbyniaf eich pwynt. Nid oes dim sylwadau wedi'u cyflwyno'n uniongyrchol i Lywodraeth y DU ar y mater hwn, oherwydd mae darpariaeth o ran sgiliau'n fater sydd wedi'i ddatganoli. Fodd bynnag, credaf y gwnaed y pwynt mewn cyfarfodydd rhwng Gweinidogion Cymru a Gweinidogion y DU, bod ProAct a ReAct wedi arbed miliynau o bunnoedd drwy gadw pobl mewn gwaith. Er gwaethaf y toriadau llym sy'n cael eu gwneud gan glymblaid y Ceidwadwyr a'r Rhyddfrydwyr, sy'n glir i bawb eu gweld erbyn hyn, byddwn yn gwneud popeth a allwn i barhau i gadw pobl mewn gwaith.

**Y Llywydd:** Tynnwyd cwestiwn 6, OAQ(3)1542(ECT), yn ôl.

**The Presiding Officer:** Question 6, OAQ(3)1542(ECT), has been withdrawn.

#### **Y Ffordd Osgoi Arfaethedig yn Llandeilo**

#### **The Proposed Bypass in Llandeilo**

**C7 Rhodri Glyn Thomas:** A wnaiff y Gweinidog roi'r wybodaeth ddiweddaraf am y ffordd osgoi arfaethedig yn Llandeilo? OAQ(3)1519(ECT)

**Q7 Rhodri Glyn Thomas:** Will the Minister give an update on the proposed bypass in Llandeilo? OAQ(3)1519(ECT)

**Y Dirprwy Brif Weinidog:** Mae'r cynllun trafniadaeth cenedlaethol yn cynnwys ymrwymiad i ddatblygu'r cynigion a nodwyd ar gyfer yr A483 yn Llandeilo. Yr ydym o hyd yn datblygu'r cynigion hynny. Ar hyn o bryd, nid ydym yn bwriadu rhoi'r cynllun ar waith cyn mis Ebrill 2014.

**The Deputy First Minister:** The national transport plan includes a commitment to develop the proposals identified for the A483 at Llandeilo. We are still developing these proposals. The scheme is not currently programmed to start before April 2014.

**Rhodri Glyn Thomas:** Diolch am yr ateb hwnnw, Ddirprwy Brif Weinidog. Fel y gwyddoch, bûm yn ymgyrchu ers ryw 20

**Rhodri Glyn Thomas:** Thank you for that answer, Deputy First Minister. As you know, I have been campaigning for some 20 years

mlynedd am y ffordd osgoi hon yn Llandeilo, ac mae trigolion ardal Llandeilo wedi bod yn ymgyrchu yn hwy na hynny. Mae'n brosiect a fydd nid yn unig yn hwyluso trafndiaeth drwy dref Llandeilo ac yn osgoi damweiniau, ond hefyd yn hwyluso trafndiaeth drwy ddyffryn Tywi. Yr wyf yn cymryd bod y gyllideb ddoe yn golygu y bydd yn anos sicrhau cyllid ar gyfer prosiectau hanfodol fel hyn yng Nghymru yn y dyfodol. Gofynnaf ichi ymdrechu i sicrhau bod y prosiect hwn yn cael ei wireddu, gobeithio, yn 2014.

**Y Dirprwy Brif Weinidog:** Wrth gwrs, yr wyf yn ymwybodol iawn o'r gefnogaeth yr ydych chi, fel Aelod Cynulliad, wedi'i rhoi i'r ffordd osgoi honno, ac mae Jonathan Edwards, yr Aelod Seneddol newydd, wedi bod mewn cysylltiad â mi ar yr un pwynt. Fel y gwyddoch, er ein bod wedi dweud y byddwn yn annhebygol o fod yn barod i ddechrau cyn Ebrill 2014, mae cymal 3 blaenoriaethau'r flaenraglen cefnffyrdd 2008, yn dweud bod gan y ffordd osgoi hon:

'bwysigrwydd uchel ond mae angen cynnal astudiaethau i benderfynu ar y dulliau gorau o ddatrys problemau'.

Felly, dyna'r addewid a roddwyd gennym. Yr ydych wedi tynnu sylw at y ffaith bod y gyllideb ddoe wedi golygu y bydd torri pellach ar wariant cyhoeddus. Gwyddom yn barod, o'r cyhoeddiad cynnar ynglŷn â thoriadau o £6 biliwn, fod cyfran eithaf sylweddol o hwnnw yn arian cyfalaf, a fydd, yn naturiol, yn gwneud pethau'n anosdach wrth gyflenwi nifer o'r prosiectau hyn, yn sicr yn ystod y cyfnod yr ydym yn sôn amdano.

#### ProAct

**Q8 Peter Black:** Will the Minister make a statement on the ProAct scheme? OAQ(3)1556(ECT)

**Lesley Griffiths:** Since 2 January 2009, ProAct has supported over 10,000 individuals within 228 companies. A further 63 companies are working with an adviser to develop a training plan to be awarded funding. Companies have reported benefits of receiving ProAct, including a return to full-time working and improved efficiencies

for that bypass in Llandeilo. People in the Llandeilo area have been campaigning longer than that. It is a project that will not only ease the flow of traffic through the town of Llandeilo and avoid accidents, but also ease the flow of traffic through the Tywi valley. I assume that yesterday's budget will make it even more difficult to secure funding for vital projects like this in Wales in the future. I ask you to endeavour to ensure that this project is realised, hopefully, in 2014.

**The Deputy First Minister:** I am, of course, well aware of your support, as an Assembly Member, for this bypass, and Jonathan Edwards, the new Member of Parliament, has contacted me on the same point. As you know, even though we have said that we are unlikely to be ready to commence before April 2014, phase 3 of the 2008 reprioritisation of the trunk road forward programme says that this bypass is

'high ranking but studies needed to identify best solutions to problems'.

Therefore, that is the promise that we have given. You have highlighted the fact that yesterday's budget will mean further cuts in public spending. We already know, from the early announcement of £6 billion in cuts, that quite a significant proportion of that is capital funding, which will, naturally, make things harder in delivering many of these projects, certainly during the period that we are talking about.

#### ProAct

**C8 Peter Black:** A wnaiff y Gweinidog ddatganiad am y cynllun ProAct? OAQ(3)1556(ECT)

**Lesley Griffiths:** Er 2 Ionawr 2009, mae ProAct wedi cynorthwyo dros 10,000 o unigolion mewn 228 o gwmnïau. Mae 63 o gwmnïau eraill yn gweithio gyda chynghorydd i ddatblygu cynllun hyfforddi er mwyn cael cyllid. Mae cwmnïau wedi sôn am fanteision cael cymorth ProAct, sy'n cynnwys cyfle i ddychweyd i weithio'n



among production.

**Peter Black:** You referred earlier to the fact that the ProAct scheme is coming to the end of its life and will be replaced by another scheme. Can you tell us how many individuals are currently being helped by ProAct and what will happen to them under the new scheme?

**Lesley Griffiths:** We think that the final figure is likely to be in the region of 11,000 people. So, the commitment to train those who are currently in the system will be fulfilled. We are also currently looking at around 60 applications.

**Alun Davies:** One striking thing about your answer to that earlier question is the sheer number of people and families who have been helped by this investment in ProAct. I am sure that you agree that this is a demonstration of an activist Government in action, demonstrating how we, as a Government here in Cardiff, are able to intervene in the economy to protect jobs, to invest in training and to protect the livelihoods of families up and down the country. In the new scheme that you will launch to follow ProAct, will you ensure that the way in which it is administered makes it as accessible as possible, reduces red tape and bureaucracy and ensures that the money reaches businesses and people to guarantee training opportunities and to protect jobs and people's livelihoods?

**Lesley Griffiths:** Yes, you are absolutely right—Wales was ahead of the rest of the UK and, indeed, other parts of Europe in introducing a wage subsidy scheme. It is worth mentioning that, when David Cameron visited the Assembly last month, he was interested in both schemes and asked the First Minister if there was an evaluation available.

On Skills Growth Wales, I agree with you on bureaucracy and the lack of red tape, but the difficulty is that it is European funding, which means that we must adhere to stringent criteria.

**Andrew R.T. Davies:** One point about the

llawn amser a gwella effeithlonrwydd o ran cynhyrchu.

**Peter Black:** Bu ichi gyfeirio'n gynharach at y ffaith bod cynllun ProAct yn dod i ddiwedd ei oes ac y bydd cynllun arall yn cymryd ei le. A allwch ddweud wrthym faint o unigolion sy'n cael cymorth gan ProAct ar hyn o bryd, a beth fydd yn digwydd iddynt dan y cynllun newydd?

**Lesley Griffiths:** Credwn fod y ffigur terfynol yn debygol o fod tua 11,000 o bobl. Felly, bydd yr ymrwymiad i hyfforddi'r bobl hynny sydd yn y system ar hyn o bryd yn cael ei wireddu. Yr ydym hefyd yn edrych ar ryw 60 o geisiadau ar hyn o bryd.

**Alun Davies:** Un peth trawiadol am eich ateb i'r cwestiwn hwnnw a ofynnwyd yn gynharach yw nifer aruthrol y bobl a'r teuluoedd y mae'r buddsoddiad hwn yn ProAct wedi'u helpu. Yr wyf yn siŵr y cytunwch ei fod yn dangos Llywodraeth weithredol ar waith, gan ddangos sut yr ydym ni, fel Llywodraeth yma yng Nghaerdydd, yn gallu ymyrryd yn yr economi i amddiffyn swyddi, buddsoddi mewn hyfforddiant ac amddiffyn bywoliaeth teuluoedd ar hyd a lled y wlad. Yn y cynllun newydd y byddwch yn ei lansio i ddilyn ProAct, a wnewch chi sicrhau bod y modd y caiff ei weinyddu'n ei wneud mor hygyrch â phosibl, yn lleihau biwrocratiaeth a gwaith papur, ac yn sicrhau bod yr arian yn cyrraedd busnesau a phobl er mwyn gwarantu cyfleoedd hyfforddi ac amddiffyn swyddi a bywoliaeth pobl?

**Lesley Griffiths:** Yr ydych yn llygad eich lle—yr oedd Cymru ar y blaen i rannau eraill o'r DU ac, yn wir, rhannau eraill o Ewrop, o ran cyflwyno cynllun cymhorthdal cyflogau. Mae'n werth crybwyll bod David Cameron, wrth ymweld â'r Cynulliad fis diwethaf, wedi dangos diddordeb yn y ddau gynllun, ac wedi gofyn i'r Prif Weinidog a oedd gwerthusiad ar gael.

O ran Sgiliau Twf Cymru, yr wyf yn cytuno â chi am fiwrocratiaeth a lleihau gwaith papur, ond yr anhawster yw mai cyllid Ewropeaidd ydyw, sy'n golygu bod yn rhaid inni gadw at feini prawf llym.

**Andrew R.T. Davies:** Un pwynt am y

ProAct scheme that has been touched on is the jargon or language that must be used on the application form in order for a successful application to be considered. I think that the Federation of Small Businesses, in particular, highlighted this point, emphasising the need to use 'educational speak' on the application form. Given that a new scheme is being introduced, what is the Welsh Assembly Government doing to try to learn lessons from the difficulties that some companies faced in accessing ProAct so that, hopefully, the next time around, those businesses will be able to access the scheme in an efficient manner? Hopefully, the constructive observations that they make can be taken on board by the officials who devise these schemes.

2.50 p.m.

**Lesley Griffiths:** Again, because of European funding—Skills Growth Wales will be funded from the same pot of money, following ProAct—we have to meet the criteria. Companies tell us that the assistance that they have had from human resources advisers has helped in that way and made things much simpler. I will take your comments on board, however.

### Improving Rail Services

**Q9 Irene James:** What is the Welsh Assembly Government doing to improve rail services in south-east Wales? OAQ(3)1539(ECT)

**The Deputy First Minister:** The national transport plan contains a number of projects to improve rail services in south-east Wales, including the completion of the detailed feasibility work to provide hourly services from Ebbw Vale to Cardiff and Newport.

**Irene James:** Deputy First Minister, I have raised the issue of the Newport to Ebbw Vale rail link several times. To further facilitate this matter, would you give us a timescale for when you think work will start?

cynllun ProAct sydd wedi'i grybwyll yw'r jargon neu'r iaith y mae'n rhaid ei defnyddio ar y ffurflen gais er mwyn i gais llwyddiannus gael ei ystyried. Credaf fod y Ffederasiwn Busnesau Bach, yn arbennig, wedi tynnu sylw at y pwynt hwn, gan bwysleisio'r angen i ddefnyddio 'iaith addysg' ar y ffurflen gais. O ystyried bod cynllun newydd yn cael ei gyflwyno, beth y mae Llywodraeth y Cynulliad yn ei wneud i geisio dysgu gwersi o'r anawsterau a wynebodd rhai cwmnïau o ran cael mynediad i ProAct, fel y bydd y busnesau hynny, gobeithio, yn gallu cael mynediad i'r cynllun mewn modd effeithlon y tro nesaf? Gobeithio y bydd modd i'r swyddogion sy'n llunio'r cynlluniau hyn ystyried y sylwadau adeiladol a wnânt.

**Lesley Griffiths:** Eto, oherwydd cyllid Ewropeaidd—caiff Sgiliau Twf Cymru ei ariannu o'r un ffynhonnell, yn dilyn ProAct—bydd yn rhaid inni fodloni'r meini prawf. Mae cwmnïau'n dweud wrthym bod y cymorth y maent wedi'i gael gan gynghorwyr adnoddau dynol wedi helpu yn hynny o beth, ac wedi gwneud pethau'n symlach o lawer. Fodd bynnag, byddaf yn ystyried eich sylwadau.

### Gwella Gwasanaethau Rheilffyrdd

**C9 Irene James:** Beth mae Llywodraeth Cynulliad Cymru yn ei wneud i wella gwasanaethau rheilffyrdd yn y de ddwyrain? OAQ(3)1539(ECT)

**Y Dirprwy Brif Weinidog:** Mae'r cynllun trafndiaeth cenedlaethol yn cynnwys nifer o brosiectau i wella gwasanaethau rheilffyrdd yn y de-ddwyrain, gan gynnwys cwblhau'r gwaith dichonoldeb manwl i ddarparu gwasanaethau bob awr o Lynebwy i Gaerdydd a Chasnewydd.

**Irene James:** Ddirprwy Brif Weinidog, yr wyf wedi codi'r mater ynghylch y cyswllt rheilffordd rhwng Casnewydd a Glynebwy droeon. Er mwyn hwyluso'r mater hwn ymhellach, a wnewch chi roi amserlen inni ar gyfer pryd yr ydych yn meddwl y bydd y gwaith yn dechrau?

**The Deputy First Minister:** In the letter that I sent you in March, Irene, I set out the current position, which is that I have asked Network Rail to progress detailed design work for a combined Ebbw Vale town station to Newport services scheme. The study will include planning regulations, timetable analysis and engineering feasibility to consider the provision of hourly train services from the new Ebbw Vale town station to Cardiff and Newport. This scheme will require major infrastructure works, including a passing loop and, possibly, a double track between Ebbw Vale Parkway and Ebbw Vale town station, as well as a two-platform station at the town station.

We are aware that the first part of the work, which involves the improvements to Gaer junction, will be completed by October 2010. We could operate services to Newport then, but they would have to be instead of services to Cardiff; we do not particularly want to do that. To provide services to Cardiff and Newport without having to substitute any of the services to Cardiff, we need those infrastructure and signalling improvements. The study that I mentioned is expected to reach me in March 2011.

**Mohammad Asghar:** Deputy First Minister, you have already answered my question in your answer to Irene, so I will put it differently. People, businesses and industries across south-east Wales are eager to know when the trains will start running to Newport on the Ebbw valley line. The First Minister said last week that the Welsh Assembly Government anticipates that the remodelling of the Gaer junction at Newport would be ready in September this year, but considerable confusion remains about the precise date for when the line will be open and functioning. A direct rail link between Ebbw Vale and Newport forms a key component of the national transport plan, and I fully welcome that. However, can you reveal whether you are any closer to committing to a date for when you expect trains to run on the Ebbw valley line direct to Newport? Do you agree that every effort should be made to keep the people of south-

**Y Dirprwy Brif Weinidog:** Yn y llythyr a anfonais atoch ym mis Mawrth, Irene, amlinellais y sefyllfa bresennol, sef fy mod wedi gofyn i Network Rail ddatblygu gwaith cynllunio manwl ar gynllun cyfun ar gyfer gwasanaethau rhwng gorsaf tref Glynebwy a Chasnewydd. Bydd yr astudiaeth yn cynnwys camau i edrych ar reoliadau cynllunio, dadansoddi amserlenni ac asesu dichonolrwydd o safbwynt peirianeg er mwyn ystyried darparu gwasanaethau trên bob awr o orsaf newydd tref Glynebwy i Gaerdydd a Chasnewydd. Bydd angen gwneud gwaith mawr ar y seilwaith ar gyfer y cynllun hwn, gan gynnwys dolen osgoi ac, o bosibl, trac dwbl rhwng Parcfordd Glynebwy a gorsaf tref Glynebwy, yn ogystal â gorsaf dau blatfform yng ngorsaf y dref.

Gwyddom y bydd rhan gyntaf y gwaith, sy'n cynnwys gwelliannau i gyffordd Gaer, wedi'i chwblhau erbyn mis Hydref 2010. Gallem redeg gwasanaethau i Gasnewydd wedi hynny, ond byddai'n rhaid iddynt fod yn lle gwasanaethau i Gaerdydd; nid ydym yn orawyddus i wneud hynny. Er mwyn darparu gwasanaethau i Gaerdydd a Chasnewydd heb orfod disodli unrhyw wasanaethau i Gaerdydd, mae arnom angen y gwelliannau hynny i'r seilwaith a'r signalau. Mae disgwyl i'r astudiaeth a grybwyllais fy nghyrraedd ym mis Mawrth 2011.

**Mohammad Asghar:** Ddirprwy Brif Weinidog, yr ydych eisoes wedi ateb fy nghwestiwn yn eich ateb i Irene, felly fe'i geiriau yn wahanol. Mae pobl, busnesau a diwydiannau ar draws y de-ddwyrain yn awyddus i wybod pryd y bydd y trenau'n dechrau rhedeg i Gasnewydd ar hyd llinell cwm Ebwy. Yr wythnos diwethaf, dywedodd y Prif Weinidog fod Llywodraeth y Cynulliad yn disgwyl i waith ail-lunio cyffordd Gaer yng Nghasnewydd fod yn barod ym mis Medi eleni, ond erys dryswch sylweddol ynghylch yr union ddyddiad y bydd y llinell yn agor ac yn gweithio. Mae cyswllt rheilffordd uniongyrchol rhwng Glynebwy a Chasnewydd yn elfen hanfodol o'r cynllun trafniadaeth cenedlaethol, ac yr wyf yn croesawu hynny'n llwyr. Fodd bynnag, a allwch ddatgelu a ydych rywfaint yn nes at ymrwymo i ddyddiad pan fyddwch yn disgwyl i drenau redeg yn syth i Gasnewydd ar hyd llinell cwm Ebwy? A ydych yn cytuno

east Wales fully informed about the progress of the rail link developments, given, as you will be aware, the potential impact that public transport, and rail links in particular, could have on many businesses in these tough economic times?

**The Deputy First Minister:** I gave a very detailed answer to Irene James, so I think that I shall rest there.

**Trish Law:** Following the debate on the national transport plan on 27 April, I am grateful to you, Deputy First Minister, and to the South East Wales Transport Alliance for clarifying a few points of concern that I raised. I am now satisfied that the proposed spur between Abertillery and Aberbeeg and the proposed new station at Cwm are the subject of ongoing studies. If and when the studies are completed, will you do everything in your power to bring about the speedy development of these projects to ensure that the full potential of the Ebbw valley railway is back on track?

**The Deputy First Minister:** Yes, it is important for us to look at the wider aspects, and I can tell you that we will be working closely with SEWTA to identify those future priorities. I promise to keep Members updated on the progress of those discussions.

**Michael German:** I congratulate you on admitting for the first time what I have been pressing you to admit for many months and years, namely that it will take significant infrastructure and a decision, in principle, on the spending of the money to put that infrastructure in place, in order for there to be a service from Ebbw Vale to Newport. You have already confirmed that it will be for the next Assembly to make a decision, given the time that you have, on whether there will be a service to Newport. Some time ago, Network Rail gave you the alternatives available for providing the service, which would have meant a lesser service to Cardiff and

y dylid gwneud pob ymdrech i sicrhau bod pobl y de-ddwyrain yn cael y wybodaeth ddiweddaraf yn gyson am gynnydd y datblygiadau o ran y cyswllt rheilffordd, o ystyried, fel y gwyddoch, yr effaith y gallai trafnidiaeth gyhoeddus, a chysylltiadau rheilffyrdd yn benodol, ei chael ar lawer o fusnesau yn ystod yr adeg hon o gyni economaidd?

**Y Dirprwy Brif Weinidog:** Rhoddais ateb manwl iawn i Irene James, felly, fe'i gadawaf ar hynny.

**Trish Law:** Yn dilyn y ddadl ar y cynllun trafnidiaeth cenedlaethol ar 27 Ebrill, yr wyf yn ddiolchgar ichi, Ddirprwy Brif Weinidog, ac i Gynghrair Trafnidiaeth De-ddwyrain Cymru am egluro rhai pwyntiau a godais a oedd yn peri pryder. Yr wyf yn fodlon yn awr bod astudiaethau parhaus yn cael eu cynnal ynghylch y gangen rhwng Abertillery ac Aber-big a'r orsaf newydd arfaethedig yng Nghwm. Os caiff a phan gaiff yr astudiaethau eu cwblhau, a wnewch chi bopeth posibl i sicrhau bod y prosiectau hyn yn cael eu datblygu'n gyflym er mwyn sicrhau bod potensial llawn rheilffordd cwm Ebwy ar y trywydd iawn unwaith eto?

**Y Dirprwy Brif Weinidog:** Mae'n bwysig inni edrych ar yr agweddau ehangach, a gallaf ddweud wrthy ch y byddwn yn gweithio'n agos gyda Chynghrair Trafnidiaeth De-ddwyrain Cymru i nodi'r blaenoriaethau hynny ar gyfer y dyfodol. Yr wyf yn addo rhannu gwybodaeth yn gyson â'r Aelodau am gynnydd y trafodaethau hynny.

**Michael German:** Yr wyf yn eich llongyfarch am gyfaddef am y tro cyntaf yr hyn yr wyf wedi bod yn pwysu arnoch i'w gyfaddef ers misoedd a blynyddoedd lawer, sef y bydd angen gwaith sylweddol ar y seilwaith a phenderfyniad, mewn egwyddor, ar wario'r arian i roi'r seilwaith hwnnw ar waith, er mwyn cael gwasanaeth o Lynebwy i Gasnewydd. Yr ydych eisoes wedi cadarnhau mai'r Cynulliad nesaf fydd yn gorfod gwneud penderfyniad ynghylch a fydd gwasanaeth i Gasnewydd, o ystyried yr amser sydd gennych. Ychydig amser yn ôl, cawsoch gan Network Rail y dewisiadau eraill a oedd ar gael ar gyfer darparu'r gwasanaeth, a fyddai

alternatives such as going into Newport and back out again into Cardiff, which would have meant that you could have run a service, but not the hourly service that has always been demanded. In your view, would it have been considerably cheaper if the Government at the time of the second Assembly had taken the decision to build the passing loop that was required between Llanhilleth and Cross Keys, because that would have taken far less money than what will have to be spent on the huge infrastructure that you have just described in order to provide that regular service?

**The Deputy First Minister:** It would be inappropriate for me to comment on decisions taken by a previous Government.

**The Presiding Officer:** A classic answer, Deputy First Minister.

wedi golygu gwasanaeth llai i Gaerdydd, a dewisiadau eraill megis mynd i mewn i Gasnewydd ac allan eto i Gaerdydd, a fyddai wedi golygu y gallech fod wedi rhedeg gwasanaeth, ond nid y gwasanaeth bob awr y galwyd amdano gydol yr amser. Yn eich barn chi, a fyddai wedi bod yn rhatach o lawer pe bai'r Llywodraeth, yn ystod yr ail Gynulliad, wedi penderfynu adeiladu'r ddolen osgoi a oedd yn ofynnol rhwng Llanhilleth a Cross Keys, oherwydd byddai hynny wedi gofyn am lai o arian o lawer na'r hyn y byddwch wedi'i wario ar y seilwaith enfawr yr ydych newydd ei ddisgrifio er mwyn darparu'r gwasanaeth rheolaidd hwnnw?

**Y Dirprwy Brif Weinidog:** Byddai'n amhriodol imi wneud sylwadau ar benderfyniadau a wnaed gan Lywodraeth flaenorol.

**Y Llywydd:** Ateb meistrolgar, Ddirprwy Brif Weinidog.

### **Datganiad am y Gorchymyn Cymhwysedd Deddfwriaethol Drafft ynghylch Tai Cynaliadwy**

#### **Statement on the Sustainable Housing Draft Legislative Competence Order**

**The Deputy Minister for Housing and Regeneration (Jocelyn Davies):** We have discussed the draft National Assembly for Wales (Legislative Competence) (Housing and Local Government) Order 2010 on numerous occasions and we do so again today. My statement follows a meeting that I had on Monday with David Jones, Parliamentary Under-Secretary of State at the Wales Office. The purpose of the meeting was to discuss the draft housing legislative competence Order in light of the UK coalition Government's clear statement that it would take it forward as part of its programme. I, like most Members, took that to mean that the draft LCO would be taken forward as drafted and intact. Unfortunately, David Jones made it clear to me that that was not the UK Government's view. In fact, the UK Government will only take the draft LCO forward if it is amended so that competence does not include either abolition of the right to buy or the long-term suspension of the right to buy for a period exceeding 10 years. Furthermore, the Parliamentary Under-Secretary of State made a further

**Y Dirprwy Weinidog dros Dai ac Adfywio (Jocelyn Davies):** Yr ydym wedi trafod Gorchymyn drafft Cynulliad Cenedlaethol Cymru (Cymhwysedd Deddfwriaethol) (Tai a Llywodraeth Leol) 2010 droeon, ac yr ydym yn gwneud hynny eto heddiw. Gwnaf fy natganiad yn dilyn cyfarfod a gefais ddydd Llun gyda David Jones, yr Is-ysgrifennydd Gwladol Seneddol yn Swyddfa Cymru. Diben y cyfarfod oedd trafod y Gorchymyn cymhwysedd deddfwriaethol drafft ynghylch tai yng ngoleuni datganiad clir Llywodraeth glymbleidiol y DU, sef y byddai'n symud y Gorchymyn drafft ymlaen yn rhan o'i rhaglen. Yr oeddwn innau, fel mwyafrif yr Aelodau, yn tybio y byddai hynny'n golygu y byddai'r Gorchymyn drafft yn mynd rhagddo'n gyfan ac fel y cafodd ei ddrafftio. Yn anffodus, eglurodd David Jones wrthyf nad dyna oedd safbwynt Llywodraeth y DU. Mewn gwirionedd, nid yw Llywodraeth y DU yn fodlon symud y Gorchymyn cymhwysedd deddfwriaethol drafft yn ei flaen oni chaiff ei ddiwygio, fel na fydd y cymhwysedd yn cynnwys diddymu'r hawl i brynu, neu atal dros dro yr hawl i brynu, am

requirement, namely that no progress could be made unless specific written assurance was given in respect of the exercise of powers on the provision of sites for Gypsies and Travellers. I must tell Members also that no assurances have been given on securing this draft LCO by the summer, which was the request that the First Minister made to the Secretary of State in May.

Let me first deal with the Gypsies and Travellers issue. Our request for this power is set out clearly. It is not our policy intention to specify sites; our interest is simply to ensure that, where need arises, a suitable site is provided. However, David Jones expressed concern that the Assembly Government might use the Measure-making power to direct a local authority to provide a site in a specific location. I reiterate that the location of a site is a matter for local decision-making within the local development plan process. However, I am sure that Members will agree that we must ensure that an identified need for such provision is not ignored. That was accepted by all during scrutiny.

To turn to the right to buy, I place on record yet again that it is not, and never has been, the Assembly Government's intention to abolish the right to buy. However, provision is included in the draft LCO to give the National Assembly the ability to legislate over disposals by social landlords and to provide flexibility to define arrangements on the matter, which may include developing new schemes such as shared ownership. The dilemma for us is that the draft LCO contains a coherent package of powers that we believe that we need in order to address housing and related issues in Wales.

gyfnod sy'n hwy na 10 mlynedd. Yn ogystal, nododd yr Is-ysgrifennydd Gwladol Seneddol ofyniad arall, sef na ellid gwneud dim cynnydd oni roddir sicrwydd ysgrifenedig penodol ynghylch y modd y byddai pwerau dros ddarparu safleoedd ar gyfer Sipsiwn a Theithwyr yn cael eu harfer. Rhaid imi ddweud wrth yr Aelodau hefyd na roddwyd dim sicrwydd ynghylch cael y Gorchymyn cymhwysedd deddfwriaethol drafft hwn erbyn yr haf, sef y cais a wnaed gan y Prif Weinidog i'r Ysgrifennydd Gwladol ym mis Mai.

Gadewch imi ymdrin yn gyntaf â'r mater sy'n ymwneud â Sipsiwn a Theithwyr. Mae ein cais am y pŵer hwn wedi'i nodi'n glir. Nid ein bwriad o ran polisi yw pennu safleoedd; ein diddordeb ni, yn syml iawn, yw sicrhau y caiff safle addas ei ddarparu lle bo angen. Fodd bynnag, mynegodd David Jones bryder y gallai Llywodraeth y Cynulliad ddefnyddio'r pŵer, o ran llunio Mesurau, i fynnu bod awdurdod lleol yn darparu safle mewn lleoliad penodol. Pwysleisiaf eto fod lleoliad safle yn fater y dylid penderfynu yn ei gylch yn lleol o fewn proses y cynllun datblygu lleol. Fodd bynnag, yr wyf yn siŵr y bydd yr Aelodau'n cytuno bod yn rhaid inni sicrhau nad anwybyddir unrhyw angen a nodir am ddarpariaeth o'r fath. Derbyniwyd hynny gan bawb yn ystod y gwaith craffu.

Gan droi at yr hawl i brynu, hoffwn gofnodi'n swyddogol unwaith eto nad yw'n fwriad, ac na fu'n fwriad erioed, gan Lywodraeth y Cynulliad ddiddymu'r hawl i brynu. Fodd bynnag, caiff darpariaeth ei chynnwys yn y Gorchymyn cymhwysedd deddfwriaethol drafft i roi'r gallu i'r Cynulliad Cenedlaethol ddeddfu ynghylch sefyllfaoedd lle caiff landlordiaid cymdeithasol wared ar dai, a rhoi hyblygrwydd i ddiffinio trefniadau ynghylch y mater, a allai gynnwys datblygu cynlluniau newydd megis rhan-berchenogaeth. Y cyfyng-gyngor a wynebwn yw bod y Gorchymyn cymhwysedd deddfwriaethol drafft yn cynnwys pecyn cydlynol o bwerau y credwn fod arnom eu hangen i fynd i'r afael â materion ynghylch tai a materion cysylltiedig yng Nghymru.

As you know, the draft Order was introduced in December last year. Now, more than six months later, we find ourselves in great danger of being unable to bring forward a Measure as part of our legislative programme to address what we consider to be pressing issues before the end of this Assembly term. As I told the Chamber on 9 June, one of these is the need for intervention powers to reinforce the new regulatory framework for housing associations. This is important because it helps banks and other financial institutions to have confidence in our associations and, at the same time, ensures that the rights and expectations of tenants are backed up by action that can be taken if necessary.

3.00 p.m.

Our prime concern is for the many people in Wales, including many vulnerable people and others, who are in very difficult circumstances. Over and above the right to buy, the draft LCO contains provision for many other things that we, and, indeed, all the key bodies in the field of housing in Wales, believe are needed. These include the prevention of homelessness, providing proper support to the most vulnerable and tackling the issue of empty homes in order to provide decent affordable homes for people in Wales.

I am deeply disappointed that the statement in the UK coalition Government's agreement that this draft LCO will be taken forward is being watered down in practice. I have told the Chamber consistently that we see no need to amend the draft LCO, and I have been pleased to receive the support of the vast majority of Members for our position.

You will recall that I undertook to make this statement if any changes were proposed, and before I respond to the UK Government on the conditions that it is setting, I want to hear the views of the Chamber.

**Mark Isherwood:** Thank you for that

Fel y gwyddoch, cyflwynwyd y Gorchymyn drafft ym mis Rhagfyr y llynedd. Yn awr, dros chwe mis yn ddiweddarach, yr ydym mewn perygl mawr o fethu â chyflwyno Mesur yn rhan o'n rhaglen deddfwriaethol i fynd i'r afael â materion, sy'n rhai brys yn ein barn ni, cyn diwedd tymor y Cynulliad hwn. Fel y dywedais wrth y Siambr ar 9 Mehefin, un o'r materion hynny yw'r angen am bwerau ymyrryd i gryfhau'r fframwaith rheoleiddio newydd ar gyfer cymdeithasau tai. Mae hynny'n bwysig am ei fod yn helpu banciau a sefydliadau ariannol eraill i deimlo'n hyderus yn ein cymdeithasau, ac am ei fod ar yr un pryd yn sicrhau y caiff hawliau a disgwyliadau tenantiaid eu cefnogi gan gamau gweithredu y gellir eu cymryd os bydd angen.

Yr ydym yn pryderu'n bennaf am y bobl niferus yng Nghymru, gan gynnwys llawer o bobl agored i niwed ac eraill, sydd mewn amgylchiadau anodd iawn. Ar wahân i'r hawl i brynu, mae'r Gorchymyn cymhwysedd deddfwriaethol drafft yn cynnwys darpariaeth ar gyfer llawer o bethau eraill yr ydym ni, ac yn wir, y mae'r holl gyrff allweddol ym maes tai yng Nghymru, yn credu bod eu hangen. Mae'r rhain yn cynnwys camau i atal digartrefedd, darparu cymorth priodol i'r sawl sydd fwyaf agored i niwed, a mynd i'r afael â chartrefi gwag er mwyn darparu tai fforddiadwy boddhaol i bobl yng Nghymru.

Yr wyf wedi fy siomi'n arw bod y datganiad yng nghytundeb Llywodraeth glymbleidiol y DU, sef y bydd y Gorchymyn cymhwysedd deddfwriaethol drafft hwn yn cael ei symud ymlaen, yn cael ei lastwreiddio mewn gwirionedd. Yr wyf wedi dweud wrth y Siambr hon yn gyson na welwn fod angen diwygio'r Gorchymyn cymhwysedd deddfwriaethol drafft, ac yr wyf yn falch i'n safbwynt gael cefnogaeth mwyafrif helaeth yr Aelodau.

Byddwch yn cofio imi addo gwneud y datganiad hwn pe bai unrhyw newidiadau'n cael eu cynnig. Cyn imi ymateb i Lywodraeth y DU ynghylch yr amodau y mae'n eu pennu, hoffwn glywed safbwyntiau'r Siambr.

**Mark Isherwood:** Diolch am y datganiad

statement. I will begin by praising your principled position on this, which we respect greatly, and your invitation to Members to express their views today. As you are aware, there is much in this draft Order that we on this side of the Chamber support and which mirrors our own policies for new forms of occupation and social housing. We support the development of intermediate housing, low-cost home ownership schemes, a new regulatory framework for housing associations and social housing providers, reviewing the statutory framework for homelessness, ensuring all-encompassing provision for homeless people, allowing the Assembly a role in deciding the legislative framework in relation to social housing, meeting the housing needs of vulnerable people, reforming secure and assured tenancies—[*Interruption.*] I am looking at elements within this, if you do not mind.

**The Presiding Officer:** Order. It is not appropriate for distinguished Members to interrupt a senior spokesperson of the opposition.

**Mark Isherwood:** We support the move towards a single form of tenure that addresses the concerns of tenants who often move in stock transfer from councils to housing associations, and we support proposals for housing-related support to help people to maintain and develop the ability to occupy their homes. There is all that and much more that we fully support and are keen to see brought forward.

You referred to the statement in the UK coalition Government's programme for government that it will take forward the sustainable homes draft legislative competence Order. That statement was not qualified, at that point, by anyone in the Chamber, and none of us was any the wiser. It is therefore helpful that you are reporting back today. I am conscious that, historically, a number of draft legislative competence Orders have changed somewhat after leaving the Assembly and going to Westminster, and also that some proposed legislative competence Orders have been voted down

hwnnw. Hoffwn ddechrau drwy ganmol eich safbwynt egwyddorol ar y mater, yr ydym yn ei barchu'n fawr, a chanmol eich gwahoddiad i'r Aelodau fynegi eu safbwyntiau heddiw. Fel y gwyddoch, yr ydym ni, yr ochr hon i'r Siambr, yn cefnogi llawer o'r hyn sydd yn y Gorchymyn drafft dan sylw, sy'n adlewyrchu ein polisïau ein hunain ynghylch ffurfiau newydd ar feddiannaeth a thai cymdeithasol. Yr ydym yn cefnogi datblygu tai canolradd, cynlluniau perchentyaeth cost isel, fframwaith rheoleiddio newydd ar gyfer cymdeithasau tai a darparwyr tai cymdeithasol, adolygu'r fframwaith statudol ar gyfer digartrefedd, sicrhau darpariaeth hollgynhwysol i bobl ddigartref, caniatáu rôl i'r Cynulliad wrth benderfynu ar y fframwaith deddfwriaethol yng nghyswllt tai cymdeithasol, diwallu anghenion pobl agored i niwed o ran tai, diwygio tenantiaethau diogel a sicr—[*Torri ar draws.*] Yr wyf yn ystyried elfennau ohono, os nad oes gwahaniaeth gennyh.

**Y Llywydd:** Trefn. Nid yw'n briodol i Aelodau anrhydeddus dorri ar draws un o uwch-lefarwyr yr wrthblaid.

**Mark Isherwood:** Yr ydym yn cefnogi'r cam tuag at gael un math o ddeiliadaeth, sy'n mynd i'r afael â phryderon tenantiaid sy'n aml yn symud wrth i stoc gael ei throsglwyddo o gynghorau i gymdeithasau tai, ac yr ydym yn cefnogi cynigion ynghylch cymorth cysylltiedig â thai i helpu pobl i gynnal a datblygu'r gallu i fyw yn eu cartrefi. Yr ydym yn cefnogi hynny i gyd a llawer mwy yn llawn, ac yr ydym yn awyddus i weld y pethau hynny'n cael eu cyflwyno.

Yr oeddech yn cyfeirio at y datganiad yn rhaglen Llywodraeth glymbleidiol y DU ar gyfer llywodraethu, sy'n nodi y bydd yn symud y Gorchymyn cymhwysedd deddfwriaethol drafft ynghylch cartrefi cynaliadwy yn ei flaen. Ni chafodd y datganiad hwnnw ei ategu, ar y pryd, gan neb yn y Siambr hon, ac nid oedd yr un ohonom fawr callach. Felly, mae'n ddefnyddiol eich bod yn adrodd yn ôl heddiw. Yr wyf yn ymwybodol bod llawer o Orchymynion cymhwysedd deddfwriaethol drafft wedi newid ryw ychydig yn y gorffennol ar ôl gadael y Cynulliad hwn a mynd i San



before they saw the light of day. David Jones wrote to Wayne David in April offering to facilitate the making of this draft Order before the close of the last Parliament, but on the basis that you described today; he raised the same concerns at that time.

We very much want to focus on what works. You refer in your statement to the right to buy, David's concerns, and your principled position. I refer once again to the advice that we have received from Professor Steve Wilcox, who is perhaps the UK's leading researcher in this respect. He is no friend of my party, but he concluded that suspending the right to buy for a limited time in a specific area would not contribute to improving the availability of affordable housing when, on average, tenants remain in occupation for 15 years. It would therefore have no impact on short-term or even medium-term housing pressure. We can debate the rights and wrongs of the right to buy, and spend all day doing so, and I think that we already know people's views in the Chamber about that. The question is how we go forward.

The second issue that you referred to, regarding David's concerns, is the aspect relating to Gypsy and Traveller sites. I fully accept your assurance, and the assurance previously given to me by Carl Sargeant, as the Minister for Social Justice and Local Government, that you do not plan to exercise powers to direct a local authority as to where to locate a site. Having listened to your statement, I hope that an assurance on that basis to David Jones would address that aspect of this draft legislative competence Order.

Official sites are needed to meet the needs identified in the 2006 Niner report, which provided the first comprehensive picture of the accommodation needs of Gypsies and Travellers in Wales. It is an invest-to-save process, which would save local authorities money on, among other things, evictions and

Steffan, a bod rhai Gorchymnion cymhwysedd deddfwriaethol arfaethedig hefyd wedi cael eu trechu cyn iddynt weld golau dydd. Ysgrifennodd David Jones at Wayne David ym mis Ebrill i gynnig hwyluso'r broses o lunio'r Gorchymyn drafft hwn cyn i'r Senedd ddiwethaf ddod i ben, ond ar y sail a ddisgrifiwyd gennych heddiw; mynegodd yr un pryderon bryd hynny.

Yr ydym yn awyddus tu hwnt i ganolbwyntio ar yr hyn sy'n gweithio. Yn eich datganiad, yr ydych yn cyfeirio at yr hawl i brynu, pryderon David, a'ch safbwynt egwyddorol. Cyfeiriaf unwaith eto at y cyngor a gawsom gan yr Athro Steve Wilcox, sef prif ymchwilydd y DU yn y maes hwn efallai. Nid yw'n un o gyfeillion fy mhlaidd, ond daeth i'r casgliad na fyddai atal am gyfnod cyfyngedig yr hawl i brynu mewn ardal benodol yn cyfrannu at wella'r graddau y mae tai fforddiadwy ar gael, pan fo tenantiaid yn aros yn yr un tai am 15 mlynedd, ar gyfartaledd. Felly, ni fyddai'n cael dim effaith ar y pwysau am dai yn y tymor byr, na'r tymor canolig hyd yn oed. Gallwn ddadlau am yr hyn sy'n gywir a'r hyn sy'n anghywir ynghylch yr hawl i brynu, a threulio'r diwrnod cyfan yn gwneud hynny, a chredaf ein bod eisoes yn gwybod beth yw barn pobl yn y Siambr hon am hynny. Y cwestiwn yw sut y dylem symud ymlaen.

Yr ail fater yr oeddech yn cyfeirio ato, ynghylch pryderon David, yw'r agwedd sy'n ymwneud â safleoedd Sipsiwn a Theithwyr. Yr wyf yn derbyn eich sicrwydd yn llawn, a'r sicrwydd a roddwyd imi'n flaenorol gan Carl Sargeant, fel y Gweinidog dros Gyfiawnder Cymdeithasol a Llywodraeth Leol, nad ydych yn bwriadu arfer pwerau er mwyn dweud wrth awdurdod lleol ymhle y dylai leoli safle. Ar ôl gwranddo ar eich datganiad, gobeithiaf y byddai sicrwydd ar y sail honno i David Jones yn mynd i'r afael â'r agwedd honno ar y Gorchymyn cymhwysedd deddfwriaethol drafft hwn.

Mae angen safleoedd swyddogol er mwyn diwallu'r anghenion a nodwyd yn adroddiad Niner 2006, a roddodd y darlun cynhwysfawr cyntaf o anghenion Sipsiwn a Theithwyr o ran llety yng Nghymru. Mae'r broses yn un o fuddsoddi i arbed, a fyddai'n arbed arian i awdurdodau lleol ar orchymnion troi allan a

clear-ups and would promote good community relations. As you know, local authorities' local development plans are required to identify a site, should there be a need for one. How do you respond to the findings of the Niner report, which indicated that travelling communities travel within geographical areas that cut across county and even national boundaries? Do you feel, as I do, that local authorities that have a travelling area of travelling communities in common should come together to address the accommodation needs of Gypsies and Travellers on a regional basis?

I believe that I have addressed all the points in your statement. I close by once again thanking you for making this statement today.

**Jocelyn Davies:** Thank you for your support for the vast majority of the draft LCO and for reminding all the Members here of the very good things that we are doing in relation to housing. The process for the previous draft LCO on housing, which, as you know, stalled, started before I was even appointed as Deputy Minister. Therefore, despite three years of negotiation, scrutiny, discussion and our having the support of the housing world in Wales, we still have absolutely nothing. To be honest, that is unforgivable.

You mentioned Professor Wilcox, as you have done many times before. Therefore, given that you repeated yourself, I see no problem in me repeating myself on this issue. Professor Wilcox says that if you suspend the right to buy, you do not create one more house. Anyone can see that Professor Wilcox is perfectly correct—you do not have to be a professor to work that out. If you do that and nothing else, you will not get any more properties. However, that is not the intention of this Government. What we are saying is that if a local authority wants to make an application to suspend the right to buy, then, during that temporary suspension, it must tell us what it intends to do to increase the supply of housing, otherwise there is no point to it as unless someone leaves a property, it will not become available for anyone else to live in. I am sure that Professor Wilcox would agree

gwaith glanhau, ymysg pethau eraill, ac a fyddai'n hybu cysylltiadau cymunedol da. Fel y gwyddoch, mae'n ofynnol i gynlluniau datblygu lleol awdurdodau lleol nodi safle, pe bai angen un. Sut yr ydych yn ymateb i ganfyddiadau adroddiad Niner, a oedd yn nodi bod cymunedau teithiol yn teithio o fewn ardaloedd daearyddol sy'n croesi ffiniau sirol a chenedlaethol hyd yn oed? A ydych chithau, fel finnau, o'r farn y dylai awdurdodau lleol, sy'n rhan o ardal deithio cymunedau teithiol, ddod at ei gilydd yn rhanbarthol i fynd i'r afael ag anghenion Sipsiwn a Theithwyr o ran llety?

Credaf fy mod wedi rhoi sylw i'r holl bwyntiau a oedd yn eich datganiad. Hoffwn gloi drwy ddiolch ichi unwaith eto am wneud y datganiad hwn heddiw.

**Jocelyn Davies:** Diolch am gefnogi'r rhan fwyaf o'r Gorchymyn cymhwysedd deddfwriaethol drafft, ac am atgoffa'r holl Aelodau sydd yma o'r pethau da iawn yr ydym yn eu gwneud o ran tai. Dechreuodd y broses ar gyfer y Gorchymyn cymhwysedd deddfwriaethol drafft blaenorol ynghylch tai, a ddaeth i stop, fel y gwyddoch, cyn imi hyd yn oed gael fy mhenodi'n Ddirprwy Weinidog. Felly, er gwaethaf tair blynedd o graffu, trin a thrafod, a sicrhau cefnogaeth y maes tai yng Nghymru, nid oes gennym ddim o hyd. A dweud y gwir, mae hynny'n anfaddeuol.

Soniasoch am yr Athro Wilcox, fel yr ydych wedi gwneud droeon. Felly, o ystyried i chi eich ailadrodd eich hun, ni welaf y bydd yn broblem os byddaf innau'n fy ailadrodd fy hun wrth ymdrin â'r mater hwn. Dywed yr Athro Wilcox na fyddwch yn creu'r un tŷ arall wrth atal dros dro yr hawl i brynu. Gall pawb weld bod yr Athro Wilcox yn llygad ei le—nid oes yn rhaid ichi fod yn Athro i ddeall hynny. O wneud hynny a dim byd arall, ni chewch fwy o eiddo. Fodd bynnag, nid dyna fwriad y Llywodraeth hon. Yr hyn a ddywedwn yw bod yn rhaid i awdurdod lleol, os yw am wneud cais i atal dros dro yr hawl i brynu, ddweud wrthym, yn ystod y cyfnod o atal dros dro, beth y mae'n bwriadu ei wneud i gynyddu'r cyflenwad tai. Fel arall, nid oes diben cymryd cam o'r fath, oherwydd, oni fydd rhywun yn gadael eiddo, ni fydd ar gael i neb arall fyw ynddo. Yr wyf yn siŵr y

that if we do other things in the suspension period, there would be an increase in the supply of housing.

You mentioned Gypsies and Travellers, and you were happy and pleased that if we can provide comfort to David Jones on this matter that matter will be put to rest. I have given evidence on this on several occasions to committees here, and David Jones was on the Welsh Affairs Select Committee when I appeared before it, therefore I am quite happy to put on record one more time that this Assembly Government would be delighted if there were no legislation in relation to the provision of Gypsy and Traveller sites, because there should be no need for it. I am glad that you agree with me and that you can recognise that it is a matter for local development plans. We would, of course, like to see co-operation between local authorities on any issues that requires it. You will recall a lot of talk just last week in the Chamber about co-operation, but a week is a bloody long time in politics, and this week has been a very long week. We heard a lot about decentralisation, localism, collaboration, being constructive and respecting differences, which is a laugh, and a new politics, which is an even bigger laugh.

I welcome the tone of your contribution today, and I am sure that the Minister for Social Justice and Local Government will be prepared to write to David Jones to comfort him. Let us hope that, when we hear the rest of the views in the Chamber today, we will again have on record the desperate need for these powers so that we can get on and introduce legislation.

3.10 p.m.

**Alun Davies:** You asked for the response of the Chamber to this announcement. I will tell you what the response is: it is a disgrace. We are appalled.

**Jonathan Morgan:** You do not speak for

byddai'r Athro Wilcox yn cytuno y byddai'r cyflenwad tai'n cynyddu pe baem yn gwneud pethau eraill yn ystod y cyfnod o atal dros dro.

Soniasoch am Sipsiwn a Theithwyr, ac yr oeddech yn fodlon ac yn falch bod modd datrys y mater hwn os gallwn roi sicrwydd yn ei gylch i David Jones. Yr wyf wedi rhoi tystiolaeth droeon ynghylch y mater i bwyllgorau yn y fan hon, ac yr oedd David Jones yn aelod o'r Pwyllgor Dethol ar Faterion Cymreig pan ymddangosais gerbron y pwyllgor hwnnw. Felly, yr wyf yn hollol fodlon cofnodi'n swyddogol unwaith eto y byddai Llywodraeth y Cynulliad yn falch iawn pe na bai deddfwriaeth ynghylch darparu safleoedd i Sipsiwn a Theithwyr, oherwydd ni ddylai fod angen amdani. Yr wyf yn falch eich bod yn cytuno â mi, a'ch bod yn gallu cydnabod mai mater i gynlluniau datblygu lleol ydyw. Wrth gwrs, byddem yn dymuno gweld awdurdodau lleol yn cydweithredu ar unrhyw faterion lle mae angen gwneud hynny. Byddwch yn cofio inni glywed llawer o sôn yn y Siambr hon mor ddiweddar â'r wythnos diwethaf am gydweithredu, ond mae wythnos yn amser hir ofnadwy mewn gwleidyddiaeth, ac mae'r wythnos hon wedi bod yn wythnos hir iawn. Clywsom lawer am ddatganoli, gweithredu'n lleol, cydweithredu, bod yn adeiladol a pharchu gwahaniaethau, sy'n chwerthinllyd, ac am wleidyddiaeth newydd, sydd hyd yn oed yn fwy chwerthinllyd.

Croesawaf agwedd eich cyfraniad heddiw, ac yr wyf yn siŵr y bydd y Gweinidog dros Gyfiawnder Cymdeithasol a Llywodraeth Leol yn fodlon ysgrifennu at David Jones i roi tawelwch meddwl iddo. Gadewch inni obeithio, pan glywn weddill y safbwyntiau yn y Siambr heddiw, y bydd gennym gofnod swyddogol unwaith eto o'r angen dybryd am y pwerau hyn fel y gallwn fwrw ymlaen a chyflwyno deddfwriaeth.

**Alun Davies:** Gofynasoch am ymateb y Siambr i'r cyhoeddiad hwn. Dywedaf wrthyhych beth yw'r ymateb: mae'n warth. Yr ydym i gyd wedi ein harswydo.

**Jonathan Morgan:** Nid ydych yn siarad ar

me.

**The Presiding Officer:** Order. What applied to him also applies to you.

**Alun Davies:** It is no wonder that the leader of the opposition and his deputy are not here this afternoon. It is no wonder that they have scuttled away; they are too ashamed to face us here. The reality is, Deputy Minister, that your anger is shared across most parts of the Chamber. Those of us who sat on these committees for month after month taking evidence from across the whole of the housing sector in Wales came to an agreement, which was made across the parties and beyond parties in some ways. Three of the parties in the Chamber were elected on a commitment to do this. We have a democratic mandate to do this—that includes you, Peter Black, before I hear any more excuses. If we are unable to fulfil our manifesto commitments within the Assembly, that is an affront to Welsh democracy, and we must say that to the new UK Government. We must also say that respect is a two-way street. It is not good enough for a Secretary of State to come here and preach to us, patronise us, and then to scuttle back to London and undermine the legislative programme of this Government. It is not good enough. We need to send a clear signal from the Chamber this afternoon—and, Deputy Minister, I think that you will have the support of almost all of us here in the Chamber for this—that by attempting to prevent the Government from implementing its democratic mandate and the manifesto commitments that we have made, the UK Government is creating a very real problem and is doing so in its first few months in power. This is a very real issue that we cannot escape from. We heard the weasel words from the Conservatives earlier, and we have to say to Mark Isherwood that we are trying to solve the problem of affordable housing here and have been for some time. I have sat on too many committees here and faced this issue and spoken to constituents about this for too long not to be very angry at what we have heard today. I hope, Deputy Minister, that you will be able to reassure us that you will convey these feelings back to David Jones and that you will invite him here to the Chamber to explain why three of the

fy rhan i.

**Y Llywydd:** Trefn. Mae'r hyn a oedd yn berthnasol iddo ef yn berthnasol hefyd i chi.

**Alun Davies:** Nid oes rhyfedd nad yw arweinydd yr wrthblaid a'i ddirprwy yn y fan hon y prynhawn yma. Nid oes rhyfedd eu bod wedi ei heglu hi; mae gormod o gywilydd arnynt i'n hwynebu. Y realiti, Ddirprwy Weinidog, yw bod y rhan fwyaf o bobl yn y Siambr hon yn teimlo'n ddig, fel chithau. Daeth y rheini ohonom a fu'n aelodau o'r pwyllgorau hyn fis ar ôl mis, a fu'n gwrando ar dystiolaeth o bob cwr o'r sector tai yng Nghymru, i gytundeb y daethpwyd iddo ar draws pob plaid, a'r tu hwnt i bleidiau ar sawl ystyr. Cafodd tair o'r pleidiau sydd yn y Siambr hon eu hethol ar sail ymrwymiad i wneud hyn. Mae gennym fandad democrataidd i wneud hyn—mae hynny'n eich cynnwys chi, Peter Black, cyn imi glywed rhagor o esgusodion. Mae'n sarhad i ddemocratiaeth yng Nghymru os na allwn gyflawni ymrwymadau ein maniffestos o fewn y Cynulliad hwn, a rhaid inni ddweud hynny wrth Lywodraeth newydd y DU. Rhaid inni ddweud hefyd bod parch yn gweithio'r ddwy ffordd. Nid yw'n ddigon da i Ysgrifennydd Gwladol ddod yma a phregethu wrthym, ein trin yn nawddoglyd, ac yna'i heglu hi'n ôl i Lundain a thanseilio rhaglen ddeddfwriaethol y Llywodraeth hon. Nid yw'n ddigon da. Mae angen inni anfon neges glir o'r Siambr hon y prynhawn yma—a chredaf, Ddirprwy Weinidog, y cewch gefnogaeth gan bron pob un ohonom sydd yma yn y Siambr—sef, drwy geisio atal y Llywodraeth rhag gweithredu ei mandad democrataidd a'r ymrwymadau a wnaethom yn ein maniffestos, mae Llywodraeth y DU yn creu problem wirioneddol, ac mae'n gwneud hynny yn ystod ei misoedd cyntaf mewn grym. Mae hon yn broblem wirioneddol na allwn ddianc rhagddi. Clywsom eiriau amwys y Ceidwadwyr yn gynharach, a rhaid inni ddweud wrth Mark Isherwood ein bod yn ceisio datrys y broblem o ran tai fforddiadwy yn y fan hon, ac inni geisio gwneud hynny ers amser. Yr wyf wedi bod yn aelod o ormod o bwyllgorau yn y fan hon, ac yr wyf wedi wynebu'r broblem ac wedi siarad ag etholwyr yn ei chylch am ormod o amser i beidio â theimlo'n ddig iawn ynghylch yr hyn a glywsom heddiw.

parties represented here cannot implement their manifestos.

**Jocelyn Davies:** On your last point, it is not my place to invite David Jones to the Chamber, but I would be happy to spend an hour with him, if he wants to spend another hour with me. I am not angry; you would not want to see that, Alun. This is just a mild shade of disappointment. On the issue of respect, and we have heard a lot about the respect agenda, I put that point to Mr Jones and quoted from the Secretary of State's speech, the tone of which I quite enjoyed. Unfortunately, it has all disappeared within the last week, but, on the issue of respect, I was told that there was an intention not to allow us to have powers over the council tax, but, out of respect for this institution, they did change their minds on that. So, there has been some leeway there, I suppose. We do have a democratic mandate for this; I remind Members that three of the manifestos of the four parties in the Chamber said that this is what they wanted to do, as did manifestos of housing organisations, as well as the WLGA. We also have the support of the housing world in Wales for this. I have one point to put on the record, just in case there is any doubt whatsoever that this Government does not support home ownership aspirations in Wales. We have a tenure-neutral policy—perhaps Members who do not deal in housing matters will wonder what that is. For any property that is allocated that has been secured with social housing grant, the tenure is not pre-determined, so you could be a tenant or you could buy that property on day one through low-cost home ownership on homebuy terms.

We are not opposed to home ownership. We have introduced a new DIY homebuy scheme, and local authorities can prioritise that within their social housing grant programmes if they want to. We have put money into that. It allows people in Wales to buy properties on the open market on

Gobeithiaf, Ddirprwy Weinidog, y gallwch roi sicrwydd inni y byddwch yn cyfleu'r teimladau hyn i David Jones ac y byddwch yn ei wahodd yma i'r Siambr i esbonio pam na all tair o'r pleidiau a gynrychiolir yma weithredu eu maniffestos.

**Jocelyn Davies:** O ran eich pwynt olaf, nid fy lle i yw gwahodd David Jones i'r Siambr, ond byddwn yn fodlon treulio awr gydag ef, os yw am dreulio awr arall gyda mi. Nid wyf yn ddig; ni fyddech am weld hynny, Alun. Yr wyf braidd yn siomedig, dyna i gyd. O ran parch, ac yr ydym wedi clywed llawer o sôn am yr agenda o ran parch, mynegais y pwynt hwnnw wrth Mr Jones a dyfynnu o araith yr Ysgrifennydd Gwladol, yr oeddwn yn eithaf hoff o'i hagwedd. Yn anffodus, mae'r cyfan wedi diflannu yn ystod yr wythnos diwethaf, ond, o ran parch, cefais wybod y bwriedid peidio â chaniatáu inni gael pwerau dros y dreth gyngor, ond, o ran parch i'r sefydliad hwn, iddynt newid eu meddwl ynghylch hynny. Felly, gwelwyd ychydig o hyblygrwydd i'r perwyl hwnnw, am wn i. Mae gennym fandad democrataidd ar gyfer hyn; hoffwn atgoffa'r Aelodau i faniffestos tair o'r pedair plaid yn y Siambr hon nodi mai dyma yr hoffent ei wneud, fel y nododd maniffestos sefydliadau tai, yn ogystal â Chymdeithas Llywodraeth Leol Cymru. Yn ogystal, mae'r maes tai yng Nghymru yn cefnogi hyn. Mae gennyf un pwynt i'w gofnodi'n swyddogol, rhag ofn bod unrhyw amheuaeth o gwbl nad yw'r Llywodraeth hon yn cefnogi dyheadau ynghylch perchentyaeth yng Nghymru. Mae gennym bolisi deiliadaeth niwtral—efallai y bydd yr Aelodau nad ydynt yn ymdrin â materion sy'n ymwneud â thai yn ansicr ynghylch ystyr hynny. Yn achos unrhyw eiddo a ddyrennir, a sicrhawyd â grant tai cymdeithasol, ni chaiff y ddeiliadaeth ei phennu ymlaen llaw, felly gallech fod yn denant neu gallech brynu'r eiddo hwnnw o'r dechrau'n deg drwy berchentyaeth cost isel ar delerau cymorth prynu.

Nid ydym yn gwrthwynebu perchentyaeth. Yr ydym wedi cyflwyno cynllun newydd, sef cynllun cymorth prynu dewis eich hun, a gall awdurdodau lleol roi blaenoriaeth i hynny yn eu rhaglenni grant tai cymdeithasol os ydynt yn dymuno. Yr ydym wedi buddsoddi arian yn hynny. Mae'n caniatáu i bobl yng

homebuy terms. We have introduced a new rent first scheme. It is the very first of these schemes. It is an intermediate rental product funded by money from the strategic capital investment fund that gives a chance to those who would otherwise be unable to purchase their own home, but who would not have a chance of getting social rented housing either because their needs are not that severe. This gives them the opportunity to secure a property, which they can rent at first, with some of the rent paid being converted into a discount on that property. We would also like to introduce flexible tenure, which would allow someone to staircase their home ownership up or down. So, no-one can say that this Government is against home ownership, and no-one can say that they are protecting it from us, because it simply is not the case.

**Peter Black:** Thank you for making this statement in the Chamber, Deputy Minister. I would like to start by responding to Alun Davies: if Peter Hain had not introduced this LCO system in the first place, we would not find ourselves in this position. Of course, we are well used to Secretaries of State for Wales interfering in our draft housing LCOs and forcing changes upon us. So, the mock indignation from Alun Davies is fairly hollow in light of the past actions of Ministers of his party in respect of this draft housing LCO. Having said that, I absolutely agree with you, Deputy Minister, that the request—and I would put the word ‘request’ in inverted commas—to change the terms of this draft LCO is unacceptable, and I do not support it. My understanding, and that of other Members in the Chamber, was that the coalition agreement guaranteed that the draft housing LCO would go through unchanged, and I am deeply disappointed that the Parliamentary Under-Secretary of State for Wales has asked for these changes to be made.

I am also disappointed about the other elements of the conversation that you

Nghymru brynu eiddo ar y farchnad agored ar delerau cymorth prynu. Yr ydym wedi cyflwyno cynllun newydd ar gyfer rhentu'n gyntaf. Dyma'r cynllun cyntaf o'i fath. Cynllun rhentu canolradd ydyw, a ariennir gan arian o'r gronfa buddsoddi cyfalaf strategol, sy'n rhoi cyfle i'r sawl na fyddent fel arall yn gallu prynu eu cartref eu hunain, ond na fyddai ganddynt obaith cael tŷ cymdeithasol ar rent ychwaith am nad yw eu hanghenion yn ddigon difrifol. Mae'r cynllun yn rhoi cyfle iddynt gael eiddo, y gallant ei rentu'n gyntaf, gyda rhywfaint o'r rhent a delir yn cael ei droi'n ddisgownt ar yr eiddo hwnnw. Byddem hefyd yn hoffi cyflwyno deiliadaeth hyblyg, a fyddai'n caniatáu i rywun gynyddu neu ostwng lefel eu perchentyaeth. Felly, ni all neb ddweud bod y Llywodraeth hon yn erbyn perchentyaeth, ac ni all neb ddweud eu bod yn diogelu perchentyaeth rhagom, oherwydd nid yw hynny'n wir o gwbl.

**Peter Black:** Diolch am wneud y datganiad hwn yn y Siambr, Ddirprwy Weinidog. Hoffwn ddechrau drwy ymateb i Alun Davies: pe na bai Peter Hain wedi cyflwyno'r system ar gyfer Gorchmynion cymhwysedd deddfwriaethol yn y lle cyntaf, ni fyddem yn y sefyllfa hon. Wrth gwrs, yr ydym wedi hen arfer cael Ysgrifenyddion Gwladol Cymru yn ymyrryd yn ein Gorchmynion cymhwysedd deddfwriaethol drafft ynghylch tai ac yn gorfodi newidiadau arnom. Felly, mae ffug ddieter Alun Davies yn eithaf arwynebol yng ngoleuni gweithredoedd Gweinidogion ei blaid yn y gorffennol yng nghyswllt y Gorchymyn cymhwysedd deddfwriaethol drafft hwn ynghylch tai. Wedi dweud hynny, yr wyf yn cytuno'n llwyr â chi, Ddirprwy Weinidog, bod y cais—a byddwn yn rhoi'r gair ‘cais’ mewn dyfynodau—i newid telerau'r Gorchymyn cymhwysedd deddfwriaethol drafft hwn yn annerbyniol, ac nid wyf yn ei gefnogi. Yn ôl yr hyn a ddeallaf i, ac Aelodau eraill yn y Siambr, yr oedd cytundeb y glymblaid yn gwarantu y byddai'r Gorchymyn cymhwysedd deddfwriaethol drafft ynghylch tai'n mynd rhagddo heb ei newid, ac yr wyf yn siomedig tu hwnt bod Isysgrifennydd Gwladol Seneddol Cymru wedi gofyn i'r newidiadau hyn gael eu gwneud.

Yr wyf hefyd wedi fy siomi ynghylch elfennau eraill y sgwrs y soniasoch amdani,

reported, because it seems that the conversation in relation to the Gypsy and Traveller sites shows that he does not understand planning law, for example. Planning is, of course, a quasi-judicial function, so you cannot force a local authority to put a site anywhere. With regard to council tax, if he really did say that he had considered asking for the council tax provision to be removed, I am astonished, because these council tax provisions enable the Welsh Government to force a reduction in council tax for serving members of the armed forces, which I had thought was a cause close to his heart. It is certainly a cause close to the heart of every Member in the Chamber, who unanimously supported that provision not that long ago. So, it seems to me that, not only is the Under-Secretary of State misguided, but he is in breach of a written understanding that his party has with my party in respect of the coalition agreement. He has also got off to a bad start with regard to the way he is treating the Chamber and this institution.

Deputy Minister, you have asked us what our views are on how we should proceed. It seems that, disappointing as the changes are, in the short term, they do not damage the Government's aspiration to introduce legislation on the suspension of the right to buy, and nor do they damage the Government's aspiration to introduce legislation in relation to the regulation of housing associations. As such, given that I am hoping, as I think everyone is, that we have a positive vote in a referendum in March, we should proceed with getting the draft housing LCO on the statute book as soon as possible and getting legislation through as soon as possible on the priorities that you outlined to me last week, I think, Deputy Minister for proposed Measures. In that way, we can at least get something from this exercise, which, as you say, has taken three years to come to this stage—three years too long. At least, that way, we could get some Measures on the statute book before the Assembly elections.

oherwydd ymddengys fod y sgwrs am safleoedd Sipsiwn a Theithwyr yn dangos nad yw'n deall cyfraith cynllunio, er enghraifft. Mae cynllunio, wrth gwrs, yn swyddogaeth sy'n lled-gyfreithiol, felly ni allwch orfodi awdurdod lleol i roi safle yn unman. O ran y dreth gyngor, os yw'n wir iddo ddweud ei fod wedi ystyried gofyn i'r ddarpariaeth o ran y dreth gyngor gael ei dileu, yr wyf yn rhyfeddu, oherwydd mae'r darpariaethau hyn o ran y dreth gyngor yn galluogi Llywodraeth y Cynulliad i orfodi gostyngiad yn y dreth gyngor ar gyfer aelodau'r lluoedd arfog sy'n gwasanaethu, a oedd yn fater agos at ei galon, mi gredwn. Yn sicr, mae'n fater sy'n agos at galon pob Aelod yn y Siambr, a gefnogodd y ddarpariaeth honno'n unfrydol yn gymharol ddiweddar. Felly, ymddengys i mi fod Isysgrifennydd Gwladol Seneddol Cymru nid yn unig wedi'i gamarwain, ond ei fod hefyd yn torri amodau dealltwriaeth ysgrifenedig rhwng ei blaid ef a'm plaid i yng nghyswllt cytundeb y glymblaid. Mae hefyd wedi dechrau'n anffodus o safbwynt y modd y mae'n trin y Siambr hon a'r sefydliad hwn.

Ddirprwy Weinidog, yr ydych wedi gofyn inni am ein safbwyntiau ar y modd y dylem symud ymlaen. Er mor siomedig yw'r newidiadau, ymddengys yn y tymor byr nad ydynt yn niweidio dyhead y Llywodraeth i gyflwyno deddfwriaeth ynghylch atal dros dro yr hawl i brynu, ac nad ydynt yn niweidio dyhead y Llywodraeth i gyflwyno deddfwriaeth ynghylch rheoleiddio cymdeithasau tai. Felly, o ystyried fy mod innau, fel pawb arall, am wn i, yn gobeithio y cawn bleidlais gadarnhaol mewn refferendwm ym mis Mawrth, dylem fwrw ymlaen i geisio cael y Gorchymyn cymhwysedd deddfwriaethol drafft ynghylch tai ar y llyfr statud cyn gynted â phosibl, a phasio deddfwriaeth cyn gynted â phosibl ynghylch y blaenoriaethau y bu ichi eu hegluro wrthyf yr wythnos diwethaf, mi gredaf, Ddirprwy Weinidog, ar gyfer Mesurau arfaethedig. Fel hynny, gallwn o leiaf gael rhyw fudd o'r ymarfer hwn sydd, fel y dywedaso, wedi cymryd tair blynedd i gyrraedd y pwynt hwn—tair blynedd yn ormod. Fel hynny, gallem o leiaf gael rhai Mesurau ar y llyfr statud cyn etholiadau'r Cynulliad.

3.20 p.m.

I understand that the changes that have been requested to the right to buy cause problems with getting a single housing tenure for social housing tenants, but I also understand that that is not likely to happen in the Assembly and will, hopefully, be revisited after the Assembly elections. I also understand that, as such, it may be possible to achieve that purpose either after a positive vote or a referendum, or if that fails, through a further legislative competence Order. Therefore, in the light of my comments and in the light of what we are doing, we have no choice at this stage but to accept what is presented to us and to get on with legislating. However, I have made representations to the Deputy Prime Minister's office expressing my displeasure at what has happened.

**Jocelyn Davies:** Thank you, Peter, for putting that on the record. You are right about the need for the powers over council tax, not just to tackle the issue of empty properties, which is what local authorities would want to use it for, but also the issue of service personnel. It seems a shame that, although you have made this point previously in the Chamber, that has not been listened to everywhere.

You are also quite right to say that, in the short term, the suspension of the right to buy and the early intervention in the case of a failing housing association could still be achieved in Measure terms regardless of the changes that have been suggested. Three years is a long time. There have been three Secretaries of State for Wales—although one of them served a second term of office. There seems to be no better case for the referendum than this, as we have been working very hard to get it through. You are quite right to say that tenure law is a huge piece of work, and even if we had the powers immediately, we would not be able to use them. The complication is that you have single tenancy and secured tenants, assured tenants and those with preserved rights. There is a desire to have a single tenancy for the social rented

Deallaf fod y newidiadau y gofynnwyd amdanynt ynghylch yr hawl i brynu yn achosi problemau o ran cael un math o ddeiliadaeth ar gyfer tenantiaid tai cymdeithasol, ond deallaf hefyd nad yw hynny'n debygol o ddigwydd yn ystod y Cynulliad hwn ac y bydd, gobeithio, yn cael sylw eto ar ôl etholiadau'r Cynulliad. Deallaf hefyd, fel y cyfryw, y gallai fod yn bosibl cyflawni'r diben hwnnw naill ai ar ôl pleidlais gadarnhaol neu refferendwm, neu os bydd hynny'n methu, drwy Orchymyn cymhwysedd deddfwriaethol arall. Felly, yng ngoleuni fy sylwadau ac yng ngoleuni'r hyn yr ydym yn ei wneud, nid oes gennym ddewis arall ar hyn o bryd ond derbyn yr hyn a gyflwynir inni a bwrw ymlaen â gwaith deddfu. Fodd bynnag, yr wyf wedi cyflwyno sylwadau i swyddfa Dirprwy Brif Weinidog y DU i fynegi fy anffodlonrwydd ynghylch yr hyn sydd wedi digwydd.

**Jocelyn Davies:** Diolch, Peter, am gofnodi hynny'n swyddogol. Yr ydych yn iawn ynghylch yr angen am y pwerau dros y dreth gyngor, nid yn unig er mwyn mynd i'r afael â'r broblem o ran eiddo gwag, sef y diben y byddai awdurdodau lleol am iddynt ei gyflawni, ond hefyd er mwyn mynd i'r afael â'r mater sy'n ymwneud â milwyr. Er ichi wneud y pwynt hwn yn flaenorol yn y Siambr, mae'n drueni nad yw pawb ym mhobman fel pe baent wedi gwrandao arno.

Yr ydych hefyd yn llygad eich lle wrth ddweud y gellid, yn y tymor byr, parhau i gyflawni yn nhermau Mesurau o safbwynt atal dros dro yr hawl i brynu ac o safbwynt ymyrryd yn gynnar yn achos cymdeithas dai aflwyddiannus, ni waeth beth fo'r newidiadau a awgrymwyd. Mae tair blynedd yn amser hir. Mae Cymru wedi cael tri Ysgrifennydd Gwladol—er i un ohonynt wasanaethu am ail dymor. Ymddengys nad oes yr un rheswm gwell dros gynnal refferendwm na hwn, gan inni weithio'n galed iawn i'w basio. Yr ydych yn llygad eich lle wrth ddweud bod cyfraith deiliadaeth yn llawer iawn o waith, a hyd yn oed pe bai gennym y pwerau'n syth, ni fyddai'n bosibl inni eu defnyddio. Yr hyn sy'n gymhleth yw bod gennyh un denantiaeth a thenantiaid diogel, tenantiaid sicr, a'r rhai sydd â hawliau a gadwyd. Ceir



sector. If we created that single tenancy, we would fully expect it to include some kind of statutory right to home ownership for those tenants. Even if we developed that—and we are able to develop that, of course—with this exclusion, the existing legislation over the right to buy, the right to acquire and so on, would still exist. Therefore, de facto your single tenancy could not really be created in any meaningful way.

You also mentioned that you see this as a breach of the UK Government's coalition agreement. If you marry in haste, Peter, you repent at leisure. With this particular marriage, I think that the repentance will come even earlier than most people would have predicted. However, you have only four years and 11 months to go.

**Rhodri Glyn Thomas:** We should not really be surprised that it has taken only five weeks for neo-colonial attitudes to emerge from the Wales Office because, once again, the people of Wales have had a Secretary of State imposed on them from Buckinghamshire, carrying on with the Conservative tradition of never being able to find a Member of Parliament from Wales who was worthy of being Secretary of State for Wales. Further to that, we discovered that the Under-Secretary of State for Wales would be that well-known devolutionist, David Jones. Some of us remember David Jones's contributions in the Assembly for a very short period before he returned home and then took up his position as a Member of Parliament.

We have been conned by the Con-Dem Government. The Assembly was told that there would be co-operation, that we would be respected and that the decisions taken here would be respected by the Government. However, it has refused to accept the settled view of the Assembly on this particular draft LCO. It is the Liberal Democrats who have been well and truly conned. It is all very well for Peter to come here and say that he disagrees with the decision taken by the Government, but it is his Government. He is part of that Government, and, quite honestly,

awydd i gael un denantiaeth ar gyfer y sector tai cymdeithasol ar rent. Pe baem yn creu'r un denantiaeth honno, byddem yn disgwyl yn bendant iddi gynnwys rhyw fath o hawl statudol i berchentyaeth ar gyfer y tenantiaid hynny. Hyd yn oed pe baem yn datblygu hynny—a gallwn ddatblygu hynny, wrth gwrs—gyda'r gwaharddiad hwn, byddai'r ddeddfwriaeth gyfredol o ran yr hawl i brynu, yr hawl i gaffael ac yn y blaen, yn bodoli o hyd. Felly, mewn gwirionedd, ni fyddai modd creu un math o denantiaeth mewn unrhyw fodd ystyrllon.

Soniasoch hefyd eich bod yn ystyried y cam hwn yn gyfystyr â thorri amodau cytundeb clymblaid Llywodraeth y DU. Wrth briodi ar frys, Peter, cewch amser i edifarhau. Yn achos y briodas benodol hon, credaf y daw'r amser i edifarhau hyd yn oed yn gynt nag y byddai'r rhan fwyaf o bobl wedi disgwyl. Fodd bynnag, dim ond pedair blynedd ac 11 mis sydd gennych ar ôl.

**Rhodri Glyn Thomas:** Ni ddylem synnu mewn gwirionedd mai pum wythnos yn unig a gymerodd i agweddau neo-wladychol ddod i'r amlwg o Swyddfa Cymru, oherwydd, unwaith eto, mae pobl Cymru wedi cael Ysgrifennydd Gwladol a orfodwyd arnynt o Swydd Buckingham, gan barhau â'r traddodiad Ceidwadol o fethu bob amser â dod o hyd i Aelod Seneddol o Gymru sy'n deilwng o fod yn Ysgrifennydd Gwladol Cymru. Yn ogystal, canfuwyd mai'r datganolwr adnabyddus, David Jones, fyddai Is-ysgrifennydd Gwladol Cymru. Bydd rhai ohonom yn cofio cyfraniadau David Jones yn y Cynulliad am gyfnod byr iawn, cyn iddo ddychwelyd adref a dechrau ar ei swydd fel Aelod Seneddol.

Yr ydym wedi cael ein twyllo gan y Llywodraeth 'Con-Dem'. Dywedwyd wrth y Cynulliad y byddai cydweithredu, y byddem yn cael ein parchu, ac y byddai'r penderfyniadau a wneir yma'n cael eu parchu gan y Llywodraeth. Fodd bynnag, mae wedi gwrthod derbyn barn bendant y Cynulliad am y Gorchymyn cymhwysedd deddfwriaethol drafft penodol hwn. Y Democratiaid Rhyddfrydol sydd wedi cael eu twyllo waethaf. Mae'n ddigon hawdd i Peter ddod yma a dweud ei fod yn anghytuno â'r penderfyniad a wnaed gan y Llywodraeth,

sending a message to Nick Clegg is just not good enough, Peter, unless you can assure us that he will step in and ensure that this process goes through, as the coalition Government in Westminster told us, and as you told us, that it would. On 9 June you said:

‘My understanding is that the UK coalition agreement suggests that the draft LCO will go through Parliament unamended, as it was agreed by the Assembly.’

That was your view then, but now the situation has completely changed. The fact is that this is not a disgrace—as Alun Davies suggested—arising from our having been conned and the Assembly having been ignored by the Con-Dem coalition. That is not the cause of the disgrace; the disgrace stems from the fact that Welsh communities and people in Wales have been condemned to further delays in relation to affordable housing. It is the people of Wales who will lose out, because this Government will not be allowed to move forward as it wanted to, and as we wanted it to, in order to ensure that there is affordable housing for the people of Wales and that those people who Jocelyn Davies spoke about, who cannot afford—and this is the concept that the Government and all those millionaires in the Cabinet have difficulty with—to buy their own houses. *[Interruption.]* You can smile at that, but that kind of derision tells the people of Wales exactly where your party stands on this issue. Those people who cannot afford to buy their own houses were going to be given affordable housing by this Government, and your Government in Westminster has stopped that process from happening.

I felt very sorry for Mark Isherwood, who tried to respond by reading out most of the draft LCO to us and telling us how we supported all those elements. He recognised the principled position of the Minister, but I am sorry that I cannot also pay David Jones that compliment, Mark. You said that, if assurances had been given to David Jones about Gypsy and Traveller sites, this process

ond ei Lywodraeth ef yw hi. Mae'n rhan o'r Llywodraeth honno, ac, a dweud y gwir, nid yw anfon neges at Nick Clegg yn ddigon da, Peter, oni allwch roi sicrwydd inni y bydd yn ymyrryd ac yn sicrhau bod y broses hon yn mynd rhagddi, fel y dywedodd y Llywodraeth glymbleidiol yn San Steffan wrthym, ac fel y dywedasoch chithau wrthym. Ar 9 Mehefin, dywedasoch:

‘Yn ôl yr hyn a ddeallaf i, mae cytundeb clymblaid y DU yn awgrymu y bydd y Gorchymyn cymhwysedd deddfwriaethol drafft yn mynd drwy'r Senedd heb ei ddiwygio, fel y cytunwyd arno gan y Cynulliad.’

Dyna oedd eich barn ar y pryd, ond mae'r sefyllfa wedi newid yn llwyr bellach. Y ffaith yw nad gwarth—fel yr awgrymodd Alun Davies—sy'n deillio o'r ffaith i ni gael ein twyllo ac i'r Cynulliad gael ei anwybyddu gan y glymblaid ‘Con-Dem’ mo hwn. Nid dyna achos y gwarth; mae'r gwarth yn deillio o'r ffaith bod cymunedau Cymru a phobl Cymru wedi cael eu condemnio i ragor o oedi o ran tai fforddiadwy. Pobl Cymru fydd ar eu colled, oherwydd ni fydd y Llywodraeth hon yn cael bwrw ymlaen fel yr oedd yn dymuno, fel yr oeddem ni'n dymuno, i sicrhau bod tai fforddiadwy ar gael i bobl Cymru a sicrhau y gall y bobl hynny yr oedd Jocelyn Davies yn siarad amdanynt, na allant fforddio—a dyna'r cysyniad sy'n peri trafferth i'r Llywodraeth a'r holl filiwnyddion sydd yn y Cabinet—prynu eu tai eu hunain. *[Torri ar draws.]* Gallwch wenu o glywed hynny, ond mae'r math hwnnw o watwar yn dangos i bobl Cymru beth yn union yw safbwynt eich plaid ar y mater hwn. Yr oedd y bobl hynny na allant fforddio prynu eu tai eu hunain yn mynd i gael tai fforddiadwy gan y Llywodraeth hon, ac mae eich Llywodraeth chi yn San Steffan wedi rhwystro'r broses honno rhag digwydd.

Yr oeddwn yn teimlo'n flin iawn dros Mark Isherwood, a geisiodd ymateb drwy ddarllen y rhan fwyaf o'r Gorchymyn cymhwysedd deddfwriaethol drafft yn uchel inni, a dweud wrthym sut y bu inni gefnogi'r holl elfennau hynny. Cydnabu safbwynt egwyddorol y Gweinidog, ond mae'n flin gennyf na allaf ganmol David Jones am hynny hefyd, Mark. Dywedasoch, pe bai David Jones wedi cael

would go on, but perhaps the reassurance that David Jones wanted was that there would be no Gypsy or Traveller sites anywhere near his own home.

Minister, we have been placed in this position by the coalition Government in Westminster, and I hope that you will agree that we must not let ourselves be driven away from this process by its actions. The fact that it has done the wrong thing does not mean that we should not do the right thing. We will have to proceed as best we can with this legislation for those vulnerable people in Wales who badly need this provision.

**Jocelyn Davies:** I know that you mentioned David Jones, but I will repeat that I think that the tone of the Secretary of State's statement was completely different from what has happened in reality—well, it is certainly not working for me. Then again, I am not sure who is running the show over there.

It is clear that there is much in the draft legislative competence Order, and there is a feeling in the Chamber that we need to proceed. We need to do this with urgency, as we need to ensure that it gets to the Privy Council in July of this year. Otherwise, we will not be able to introduce a Measure that can go through before the next Assembly. If we are unable to do so, it would mean that promises that were made at the time of the last Assembly elections will not be delivered for the people of Wales, which brings us back to Alun Davies's point about this being an affront to democracy. Therefore, there is very little time to negotiate. I am sure that David Jones will read the Record and will form his own view. I will take these views away, and I get the sense that there is a desire here to proceed as best we can.

sicrwydd ynghylch safleoedd Sipsiwn a Theithwyr, y byddai'r broses hon yn mynd rhagddi, ond efallai mai'r unig sicrwydd yr oedd David Jones am ei gael oedd sicrwydd na fyddai dim safleoedd Sipsiwn na Theithwyr yn agos i'w gartref ef.

Weinidog, yr ydym wedi cael ein rhoi yn y sefyllfa hon gan Lywodraeth glymbleidiol yn San Steffan, a gobeithiaf y byddwch yn cytuno bod yn rhaid inni osgoi cael ein gwahanu oddi wrth y broses yn sgîl gweithredoedd y Llywodraeth honno. Nid yw'r ffaith iddi hi wneud y peth anghywir yn golygu na ddylem ni wneud y peth cywir. Bydd yn rhaid inni fwrw ymlaen gystal ag y gallwn â'r ddeddfwriaeth hon er lles y bobl hynny sy'n agored i niwed yng Nghymru, y mae angen y ddarpariaeth hon arnynt yn daer.

**Jocelyn Davies:** Gwn ichi sôn am David Jones, ond hoffwn ddweud eto fy mod yn credu bod agwedd datganiad yr Ysgrifennydd Gwladol yn gwbl wahanol i'r hyn sydd wedi digwydd mewn gwirionedd—wel, nid yw'n gweithio o'm rhan i, yn sicr. Wedi dweud hynny, nid wyf yn siŵr pwy sydd wrth y llyw draw yn y fan acw.

Mae'n amlwg bod cryn dipyn yn y Gorchymyn cymhwysedd deddfwriaethol drafft, a bod ymdeimlad yn y Siambr bod angen inni fwrw ymlaen. Mae angen inni wneud hynny ar fyrder, oherwydd mae angen inni sicrhau ei fod yn cyrraedd y Cyfrin Gyngor ym mis Gorffennaf eleni. Fel arall, ni fydd modd inni gyflwyno Mesur a all gael ei basio cyn y Cynulliad nesaf. Os na allwn wneud hynny, byddai'n golygu na fydd addewidion a wnaed adeg etholiadau'r Cynulliad diwethaf yn cael eu gwireddu i bobl Cymru, sy'n dod â ni'n ôl at bwynt Alun Davies ynghylch sarhau democratiaeth. Felly, prin iawn yw'r amser sydd ar gael i drafod. Yr wyf yn siŵr y bydd David Jones yn darllen y Cofnod ac yn llunio'i farn ei hun. Byddaf innau'n ystyried y sylwadau hyn, a chaf yr argraff fod yma awydd i fwrw ymlaen gystal ag y gallwn.

### **Pwynt o Drefn Point of Order**

**Andrew R.T. Davies:** Thank you, Presiding **Andrew R.T. Davies:** Diolch, Lywydd—

Officer—[*Interruption.*]

[*Torri ar draws.*]

**The Presiding Officer:** Order. I want to hear the point of order.

**Y Llywydd:** Trefn. Hoffwn glywed y pwynt o drefn.

**Andrew R.T. Davies:** It is nice to learn from a sedentary position from the backbenches of the nationalist party that attempts have been made to shut up democracy.

**Andrew R.T. Davies:** Mae'n braf gweld y sawl sy'n eistedd ar feinciau cefn plaid y cenedlaetholwyr yn ceisio rhoi taw ar ddemocratiaeth.

I would like to be guided by the Presiding Officer's interpretation of references to political parties and the formation of Governments. You have determined how political parties should be referred to in the Chamber. In a part of that statement—[*Interruption.*]

Hoffwn gael fy arwain gan ddehongliad y Llywydd o gyfeiriadau at bleidiau gwleidyddol a gwaith ffurfio Llywodraethau. Yr ydych wedi pennu sut y dylid cyfeirio at bleidiau gwleidyddol yn y Siambr. Mewn rhan o'r datganiad hwnnw—[*Torri ar draws.*]

**The Presiding Officer:** Order.

**Y Llywydd:** Trefn.

**Andrew R.T. Davies:** In a part of that statement, wide use was made of an abbreviation for a Government in another part of the United Kingdom and I would be most grateful, Presiding Officer, if you could give continuity to the deliberations by reaffirming what you have already told Plenary.

**Andrew R.T. Davies:** Mewn rhan o'r datganiad hwnnw, defnyddiwyd talfyriad ar gyfer Llywodraeth mewn rhan arall o'r Deyrnas Unedig yn helaeth, a byddwn yn ddiolchgar iawn, Lywydd, pe gallech barhau â'r trafodaethau drwy gadarnhau'r hyn yr ydych eisoes wedi'i ddweud wrth y Cyfarfod Llawn.

3.30 p.m.

**The Presiding Officer:** I am very grateful for that point of order. It enables me to underline what I have said previously that a political group, party or Government is to be known by the name that it gives itself generally. If there are abbreviations, they must be acceptable to those to whom reference is being made. I recollect with affection that our colleague, David Melding, wanted to be called a Tory; well, that is a matter for Mr David Melding, but clearly the phrase 'Con-Dem' Government is not a proper description in the Assembly. [*Interruption.*] Order. It is not about what individual Members think; it is what is appropriate under the rules of order for clarification and understanding. People can say whatever they like outside the Chamber, within the bounds of the law, but I expect the ruling that I have indicated on a number of occasions, namely that parties should be described by their appropriate names, or an appropriate abbreviation that is acceptable to them, to apply. Therefore, I will have to

**Y Llywydd:** Yr wyf yn ddiolchgar iawn am y pwynt hwnnw o drefn. Mae'n fy ngalluogi i bwysleisio'r hyn yr wyf wedi'i ddweud o'r blaen, sef y dylid cyfeirio at grŵp gwleidyddol, plaid neu Lywodraeth gan ddefnyddio'r enw y mae'n ei roi i'w hun yn gyffredinol. Os ceir talfyriadau, rhaid iddynt fod yn dderbyniol i'r sawl y cyfeirir atynt. Cofiaf yn garedig i'n cydweithiwr, David Melding, ddweud ei fod yn dymuno cael ei alw'n Dori; wel, mater i Mr David Melding yw hynny, ond mae'n amlwg nad yw'r ymadrodd Llywodraeth 'Con-Dem' yn ddisgrifiad priodol yn y Cynulliad. [*Torri ar draws.*] Trefn. Nid oes a wnelo â barn Aelodau unigol; mae a wnelo â'r hyn sy'n briodol o safbwynt rheolau trefn ar gyfer egluro a deall. Gall pobl ddweud beth bynnag a fynnant y tu allan i'r Siambr, o fewn terfynau'r gyfraith, ond disgwyliaf i'r dyfarniad yr wyf wedi'i ddatgan droeon fod yn berthnasol, sef y dylai pleidiau gael eu disgrifio gan ddefnyddio'u henwau priodol neu dalfyriad priodol sy'n dderbyniol iddynt.

ensure that that ruling is followed.

Felly, bydd yn rhaid imi sicrhau y glynir at y dyfarniad hwnnw.

## **Adroddiad y Pwyllgor Iechyd, Lles a Llywodraeth Leol ar Wasanaethau Strôc The Health, Wellbeing and Local Government Committee's Report on Stroke Services**

**Darren Millar:** I move that

**Darren Millar:** Cynigiaf fod

*the National Assembly for Wales:*

*Cynulliad Cenedlaethol Cymru:*

*notes the report of the Health, Wellbeing and Local Government Committee on its inquiry into stroke services in Wales, which was laid in the Table Office on 19 April 2010. (NDM4499)*

*yn nodi adroddiad y Pwyllgor Iechyd, Lles a Llywodraeth Leol ar ei ymchwiliad i wasanaethau strôc yng Nghymru, a osodwyd yn y Swyddfa Gyflwyno ar 19 Ebrill 2010. (NDM4499)*

I am pleased to open this debate today on the Health, Wellbeing and Local Government Committee's inquiry into stroke services in Wales. Stroke is one of the most common causes of death in the United Kingdom, and the single most common cause of severe disability. An estimated 10,000 to 11,000 people in Wales suffer a stroke each year and, of those, a third will die from the severity of the stroke, a third will be left permanently disabled, and the final third will recover with proper rehabilitation and support.

Yr wyf yn falch o agor y ddadl hon heddiw ar ymchwiliad y Pwyllgor Iechyd, Lles a Llywodraeth Leol i wasanaethau strôc yng Nghymru. Strôc yw un o achosion mwyaf cyffredin marwolaeth yn y Deyrnas Unedig, ac achos unigol mwyaf cyffredin anabledd difrifol. Amcangyfrifir bod 10,000 i 11,000 o bobl yng Nghymru yn dioddef strôc bob blwyddyn. O blith y rheini, bydd traean yn marw oherwydd difrifoldeb y strôc, bydd traean yn cael eu gadael gydag anabledd parhaol, a bydd y traean olaf yn gwella o gael cymorth adsefydlu a chefnogaeth briodol.

Many people's lives will have been touched by stroke. They will know that the effects of a stroke can be both devastating and life-changing. A stroke can affect a person's ability to communicate, restrict their mobility and take away their independence. In short, their quality of life changes. We should also remember the wider impact that a stroke can have on family members and carers of survivors. It is for these reasons that it is so important that the people of Wales have access to a first-class stroke service.

Bydd strôc wedi cyffwrdd â bywydau llawer o bobl. Byddant yn gwybod y gall effeithiau strôc fod yn ddinistriol, ac y gallant newid bywyd. Gall strôc effeithio ar allu unigolyn i gyfathrebu, gall gyfyngu ar ei allu i symud, a gall ddwyn ei annibyniaeth. Yn fyr, bydd ansawdd ei fywyd yn newid. Dylem gofio hefyd am yr effaith ehangach y gall strôc ei chael ar berthnasau a gofawyr y sawl sy'n goroesi strôc. Dyna pam mae mor bwysig i bobl Cymru gael mynediad i wasanaethau strôc sydd o'r radd flaenaf.

Stroke services in Wales have received a lot of publicity in recent years. Audits conducted by the Royal College of Physicians found that the service in Wales was lagging behind the rest of the United Kingdom. As a result of these audits, there have been many improvements to the service and the committee received evidence of that. However, evidence also suggests that there is still a long way to go to provide the people of

Mae gwasanaethau strôc yng Nghymru wedi cael llawer o gyhoeddusrwydd yn ystod y blynyddoedd diwethaf. Canfu archwiliadau a gynhaliwyd gan Goleg Brenhinol y Ffisigwyr fod y gwasanaeth yng Nghymru ar ei hôl hi, o gymharu Cymru â gweddill y DU. O ganlyniad i'r archwiliadau hyn, gwnaed llawer o welliannau i'r gwasanaeth, a chafodd y pwyllgor dystiolaeth o hynny. Fodd bynnag, mae'r dystiolaeth hefyd yn

Wales with the service that they deserve. This is why the committee decided to conduct its inquiry to establish what needs to be done by the Welsh Government to provide the service that the people of Wales deserve. During the course of our inquiry, we heard a range of evidence from physicians, therapists, individuals and organisations. The committee also received submissions from people living with the aftermath of stroke—both stroke survivors and their relatives.

Before outlining what the committee recommended, I will outline some of the issues that we came across during the inquiry. We heard from all sides that the early diagnosis of stroke is vital to ensure that patients receive appropriate treatment at the earliest possible opportunity. Clinicians told us how effective thrombolysis can be in aiding a patient's quick recovery, but that it is only effective if administered within three hours of a stroke. Clinicians and therapists told us of the importance of multidisciplinary units dedicated to providing specialist care for stroke patients. We were told that specialist staff in such units are invaluable in delivering the care that patients need and the rehabilitation that is crucial to recovery, and the evidence was clear that the more therapy a patient receives, the more effective and swift their recovery will be. Early support and discharge can also greatly improve a patient's recovery. Specialist community-based teams can provide therapy in the patient's own home, thereby removing them from the hospital environment.

There is also the relatively new challenge facing service providers of the number of younger people suffering strokes. This has very different implications. Younger people will have different therapy needs to enable them to return to work and live fulfilled lives—needs that older people would not have. We heard that housing adaptations are crucial in order to enable patients to return to their own homes, but that the speed of processing grants is patchy across Wales. Patients can experience delays in being assessed for speech and language therapy,

awgrymu bod ffordd bell i fynd o hyd i sicrhau bod pobl Cymru yn cael y gwasanaeth y maent yn ei haeddu. Dyna pam y penderfynodd y pwyllgor gynnal ei ymchwiliad, er mwyn gweld beth y mae angen i Lywodraeth Cymru ei wneud i ddarparu'r gwasanaeth y mae pobl Cymru yn ei haeddu. Yn ystod ein hymchwiliad, clywsom ystod o dystiolaeth gan ffisigwyr, therapyddion, unigolion a sefydliadau. Cafodd y pwyllgor gyflwyniadau hefyd gan bobl sy'n byw gyda chanlyniadau strôc—y sawl sy'n goroesi strôc, a'u perthnasau.

Cyn amlinellu'r hyn a argymhellodd y pwyllgor, hoffwn amlinellu rhai o'r problemau y daethom ar eu traws yn ystod yr ymchwiliad. Clywsom gan bob ochr fod diagnosis cynnar o strôc yn hanfodol er mwyn sicrhau bod cleifion yn cael triniaeth briodol cyn gynted â phosibl. Dywedodd clinigwyr wrthym mor effeithiol y gall thrombolysis fod o ran cynorthwyo claf i wella'n gyflym, ond nad yw'n effeithiol oni chaiff ei roi o fewn tair awr i'r claf gael strôc. Soniodd clinigwyr a therapyddion wrthym am bwysigrwydd unedau amlddisgyblaethol pwrpasol i ddarparu gofal arbenigol i gleifion strôc. Dywedwyd wrthym fod staff arbenigol mewn unedau o'r fath yn amhrisiadwy o safbwynt darparu'r gofal y mae ar gleifion ei angen, a darparu'r cymorth adsefydlu sy'n hollbwysig i wella, ac yr oedd y dystiolaeth yn dangos yn glir po fwyaf o therapi a gaiff claf, y mwyaf effeithiol a'r cyflymaf y bydd yn gwella. Gall cymorth cynnar, a chael ei ryddhau o'r ysbyty yn gynnar, wella adferiad iechyd y claf yn fawr hefyd. Gall timoedd arbenigol yn y gymuned ddarparu therapi yng nghartref y claf, a'i symud drwy hynny o amgylchedd yr ysbyty.

Yn ogystal, ceir yr her eithaf newydd sy'n wynebu darparwyr gwasanaeth, sef nifer y bobl ifanc sy'n dioddef strôc. Mae goblygiadau hynny'n wahanol iawn. Bydd gan bobl iau anghenion gwahanol o ran therapi i'w galluogi i ddychwelyd i'r gwaith a byw bywyd llawn—anghenion na fyddai gan bobl hŷn. Clywsom fod addasiadau i dai'n hollbwysig er mwyn galluogi cleifion i ddychwelyd i'w cartrefi eu hunain, ond bod y cyflymder y caiff grantiau eu prosesu'n anghyson ledled Cymru. Gall oedi ddigwydd cyn y bydd cleifion yn cael eu hasesu ar gyfer

and often do not receive enough physiotherapy treatment. Therefore, there is still plenty of work to be done. It is these issues, and others, which formed the background for the committee's conclusions and the recommendations contained in our report. There are 25 recommendations in all, and they cover the whole range of stroke services and the issues that were raised during the inquiry.

The first central recommendation relates to stroke units. We heard from all sides that specialist stroke units, staffed by multidisciplinary teams, were central to developing high-quality stroke services in Wales. Patients treated in a specialist stroke unit have a better chance of surviving and of rehabilitation. We heard that the number of stroke units in Wales has increased over time, but that large numbers of patients in Wales still do not have access to these units when they need them. The committee believes that this must change. We therefore recommend that the Government should seek to ensure that all patients in Wales should have access to a stroke unit. Following on from this, we have also recommended that the practice of admitting stroke patients to general wards should be phased out as a matter of urgency. I am pleased that the Minister has accepted, at least in principle, the committee's recommendations in this area.

The second central recommendation relates to the development of a stroke register. We heard that the number of people who have suffered a stroke in Wales could only be estimated, because the numbers were not adequately recorded or collated. We felt that this was a real weakness in the system. We heard that a stroke register could be used to monitor services and patient outcomes, and be an invaluable source of information. On the basis of the significant evidence that we received, we have recommended that the Government should introduce a national register of patients in Wales with a stroke.

In her response to this recommendation, the Minister has said that the information on strokes is held by individual GPs, and that the Government will take a gradual approach to

therapi lleferydd ac iaith, ac yn aml ni fyddant yn cael digon o driniaeth ffisiotherapi. Mae digon o waith i'w wneud o hyd, felly. Y problemau hyn, a phroblemau eraill, oedd y cefndir i gasgliadau'r pwyllgor a'r argymhellion sydd yn ein hadroddiad. Ceir 25 o argymhellion i gyd, ac maent yn ymdrin â'r holl ystod o wasanaethau strôc, a'r materion a godwyd yn ystod yr ymchwiliad.

Mae'r argymhelliad canolog cyntaf yn ymwneud ag unedau strôc. Clywsom gan bob ochr fod unedau strôc arbenigol, a gaiff eu staffio gan dimoedd amlddisgyblaethol, yn ganolog i ddatblygu gwasanaethau strôc o ansawdd uchel yng Nghymru. Mae gan gleifion a gaiff eu trin mewn uned strôc arbenigol fwy o obaith goroesi a gwella. Clywsom fod nifer yr unedau strôc yng Nghymru wedi cynyddu gydag amser, ond nad oes gan nifer fawr o gleifion yng Nghymru fynediad o hyd i'r unedau hynny pan fo'u hangen arnynt. Mae'r pwyllgor yn credu bod yn rhaid i hynny newid. Felly, yr ydym yn argymhell y dylai'r Llywodraeth geisio sicrhau y dylai pob claf yng Nghymru gael mynediad i uned strôc. Ar sail hynny, yr ydym hefyd wedi argymhell y dylid rhoi terfyn ar frys ar yr arfer o dderbyn cleifion strôc i wardiau cyffredinol. Yr wyf yn falch bod y Gweinidog wedi derbyn, mewn egwyddor o leiaf, argymhellion y pwyllgor yn y maes hwn.

Mae'r ail argymhelliad canolog yn ymwneud â datblygu cofrestr strôc. Clywsom na ellid ond amcangyfrif nifer y bobl yng Nghymru sydd wedi dioddef strôc, am na châi'r niferoedd eu cofnodi na'u casglu yn ddigonol. Yr oeddem yn teimlo bod hynny'n wendid mawr yn y system. Clywsom y gellid defnyddio cofrestr strôc i fonitro gwasanaethau a chanlyniadau i gleifion, ac y gallai fod yn ffynhonnell amhrisiadwy o wybodaeth. Ar sail y dystiolaeth sylweddol a gawsom, yr ydym wedi argymhell y dylai'r Llywodraeth gyflwyno cofrestr genedlaethol o gleifion yng Nghymru sydd wedi dioddef strôc.

Yn ei hymateb i'r argymhelliad hwn, mae'r Gweinidog wedi dweud bod meddygon teulu unigol yn cadw'r wybodaeth am achosion o strôc, ac y bydd y Llywodraeth yn datblygu'r

developing the information technology facilities, to improve access on a national level. While I welcome this response, and the fact that the Minister has accepted the recommendation in principle, I would be grateful if the Minister could, in her response today, indicate the timescale within which she expects the development of these measures to be implemented.

Our third central recommendation relates to an all-Wales stroke strategy. We heard that Wales does not have a dedicated stroke strategy. Instead, a number of documents, when brought together, provide the elements of a strategy. We were told that a lot of good work had been done so far, but that something was needed to take this forward. We heard that a dedicated stroke strategy would focus the minds of all those involved in providing stroke services, and that the strategy could include targets, deadlines and formal monitoring mechanisms. We felt that this was fundamental to driving forward improvements in the service. We are therefore recommending that an all-Wales stroke strategy should be developed, and that this should include targets and performance monitoring. We are also recommending that the results of this monitoring should be published regularly.

Again, I am pleased that the Minister has accepted the recommendations in this area, and I look forward to hearing from her, in her response, just how this strategy will be developed, given that it currently resides in many other documents. We need to bring those documents together, Minister; perhaps you can tell us more about how you intend to do that in your reply.

The report also makes several other recommendations, all of which should be included in a new all-Wales stroke strategy. In relation to the growing number of young people who suffer from stroke, we are recommending that their needs should be addressed and fully integrated in the new strategy. Further to this, we feel that all stroke patients, regardless of their age or the severity of their stroke, should receive the rehabilitation that meets their individual needs.

cyfleusterau technoleg gwybodaeth gam wrth gam i wella mynediad ar lefel genedlaethol. Er fy mod yn croesawu'r ymateb hwn, a'r ffaith bod y Gweinidog wedi derbyn yr argymhelliad mewn egwyddor, byddwn yn ddiolchgar pe gallai'r Gweinidog, yn ei hymateb heddiw, roi arwydd o'r amserlen y mae'n disgwyl i'r mesurau hyn gael eu datblygu oddi mewn iddi.

Mae ein trydydd argymhelliad canolog yn ymwneud â strategaeth strôc i Gymru gyfan. Clywsom nad oes gan Gymru strategaeth strôc bwrpasol. Yn hytrach, mae nifer o ddogfennau, o'u cyfuno, yn darparu elfennau strategaeth. Cawsom wybod bod llawer o waith da wedi'i wneud hyd yma, ond bod angen rhywbeth i symud y gwaith hwnnw yn ei flaen. Clywsom y byddai strategaeth strôc bwrpasol yn sianelu meddwl pawb sy'n ymwneud â darparu gwasanaethau strôc, ac y gallai'r strategaeth gynnwys targedau, terfynau amser, a systemau monitro ffurfiol. Yr oeddem yn teimlo bod hynny'n hanfodol i hybu gwelliannau yn y gwasanaeth. Felly, yr ydym yn argymhell y dylid datblygu strategaeth strôc i Gymru gyfan, ac y dylai gynnwys targedau a gwaith monitro perfformiad. Yr ydym hefyd yn argymhell y dylid cyhoeddi canlyniadau'r gwaith monitro hwn yn rheolaidd.

Eto, yr wyf yn falch bod y Gweinidog wedi derbyn yr argymhellion yn y maes hwn, ac edrychaf ymlaen at glywed, yn ei hymateb, sut yn union y bydd y strategaeth hon yn cael ei datblygu, o ystyried ei bod yn bresennol mewn llawer o ddogfennau eraill ar hyn o bryd. Mae angen inni ddod â'r dogfennau hynny ynghyd, Weinidog; efallai y gallwch ddweud mwy wrthym yn eich ateb am sut yr ydych yn bwriadu gwneud hynny.

Mae'r adroddiad hefyd yn gwneud llawer o argymhellion eraill, y dylid eu cynnwys i gyd mewn strategaeth strôc newydd i Gymru gyfan. O safbwynt y nifer cynyddol o bobl ifanc sy'n dioddef strôc, yr ydym yn argymhell y dylid mynd i'r afael â'u hanghenion, a'u hintegreiddio'n llawn yn y strategaeth newydd. At hynny, teimlwn y dylai pob claf strôc, waeth beth fo'i oedran neu ddifrifoldeb ei strôc, gael y cymorth adsefydlu sy'n diwallu ei anghenion unigol.



To address an understanding and awareness of stroke and its symptoms, we recommend further high-profile campaigns for professionals and the public. We acknowledge, for example, the success of the Act FAST campaign; we feel that that needs to be built on and should therefore form a central part of a stroke strategy.

To address the need for early intervention for those who have suffered a stroke, we are recommending that the priority categorisation of 999 calls for stroke should be changed so that a fully crewed ambulance is dispatched against a category A response time, rather than a category B response time, as is currently the case in Wales.

For those living with the after-effects of stroke, we are recommending that the emphasis on community and longer-term rehabilitation and support should be increased. We are also recommending that, as a matter of urgency, attention should be given to appropriate access to housing, adaptations, benefits, social support and through adequately resourced multidisciplinary therapy services. Our committee has set out a range of recommendations and I am very pleased with the Minister's positive response and the fact that she has accepted all but one of them either wholly, in part or in principle.

3.40 p.m.

The one recommendation that the Minister has rejected, and has suggested that she will keep under review, is the allocation of funding for stroke services in Wales to ensure that those levels of funding are commensurate with those of other countries in the United Kingdom. Her response stated that she is unable to compare spending levels with the rest of the UK because that information is not routinely collected by the UK Department of Health. We acknowledge the difficulty in establishing the precise levels of funding across the UK, and that it is not entirely possible to do so at present. However, I ask the Minister whether she will consider accepting part of our recommendation to identify more clearly the

Er mwyn mynd i'r afael â dealltwriaeth ac ymwybyddiaeth o strôc a'i symptomau, yr ydym yn argymhell rhagor o ymgyrchoedd proffil uchel ar gyfer gweithwyr proffesiynol a'r cyhoedd. Er enghraifft, yr ydym yn cydnabod llwyddiant ymgyrch Act FAST; teimlwn bod angen adeiladu ar hynny, ac y dylai hynny, felly, fod yn rhan ganolog o strategaeth strôc.

Er mwyn mynd i'r afael â'r angen am ymyrraeth gynnar ar gyfer y sawl sydd wedi dioddef strôc, yr ydym yn argymhell y dylai'r categori blaenoriaeth i alwadau 999 am strôc gael ei newid fel yr anfonir ambiwlans â chriw llawn yn erbyn amser ymateb categori A, yn hytrach nag amser ymateb categori B, fel sy'n digwydd yng Nghymru ar hyn o bryd.

Ar gyfer y sawl sy'n byw gydag ôl-ffeithiau strôc, yr ydym yn argymhell y dylid cynyddu'r pwyslais ar gefnogaeth a chymorth adsefydlu cymunedol a thymor hwy. Yr ydym hefyd yn argymhell y dylid rhoi sylw ar frys i fynediad priodol i dai, addasiadau, budd-daliadau a chymorth cymdeithasol drwy wasanaethau therapi amlddisgyblaethol sy'n cael adnoddau digonol. Mae ein pwyllgor wedi nodi ystod o argymhellion, ac yr wyf yn fodlon iawn ar ymateb cadarnhaol y Gweinidog, a'r ffaith iddi dderbyn pob un heblaw am un ohonynt yn llawn, yn rhannol neu mewn egwyddor.

Yr unig argymhelliad y mae'r Gweinidog wedi'i wrthod, ac y mae wedi awgrymu y bydd yn ei adolygu'n barhaus, yw'r un ynghylch y dyraniad cyllid i wasanaethau strôc yng Nghymru, er mwyn sicrhau bod lefelau cyllid yng Nghymru yn gymesur â lefelau cyllid mewn gwledydd eraill yn y Deyrnas Unedig. Dywedodd yn ei hymateb nad yw'n gallu cymharu lefelau gwariant Cymru â gweddill y DU am na chaiff y wybodaeth honno ei chasglu fel mater o drefn gan Adran Iechyd y DU. Yr ydym yn cydnabod yr anhawster sydd ynghlwm wrth ganfod union lefelau cyllid ledled y DU, ac yr ydym yn cydnabod nad yw'n gwbl bosibl gwneud hynny ar hyn o bryd. Fodd bynnag, gofynnaf i'r Gweinidog a wnaiff ystyried

resources that contribute to stroke services, so that we can see for ourselves what exactly is being spent on those services in Wales, such as CT and MRI scanning. This would allow a fuller picture of the funding package in Wales to be achieved as a benchmark from which we can attempt to increase those resources in future.

In conclusion, I welcome the Minister's response to our report; I look forward to her contribution today, and I hope that we will hear some answers to the particular issues that I have raised in my speech. I thank those who gave evidence to the committee, whether it was oral or written evidence, committee members and the excellent committee support staff who helped to produce our report.

**The Presiding Officer:** Thank you, Chair. The Minister has helpfully indicated that she would like to be the penultimate speaker, and I will call her at the appropriate time.

**Joyce Watson:** I am grateful for the opportunity to speak during this debate. It is worth remembering that a stroke can be a life-threatening and severely debilitating condition that affects thousands of people across Wales each year. However, it can be, and often is, a condition from which individuals make a full recovery and go on to lead fulfilled lives, like my husband, who had a stroke at the age of 29, some 32 years ago.

I am grateful to the committee for looking into such an important topic and for producing a valuable report with the aim of helping to improve care for stroke patients across Wales. I have learned a great deal about aspects of this topic since coming to the Assembly, following a campaign that I ran on increasing awareness of the causes and signs of a stroke last year. I do not claim to be a voice of authority when it comes to the scientific causes and effects of a stroke; however, I have considerable personal experience of living with a stroke survivor.

derbyn rhan o'n hargymhelliad i nodi'n gliriach yr adnoddau sy'n cyfrannu at wasanaethau strôc, er mwyn inni allu gweld drosom ein hunain faint yn union sy'n cael ei wario ar y gwasanaethau dan sylw yng Nghymru, megis gwasanaethau sganio CT ac MRI. Byddai hynny'n caniatáu inni gael darlun llawnach o'r pecyn cyllid yng Nghymru fel meincnod y gallwn ei ddefnyddio i geisio cynyddu'r adnoddau hynny yn y dyfodol.

I gloi, croesawaf ymateb y Gweinidog i'n hadroddiad; edrychaf ymlaen at ei chyfraniad heddiw, a gobeithiaf y byddwn yn clywed atebion i'r materion penodol yr wyf wedi eu codi yn fy araith. Diolchaf i'r rheini a roddodd dystiolaeth i'r pwyllgor, boed yn dystiolaeth lafar neu'n dystiolaeth ysgrifenedig, aelodau'r pwyllgor, a staff cymorth gwych y pwyllgor, a helpodd i gynhyrchu ein hadroddiad.

**Y Llywydd:** Diolch, Gadeirydd. Mae'r Gweinidog wedi dweud y byddai'n hoffi bod yn siaradwr olaf ond un, sy'n ddefnyddiol iawn, ac fe'i galwaf ar yr amser priodol.

**Joyce Watson:** Yr wyf yn ddiolchgar am y cyfle i siarad yn ystod y ddadl hon. Mae'n werth cofio y gall strôc fod yn gyflwr anghueol ac eithriadol o wanychol sy'n effeithio ar filoedd o bobl ledled Cymru bob blwyddyn. Fodd bynnag, gall fod yn gyflwr, ac yn aml mae yn gyflwr, y bydd unigolion yn gwella'n llwyr ohono gan fynd yn eu blaen i fyw bywydau llawn, fel yn achos fy ngŵr, a gafodd strôc pan oedd yn 29 oed, tua 32 mlynedd yn ôl.

Yr wyf yn ddiolchgar i'r pwyllgor am ymchwilio i bwnc mor bwysig, ac am gynhyrchu adroddiad gwerthfawr gyda'r bwriad o helpu i wella gofal i gleifion strôc ledled Cymru. Yr wyf wedi dysgu llawer iawn am agweddau ar y pwnc hwn ers imi ddod i'r Cynulliad, yn dilyn ymgyrch a gynhaliwyd gennyf y llynedd i godi ymwybyddiaeth o achosion ac arwyddion strôc. Nid wyf yn honni bod yn llais awdurdodol ynghylch achosion ac effeithiau gwyddonol strôc; fodd bynnag, mae gennyf gryn dipyn o brofiad personol o fyw gyda rhywun sydd wedi goroesi strôc.

During the course of my campaign, it became apparent that several areas needed attention. First among these is the perception of the public at large concerning their susceptibility to suffering a stroke. Patients have spoken to me about having no idea that they might be at risk. Somebody in the UK suffers a stroke every five minutes. That is 150,000 people a year and yet there is a poor understanding among the population as to how a stroke can be prevented; this is a major concern. I believe that it is essential that a campaign is launched to better inform the population on the single biggest factor in causing a stroke, which is high blood pressure. This could be done by introducing blood pressure tests in the workplace to uncover what the Stroke Association believes is a significant percentage of the population that suffers from undiagnosed high blood pressure. I embarked on a campaign, in conjunction with the Stroke Association, to test the blood pressure of a thousand people across Wales to raise awareness of the importance of maintaining a healthy level of blood pressure. From these tests, roughly 10 per cent of those who took part were shown to have high blood pressure, and a further 20 per cent had borderline high blood pressure. This shows that, of the relatively small, but not insignificant, number of cases that the campaign tested, nearly one in three people who were not aware of the dangers of high blood pressure were at risk. I believe that these tests could be replicated in workplaces across the country, as they are easy to do, are cost effective and accessible to people who may not have time to go to the doctor. There is no more effective way of highlighting the danger of high blood pressure than showing individuals the relevance to them of what we are saying.

Secondly, it is vital to have early recognition and diagnosis in place, as they will undoubtedly save lives. Dedicated stroke units would go a long way towards ensuring that that was the case.

Thirdly, I raise concerns about community care for patients who have been discharged from hospital, and recommendations 15 to 17

Yn ystod fy ymgyrch, daeth yn amlwg bod angen sylw ar sawl maes. Y maes cyntaf o blith y rheini yw canfyddiad y cyhoedd yn gyffredinol ynghylch y tebygolrwydd y gallent ddioddef strôc. Mae cleifion wedi sôn wrthyf am y ffaith nad oedd ganddynt syniad y gallent fod mewn perygl. Mae rhywun yn dioddef strôc bob pum munud yn y DU. Mae hynny'n 150,000 o bobl y flwyddyn, ond eto, mae dealltwriaeth pobl ynghylch sut y gellir atal strôc yn wael; mae hynny'n peri pryder mawr. Credaf ei bod yn hanfodol lansio ymgyrch i roi gwybodaeth well i'r boblogaeth am y ffactor unigol mwyaf sy'n achosi strôc, sef pwysedd gwaed uchel. Gellid gwneud hynny drwy gyflwyno profion pwysedd gwaed yn y gweithle i ddatgelu sefyllfa sy'n bodoli ym marn y Gymdeithas Strôc, sef bod canran sylweddol o'r boblogaeth yn dioddef o bwysedd gwaed uchel heb yn wybod iddynt. Dechreuais ymgyrch, ar y cyd â'r Gymdeithas Strôc, i brofi pwysedd gwaed mil o bobl ledled Cymru er mwyn codi ymwybyddiaeth o bwysigrwydd cadw pwysedd gwaed ar lefel iach. O'r profion hynny, gwelwyd bod gan oddeutu 10 y cant o'r rheini a gymerodd ran bwysedd gwaed uchel, ac yr oedd gan 20 y cant arall bwysedd gwaed a oedd yn ymylu ar fod yn uchel. Mae hynny'n dangos bod bron i un o bob tri o bobl, nad oeddent yn ymwybodol o beryglon pwysedd gwaed uchel, mewn perygl, o blith y nifer cymharol fach ond nid ansylweddol o bobl a gafodd brawf yn ystod yr ymgyrch. Credaf y gellid ailadrodd y profion hyn mewn gweithleoedd ledled y wlad, oherwydd maent yn rhwydd i'w cynnal, maent yn gost-effeithiol, ac maent yn hygyrch i bobl nad oes ganddynt amser efallai i fynd at y meddyg. Nid oes ffordd fwy effeithiol o dynnu sylw at berygl pwysedd gwaed uchel na dangos i unigolion bod yr hyn yr ydym yn ei ddweud yn berthnasol iddynt hwy.

Yn ail, mae'n hanfodol cael system ar gyfer adnabod a diagnosisio pwysedd gwaed uchel yn gynnar, oherwydd byddai'n bendant yn achub bywydau. Byddai unedau strôc pwrpasol yn gwneud llawer iawn i sicrhau bod hynny'n digwydd.

Yn drydydd, yr wyf am fynegi pryderon ynghylch gofal cymunedol i gleifion sydd wedi cael eu rhyddhau o'r ysbyty, ac mae

in the report focus on that. There is a need for comprehensive and uniform care for patients once they are at home and are left to continue their recovery. The report is clear that the emphasis is currently placed on the acute end of patient care, such as caring for those who have recently suffered a stroke and their immediate recovery. That those patients receive such attention is correct, but we cannot abandon patients who are simply unfortunate to live in an area that does not provide adequate, long-term community care. A postcode lottery is no cure for anyone.

Organisations such as the Stroke Association play an essential role in providing two core services: communication support, and family and carer support. During my research, I saw at first hand the huge benefit that these services bring, with many saying that their absence would lead them to feel depressed. Support for carers is an issue that we have recently discussed in the Chamber and is one that I am passionate about. Without carers taking responsibility for their relatives, a significant additional burden would be placed on the NHS. Their role is particularly important when it comes to looking after stroke patients, as strokes can occur so suddenly that patients can find it hard to adjust to their quality of life following a stroke. For that reason, a carer who looks after their physical and emotional wellbeing is irreplaceable.

Speech and language therapy is also an essential element of the rehabilitation of stroke patients. It is my understanding that, first, there are few speech and language therapists in Wales and, secondly, no priority is given to stroke patients on waiting lists. I have been told by therapists that speech and language training should take place as soon as possible for those who have suffered a stroke, as that maximises the chances of their communication skills returning. It therefore does not seem right to me that speech and language therapy is prioritised according to criteria limiting the number of therapists available to stroke patients. I had a somewhat limited conversation with a woman who was 40 years of age and who had two teenage

argymhellion 15 i 17 yn yr adroddiad yn canolbwyntio ar hynny. Mae angen gofal cynhwysfawr ac unffurf ar gyfer cleifion pan fyddant gartref a phan gânt eu gadael i barhau i wella. Mae'r adroddiad yn egluro bod y pwyslais ar hyn o bryd ar yr agwedd aciwt ar ofal i gleifion, megis gofalu am y bobl sydd wedi dioddef strôc yn ddiweddar, a'u hadferiad iechyd yn syth wedyn. Mae'n iawn bod y cleifion hynny'n cael sylw o'r fath, ond ni allwn anwybyddu cleifion sy'n anffodus, yn syml iawn, am eu bod yn byw mewn ardal nad yw'n darparu gofal cymunedol digonol a hirdymor. Nid yw loteri cod post yn galluogi neb i wella.

Mae sefydliadau megis y Gymdeithas Strôc yn chwarae rôl hanfodol o ran darparu dau wasanaeth craidd: cymorth o ran cyfathrebu, a chymorth i deuluoedd a gofaluwr. Yn ystod fy ymchwil, gwelais yn uniongyrchol y budd enfawr y mae'r gwasanaethau hyn yn ei gynnig, ac yr oedd llawer o bobl yn dweud y byddai bod hebddynt yn peri iddynt deimlo'n isel eu hysbryd. Mae cymorth i ofaluwr yn fater yr ydym wedi'i drafod yn ddiweddar yn y Siambr, ac yn fater yr wyf yn teimlo'n angerddol yn ei gylch. Heb ofaluwr sy'n cymryd cyfrifoldeb am eu perthnasau, byddai baich ychwanegol sylweddol ar y GIG. Mae eu rôl yn arbennig o bwysig o safbwynt gofalu am gleifion strôc, oherwydd gall strôc ddigwydd mor sydyn nes gall cleifion ei chael yn anodd addasu i ansawdd eu bywyd ar ôl iddynt gael strôc. Am y rheswm hwnnw, mae gofaluwr sy'n gofalu am eu lles corfforol ac emosiynol yn anhepgor.

Mae therapi lleferydd ac iaith yn elfen hanfodol o gymorth adsefydlu i gleifion strôc hefyd. Caf ar ddeall, yn gyntaf, mai ychydig o therapyddion lleferydd ac iaith sydd yng Nghymru ac, yn ail, na roddir blaenoriaeth i gleifion strôc sydd ar restrau aros. Mae therapyddion wedi dweud wrthyf y dylid rhoi hyfforddiant lleferydd ac iaith cyn gynted â phosibl i'r sawl sydd wedi dioddef strôc, am fod hynny'n cynyddu'r posibilrwydd y bydd eu sgiliau cyfathrebu'n dychwelyd. I mi, felly, nid ymddengys yn iawn bod therapi lleferydd ac iaith yn cael ei flaenoriaethu'n ôl meini prawf sy'n cyfyngu ar nifer y therapyddion sydd ar gael i gleifion strôc. Cefais sgwrs gyfyngedig braidd â dynes 40 mlwydd oed, a chanddi ddau o blant yn eu

children, and she told me that her support had been withdrawn.

In closing, I reiterate my thanks for the work of committee members, staff and all those involved in the work of producing this report. Stroke occurs suddenly and yet the recovery, if a patient recovers at all, is long and painful. I urge the Minister to look closely at the issue of long-term care particularly, because the people whom I met during my campaign and who had benefited from the care provided once they had been discharged from hospital cherished that. It is therefore simply unfair for the provision of such care to be dependent on where you live.

3.50 p.m.

**Peter Black:** I concur with Joyce Watson's final words about the provision of services for victims of stroke around Wales, which is patchy, to say the least. One issue that came up in the committee's report was that the level of treatment and service that you could expect after having a stroke, both immediately and the aftercare, differed according to where you lived in Wales. That is unacceptable, and I note from the Minister's acceptance of the vast majority of the committee's recommendations—she has accepted all our recommendations, but not all in full—that she also finds that unacceptable. I hope that we will be able to take forward some changes as a result of this review, although I acknowledge that some are already in train, to improve that situation, so that, when patients do have a stroke, they are able to go to a dedicated stroke unit, no matter how that is defined—and there will be differences in how a stroke unit is defined and what it should look like—where they will receive any necessary treatment immediately to alleviate the symptoms of stroke at units that are open seven days a week, 24 hours a day. Following such treatment, they should then be able to get appropriate rehabilitation to allow them to live as regular a life as possible.

The issue that Joyce alluded to concerning therapy is crucial in this regard. Joyce

harddegau, a dywedodd wrthyf fod y cymorth a gâi wedi'i dynnu'n ôl.

Wrth gloi, hoffwn ailadrodd fy niolch am waith aelodau'r pwyllgor, y staff a phawb a fu'n ymwneud â chynhyrchu'r adroddiad hwn. Bydd strôc yn digwydd yn sydyn, ond mae'r broses o wella, os bydd y claf yn gwella o gwbl, yn hir ac yn boenus. Yr wyf yn annog y Gweinidog i edrych yn fanwl ar ofal hirdymor yn arbennig, oherwydd yr oedd y bobl y cyfarfûm â hwy yn ystod fy ymgyrch, a oedd wedi cael budd o'r gofal a ddarparwyd ar ôl iddynt gael eu rhyddhau o'r ysbyty, yn gwerthfawrogi'r gofal hwnnw'n fawr. Felly, mae'n annheg iawn bod y ddarpariaeth o ran gofal o'r fath yn dibynnu ar ble'r ydych yn byw.

**Peter Black:** Yr wyf yn cytuno â geiriau olaf Joyce Watson ynghylch y ddarpariaeth o ran gwasanaethau ar gyfer dioddefwyr strôc ledled Cymru, sy'n anghyson, a dweud y lleiaf. Un mater a gododd yn adroddiad y pwyllgor oedd y ffaith bod lefel y driniaeth a'r gwasanaeth y gallech ddisgwyl ei chael ar ôl dioddef strôc, yn syth ac ar ffurf ôl-ofal, yn wahanol, yn dibynnu ar ble'r oeddech yn byw yng Nghymru. Mae hynny'n annerbyniol, a gwelaf o'r ffaith i'r Gweinidog dderbyn mwyafrif helaeth argymhellion y pwyllgor—mae wedi derbyn ein hargymhellion i gyd, ond nid yw wedi eu derbyn i gyd yn llawn—ei bod hithau'n credu bod hynny'n annerbyniol. Gobeithiaf y byddwn yn gallu cyflwyno rhai newidiadau o ganlyniad i'r adolygiad hwn, er fy mod yn cydnabod bod rhai ohonynt eisoes ar y gweill, i wella'r sefyllfa honno, fel y gall cleifion fynd i uned strôc bwrpasol pan fyddant yn cael strôc, waeth sut y caiff yr uned ei diffinio—a bydd gwahaniaethau yn y modd y caiff uned strôc ei diffinio a sut olwg ddylai fod arni—lle byddant yn cael unrhyw driniaeth angenrheidiol yn syth i leddfu symptomau strôc, mewn unedau sydd ar agor saith niwrnod yr wythnos, 24 awr y dydd. Yn dilyn triniaeth o'r fath, dylai fod modd iddynt gael cymorth adsefydlu priodol i'w galluogi i fyw bywyd mor arferol â phosibl.

Mae'r mater y cyfeiriodd Joyce ato, sy'n ymwneud â therapi, yn hollbwysig yn hynny

referred to the provision of speech and language therapy, which is lacking. As speech and language therapists and the royal college said in a briefing paper that they sent to Members, a third of the 11,000 people every year who have a stroke in Wales are left with a communication disability—aphasia. Between 30 and 43 per cent of those affected will remain severely affected in the long term. We need to get the workforce planning in place to ensure that we have an adequate number of speech and language therapists, and we must ensure that the funding is in place for them to deliver the treatment. This needs to be done to ensure that people who have suffered a stroke are able to recover their speech and language faculties to the best of their ability, and are not left behind because of some failing in the service.

Turning to general therapy and occupational therapy in particular, the College of Occupational Therapists has drawn our attention to the fact that almost no funding is available for specialist higher education courses on stroke. Many therapists find that they are not allowed to study these courses unless they are prepared to pay for them themselves. To overcome the situation, therapists have developed an all-Wales occupational therapy clinical network to support best practice in stroke services, but they receive no investment or formal support for the network, although it provides in-service training and shared learning and support for those who are not able to secure the time or funding needed to undertake the necessary specialist training. These professionals are trying to put things right themselves. It seems to me that if we are to have a comprehensive service for stroke victims, we need to ensure that the funding is in place.

The committee Chair's point about a stroke register was well made. Some of the most compelling evidence that the committee received demonstrated the importance of having information about how many people suffer strokes and where, as well as the importance of monitoring that information. I noted in the Minister's response to the report,

o beth. Cyfeiriodd Joyce at y ddarpariaeth o ran therapi lleferydd ac iaith, sy'n ddiffygiol. Fel y dywedodd therapyddion lleferydd ac iaith a'r coleg brenhinol, mewn papur briffio a anfonasant at yr Aelodau, mae traean yr 11,000 o bobl y flwyddyn sy'n cael strôc yng Nghymru yn cael eu gadael gydag anabledd cyfathrebu—affasia. Bydd yr anabledd yn parhau i effeithio'n ddifrifol yn y tymor hir ar 30 i 43 y cant o'r bobl yr effeithir arnynt. Mae angen inni gynllunio'r gweithlu mewn modd sy'n sicrhau bod gennym nifer digonol o therapyddion lleferydd ac iaith, a rhaid inni sicrhau bod y cyllid ar gael iddynt ddarparu'r driniaeth. Mae angen gwneud hynny i sicrhau bod pobl sydd wedi dioddef strôc yn gallu adennill eu sgiliau lleferydd ac iaith hyd eithaf eu gallu, a sicrhau na chânt eu gadael ar ôl oherwydd rhyw fethiant yn y gwasanaeth.

Gan droi at therapi cyffredinol, a therapi galwedigaethol yn arbennig, mae Coleg y Therapyddion Galwedigaethol wedi tynnu ein sylw at y ffaith nad oes bron dim cyllid ar gael ar gyfer cyrsiau addysg uwch arbenigol ym maes strôc. Mae llawer o therapyddion yn gweld nad ydynt yn cael astudio'r cyrsiau hyn oni bai eu bod yn barod i dalu amdanynt eu hunain. Er mwyn goresgyn y broblem, mae therapyddion wedi datblygu rhwydwaith clinigol i Gymru gyfan ar gyfer therapi galwedigaethol er mwyn hybu arfer gorau mewn gwasanaethau strôc, ond nid ydynt yn cael dim buddsoddiad na chymorth ffurfiol ar gyfer y rhwydwaith, er ei fod yn darparu hyfforddiant mewn swydd, cefnogaeth, a chyfleoedd dysgu a rennir i'r unigolion nad ydynt yn gallu cael gafael ar yr amser na'r cyllid y mae eu hangen i ymgymryd â'r hyfforddiant arbenigol angenrheidiol. Mae'r gweithwyr proffesiynol hyn yn ceisio unioni'r sefyllfa eu hunain. Ymddengys i mi fod angen inni sicrhau bod y cyllid ar gael os ydym am gael gwasanaeth cynhwysfawr i ddioddefwyr strôc.

Cafodd y pwynt a wnaed gan Gadeirydd y pwyllgor ynghylch cofrestr strôc ei wneud yn dda. Yr oedd rhywfaint o'r dystiolaeth fwyaf grymus a gafodd y pwyllgor yn dangos pwysigrwydd cael gwybodaeth am faint o bobl sy'n dioddef strôc ac ymhle, yn ogystal â phwysigrwydd monitro'r wybodaeth honno. Yn yr un modd â'r Cadeirydd, sylwais yn

as did the Chair, the reference to allowing that to grow almost organically, but I wonder whether that will be adequate, given the differences in IT provision across Wales, and the fact that we have been relying on such organic growth for some time in the hope that provision would improve, but we have not actually achieved the results that this review shows we need. Perhaps we need a bit more central direction in this regard, too.

The committee has produced a comprehensive report with some important recommendations. I welcome the fact that the Minister has accepted all the recommendations, although some only in part. The key issue for us now is to ensure that acceptance is turned into action, and that a proper action plan is put in place as soon as possible, so that the committee can monitor how the recommendations are being put into effect and can ensure that they are being delivered.

**David Lloyd:** Yr wyf yn falch o allu cyfrannu at y ddatl bwysig hon ar adroddiad y Pwyllgor Iechyd, Lles a Llywodraeth Leol ar wasanaethau strôc. Galw gan y cyhoedd a chan y sawl sy'n gweithio yn y gwasanaeth a ddaeth â'r adolygiad hwn i fodolaeth yn y lle cyntaf, gan fod pobl yn pryderu am ansawdd y gwaith a oedd yn mynd rhagddo ledled Cymru. Er fy mod yn aelod o'r pwyllgor, rhaid dweud bod hwn yn adroddiad arbennig—yn wir, mae'n fendigedig, gydag ystod eang o argymhellion yr ydym yn mawr obeithio y cânt eu gweithredu. Cawsom ystod eang o dystiolaeth fendigedig gan y sawl sydd wedi dioddef strôc, gan wahanol fudiadau, a hefyd gan ffisiotherapyddion, therapyddion galwedigaethol, nyrsys yn y maes, a meddygon.

Hoffwn sôn yn yr ychydig amser sydd gennyf am faich anferthol y clefyd echrydus hwn. Dylem godi ymwybyddiaeth o effeithiau strôc a'r anabled a achosir: yr anallu i siarad, yr anallu i lyncu, yn aml, a'r anallu i weld, weithiau, hyd yn oed. Rhaid rhoi'r pwyslais ar atal strôc yn y lle cyntaf. Fel y clywsom gan Joyce Watson, un o'r prif ddulliau o wneud hynny yw mesur pwysau

ymateb y Gweinidog i'r adroddiad iddi sôn am ganiatáu i hynny ddatblygu bron yn organig, ond tybed a fydd hynny'n ddigon, o ystyried y gwahaniaethau mewn darpariaeth o ran TG ledled Cymru, a'r ffaith inni ddibynnu ar ddatblygiad organig o'r fath ers cryn amser, yn y gobaith y byddai'r ddarpariaeth yn gwella, ond mewn gwirionedd nid ydym wedi sicrhau'r canlyniadau y mae'r adolygiad hwn yn dangos bod arnom eu hangen. Efallai fod angen ychydig mwy o gyfarwyddyd canolog arnom yn hynny o beth hefyd.

Mae'r pwyllgor wedi cynhyrchu adroddiad cynhwysfawr gydag argymhellion pwysig. Yr wyf yn croesawu'r ffaith i'r Gweinidog dderbyn yr argymhellion i gyd, er mai dim ond yn rhannol y derbyniodd rai ohonynt. Y mater allweddol inni'n awr yw sicrhau bod y broses o'u derbyn yn troi'n gamau gweithredu, a bod cynllun gweithredu priodol yn cael ei roi ar waith cyn gynted â phosibl, er mwyn i'r pwyllgor allu monitro sut y mae'r argymhellion yn cael eu gweithredu, a sicrhau eu bod yn cael eu gwireddu.

**David Lloyd:** I am pleased to be able to contribute to this important debate on the Health, Wellbeing and Local Government Committee's report on stroke services. It was a call from the public and from those who work in the service that led to the existence of this report in the first place, as people had concerns about the quality of the work being undertaken throughout Wales. Although I am a member of the committee, I must say that this is an excellent report—indeed, it is wonderful, with a wide range of recommendations that we greatly hope will be implemented. We also received a wide range of excellent evidence from stroke sufferers, from various organisations, and from physiotherapists, occupational therapists, nurses in the field, and doctors.

In the little time that I have available, I want to talk about the enormous burden of this terrible disease. We should raise awareness of the effects of stroke and the disability that it causes: the inability to talk, the inability to swallow, often, and sometimes even the inability to see. We should place the emphasis on stroke prevention in the first place. As we heard from Joyce Watson, one

gwaed pobl a thrin pwysau gwaed uchel i sicrhau nad yw'n achosi strôc. Yn ogystal â hynny, dylid annog ysmygwyr i roi'r gorau i ysmegu, annog pobl sy'n ordeu i golli pwysau, dylid ymarfer corff os ydych yn dueddol o fod yn ddiog, a dylech leihau'r halen yn eich deiet os ydych yn dueddol o fwyta llawer o halen. Rhaid cael rhyw fath o system goleuadau traffig ar y bwydydd yr ydym yn eu prynu yn yr archfarchnadoedd a siopau eraill—golau coch, melyn a gwyrdd, fel y cynllun sydd newydd gael ei gwrthod yn Senedd Ewrop—er mwyn inni wybod beth sy'n iach inni ei brynu a'i fwyta. Dyna sut i geisio atal y clefyd echrydus hwn, a symudaf yn awr at sut i'w drin.

Pan fydd rhywun yn cael strôc, rhaid cael triniaeth barod, effeithiol, amserol a chyflym. Rhaid cynnig thrombolysis a sganiau ar frys, a rhaid cael y strwythurau yn eu lle os ydym i gymryd y clefyd hwn o ddifrif. Ers llawer dydd, yr oeddem yn derbyn pobl a oedd wedi dioddef strôc i mewn i'n hysbytai ac yn eu cadw mewn gwely, gan obeithio y byddai'r claf yn gwella. Mae pethau wedi newid yn fendigedig ers hynny, ond nid ym mhob man, fel y clywsom yn y dystiolaeth. Mae angen unedau strôc arbenigol a mwy o dimoedd amlddisgyblaethol, gan gynnwys ffisiotherapyddion, meddygon, nyrsys, therapyddion galwedigaethol a therapyddion iaith a lleferydd i gydweithio yn amserol i drin y claf o'r foment y mae'n cael y strôc.

Daw hynny â ni at y drydedd elfen, sef cael pobl allan o'r ysbyty cyn gynted â phosibl, a'r elfen o adfer gweithredol hirdymor fel nad ydym yn anghofio am bobl sydd wedi cael strôc unwaith y maent wedi gadael yr ysbyty. Yn hytrach, dylem eu trin i sicrhau eu bod yn gwella i'r graddau gorau posibl. Mae hynny eto yn golygu cael timoedd strôc amlddisgyblaethol yn y gymuned i sicrhau adferiad hirdymor, fel nad ydym yn anghofio am gleifion fel hyn ac yn parhau i'w trin yn y gymuned. Mae hynny'n golygu defnyddio unedau gadael yr ysbyty yn gynnar. Yr oedd un yn bodoli yn Abertawe. Mae'r rhain yn fendigedig i alluogi gwelliant sicr a chynnar o'r fath anabled.

Mae rôl allweddol, felly, i nifer o weithwyr proffesiynol, yn enwedig ffisiotherapyddion a

of the main ways of doing that is to monitor people's blood pressure and treat high blood pressure to ensure that it does not cause stroke. In addition, smokers should be encouraged to quit, obese people should be encouraged to lose weight, you should exercise if you have a tendency to be lazy, and you should reduce the amount of salt in your diet if you tend to eat a lot of it. We need a kind of traffic-lights system for the foods that we buy from supermarkets and other shops—red, amber and green lights, like the scheme that has just been rejected by the European Parliament—so that we know what is healthy to buy and eat. That is how to try to prevent this terrible disease, and I will now move on to how to treat it.

When someone does suffer a stroke, we must have prompt, effective, timely and rapid treatment. We must offer thrombolysis and urgent scans, and we must have the structures in place if we are to take this illness seriously. Years ago, we would admit stroke sufferers to our hospitals and keep them in a bed, in the hope that their condition would improve. Things have changed wonderfully since then, but not everywhere, as we heard in evidence. We require specialist stroke units and more multidisciplinary teams, including physiotherapists, doctors, nurses, occupational therapists and speech and language therapists, working together in a timely manner to treat patients from the moment they have a stroke.

That brings us to the third element, which is discharging people from hospital as soon as possible, and active rehabilitation for the long term, so that we do not forget about people who have had a stroke as soon as they have left hospital. Rather, we should treat them to ensure that they improve to the greatest degree possible. That will also require multidisciplinary stroke teams in the community to ensure long-term rehabilitation, so that we do not forget about patients and continue to treat them in the community. That means using early discharge units. There used to be one in Swansea. They are wonderful at enabling a clear and rapid recovery from such disability.

There is a vital role, therefore, for many professionals, particularly physiotherapists



therapyddion galwedigaethol ond hefyd y therapyddion iaith a lleferydd, fel y clywsom gan Joyce. Mae ganddynt rôl allweddol i wella pobl, a dyna'r agwedd i'w chymryd—mae'n bosibl cael gwellhad llwyr weithiau, ond yn bendant mae'n bosibl cael pobl i wella yn fwy nag y mae cleifion ar hyn o bryd. Pan fydd rhywun yn dioddef strôc, mae'r baich nid yn unig ar yr unigolion hynny a'u teuluoedd, ond hefyd ar y gwasanaeth iechyd a'r gymdeithas leol. Mae'r effaith yn wirioneddol echrydus yn bersonol ac yn ariannol.

Fel rhan o'r adroddiad, mae gofyn am fuddsoddiad, yn naturiol. Pan soniwn am roi rhagor o hyfforddiant i wahanol therapyddion, mae hynny'n golygu arian. Pan soniwn am sefydlu unedau strôc, mae hynny'n gallu golygu arian yn y pen draw. Gyda'r cefndir ariannol dyrys a du sydd ohoni, bydd hynny'n her. Fodd bynnag, mae argymhellion bendigedig yn yr adroddiad bendigedig sydd ger ein bron, ac er y cymylau ariannol duon sydd o'n cwmpas, gobeithiaf y bydd y Gweinidog yn gallu gweithredu ar yr argymhellion hyn.

4.00 p.m.

**Andrew R.T. Davies:** I, too, welcome this report, and it was a great pleasure to suggest this issue to the Health, Wellbeing and Local Government Committee as a subject for an inquiry, which then took it up. Given the considerable evidence that we have seen, both at events here in the Senedd, and through our post bags as constituency and regional Assembly Members, one of the most powerful events that I have attended was the speech and language therapy event in Tŷ Hywel, where Owen Money gave a presentation explaining how he recovered his speech by reading a newspaper day after day—because he could not access speech and language therapy services. He therefore taught himself, and we have all heard the benefits of that with his show on Radio Wales.

We need to ensure that the actions to which the Minister has agreed—all the recommendations bar recommendation 5—are enacted on the ground. This report will carry little weight if it is not enacted on the

and occupational therapists but also speech and language therapists, as we heard from Joyce. They have a vital role in aiding people's recovery, and that is the attitude to take—it is sometimes possible to achieve a complete recovery, but it is definitely possible to get people to recover to a greater degree than is the case currently. When someone suffers a stroke, the burden is placed not only on the individuals and their families, but on the health service and the local community. The effect is truly terrible, both personally and financially.

As part of the report, investment is requested, naturally. When we talk about providing more training for various therapists, that requires funding. When we talk about establishing stroke units, that can mean money, at the end of the day. Given the complex and bleak financial background that we have, that will be challenging. However, there are wonderful recommendations in the wonderful report that is before us, and despite the black economic clouds surrounding us, I hope that the Minister can implement these recommendations.

**Andrew R.T. Davies:** Yr wyf innau'n croesawu'r adroddiad hwn. Yr oedd yn bleser mawr awgrymu'r mater hwn wrth y Pwyllgor Iechyd, Lles a Llywodraeth Leol fel pwnc ar gyfer ymchwiliad, a derbyniodd y pwyllgor yr awgrym. O ystyried y dystiolaeth sylweddol yr ydym wedi'i gweld, mewn digwyddiadau yma yn y Senedd, ac yn y post a gawn fel Aelodau etholaethol a rhanbarthol o'r Cynulliad, un o'r digwyddiadau mwyaf pwerus a fynychais i oedd y digwyddiad therapi lleferydd ac iaith yn Nhŷ Hywel, lle rhoddodd Owen Money gyflwyniad i esbonio sut yr adenillodd ei leferydd drwy ddarllen papur newydd ddydd ar ôl dydd—am na allai gael mynediad i wasanaethau therapi lleferydd ac iaith. Fe'i dysgodd ei hun, felly, ac yr ydym i gyd wedi clywed manteision hynny drwy ei raglen ar Radio Wales.

Mae angen inni sicrhau bod y camau gweithredu y mae'r Gweinidog wedi cytuno â hwy—yr argymhellion i gyd ar wahân i argymhelliad 5—yn cael eu cyflawni ar lawr gwlad. Ychydig ddylanwad a gaiff yr

ground. I welcome the opportunity for the Minister to report back in some 12 months' time—although we may have a different Minister then, because 12 months will take us beyond the Assembly elections—on the actions that the health department and the LHB have taken in enacting these key recommendations. The previous Minister identified in 2006 that stroke services were a priority for the then-Government, but this inquiry has highlighted many deficiencies that are unacceptable for the people of Wales. We therefore hope that the acceptance of many of the recommendations will provide a solution to the problems that LHBs, stroke survivors and organisations that work with stroke survivors find in communities across Wales.

I endorse the comments made by Dr Dai Lloyd in his three-part analogy. Surely, the first part must be the public health message, ensuring that people are aware of their responsibilities in trying to lessen the risk of stroke, and the actions that can help in that regard. Many lifestyle choices can be made that will ultimately lessen the individual's risk of stroke, and the complications that that presents. Given that 11,000 people a year in Wales suffer a stroke, it is incumbent on LHBs and the Government to ensure that resources and service provision are in place, so that stroke sufferers are treated in as timely a manner as possible. All the evidence indicates that the rehabilitation and recovery process is far quicker if timely treatment is available—for example, with a quick and correct diagnosis, a stroke centre can administer thrombolysis, for example, to stabilise the patient. That came over crystal clear in the evidence that we took.

As one of the recommendations in the report suggests, the ambulance service has a crucial role in this. We must develop the right skill sets for ambulance service staff and those at the receiving hospital. They should be able to discuss the options so that the patient can be directed to the correct reception centre—that is, the stroke unit—thereby improving the

adroddiad hwn os na chaiff ei weithredu ar lawr gwlad. Yr wyf yn croesawu'r cyfle i'r Gweinidog adrodd yn ôl ymhen tua 12 mis—er y gallai fod gennym Weiniidog gwahanol bryd hynny, oherwydd bydd 12 mis yn mynd â ni y tu hwnt i etholiadau'r Cynulliad—ynghylch y camau y mae'r adran iechyd a'r byrddau iechyd lleol wedi eu cymryd o safbwynt gweithredu'r argymhellion allweddol hyn. Nododd y Gweinidog blaenorol yn 2006 fod gwasanaethau strôc yn flaenoriaeth i'r Llywodraeth ar y pryd, ond mae'r ymchwiliad hwn wedi tynnu sylw at lawer o ddiffygion sy'n annerbyniol i bobl Cymru. Yr ydym yn gobeithio, felly, y bydd y ffaith bod llawer o'r argymhellion wedi eu derbyn yn cynnig ateb i'r problemau y mae byrddau iechyd lleol, pobl sydd wedi goroesi strôc, a sefydliadau sy'n gweithio gyda'r sawl sydd wedi goroesi strôc yn eu gweld mewn cymunedau ledled Cymru.

Yr wyf yn cefnogi'r sylwadau a wnaed gan Dr Dai Lloyd yn ei ddadansoddiad tair rhan. Rhaid mai'r rhan gyntaf yw'r neges ynghylch iechyd y cyhoedd, er mwyn sicrhau bod pobl yn ymwybodol o'u cyfrifoldebau, o ran ceisio lleihau'r perygl o ddiodef strôc, a'r camau gweithredu a all helpu yn hynny o beth. Gellir gwneud llawer o ddewisiadau ynghylch ffordd o fyw, a fydd yn y pen draw yn lleihau perygl unigolyn o gael strôc, a'r cymhlethdodau y mae cael strôc yn eu creu. O ystyried bod 11,000 o bobl y flwyddyn yng Nghymru yn dioddef strôc, mae'n ddyletswydd ar fyrddau iechyd lleol a'r Llywodraeth i sicrhau bod adnoddau a darpariaeth o ran gwasanaethau ar gael, fel y gall dioddefwyr strôc gael eu trin mor brydlon â phosibl. Mae'r dystiolaeth i gyd yn dangos bod y broses adsefydlu a gwella'n gyflymach o lawer os oes triniaeth brydlon ar gael—er enghraifft, gyda diagnosis cyflym a chywir, gall canolfan strôc roi thrombolysis i sefydlogi'r claf. Yr oedd hynny'n hollol amlwg yn y dystiolaeth a gawsom.

Fel y mae un o'r argymhellion yn yr adroddiad yn awgrymu, mae gan y gwasanaeth ambiwlans rôl hollbwysig i'w chwarae. Rhaid inni ddatblygu'r setiau sgiliau cywir ar gyfer staff y gwasanaeth ambiwlans a'r bobl sydd yn yr ysbyty sy'n derbyn y claf. Dylai fod modd iddynt drafod yr opsiynau fel y gellir cyfeirio'r claf i'r

outcomes for that patient. When Dr Dai Lloyd and I visited Cardiff Royal Infirmary we saw a multidisciplinary team in action, and that kind of working is also crucial. Although it was a great privilege to see the array of talent and expertise there, the professionals stressed that it was far from a true picture of provision across Wales. In particular, the point was made that the role of psychologists, along with consultants and other professionals, was crucial in informing decision-making. However, the team at Cardiff Royal Infirmary was, at that time, the only one in Wales with a psychologist in place. It is, therefore, vital that multidisciplinary teams are put in place to advise when stroke survivors enter hospital, needing rehabilitation.

I would be grateful if the Minister could explain how she, along with the LHBs, will be able to maintain posts like those of the speech and language therapists, which have been mentioned throughout this debate, given that the annual operating framework document seeks to reduce posts at band 5 and above by 3 per cent per annum for the next five years. The bulk of these posts sit in band 5, and LHBs have been instructed by the centre to take these posts out of the system. How will the Minister, with her workforce modelling, be able to meet the recommendations in the report?

It is crystal clear that a community-based service is important for rehabilitation. We took evidence about the integrated nature of the service in Northern Ireland, and how, once the clinicians and medical staff had done their role within the health service, there was a seamless transition back into the community for assessment. Resources were, obviously, put in place there, but I fully accept the argument that, because of historical issues, Northern Ireland gets a far more generous allocation of funding that allows the use of greater resources. However, there is also, without a shadow of a doubt, an

ganolfan dderbyn gywir—hynny yw, yr uned strôc—a thrwy hynny, wella'r canlyniadau i'r claf dan sylw. Pan ymwelodd Dr Dai Lloyd a minnau ag Ysbyty Brenhinol Caerdydd, gwelsom dîm amlddisgyblaethol wrth ei waith, ac mae'r math hwnnw o weithio'n hollbwysig hefyd. Yr oedd yn fraint fawr gweld yr holl ddoniau a'r holl arbenigedd a oedd yno, ond pwysleisiodd y gweithwyr proffesiynol fod y sefyllfa yn y fan honno ymhell o fod yn ddarlun cywir o'r ddarpariaeth ledled Cymru. Yn benodol, gwnaed y pwynt bod rôl seicolegwyr, ynghyd â meddygon ymgynghorol a gweithwyr proffesiynol eraill, yn hollbwysig o ran llywio'r broses o wneud penderfyniadau. Fodd bynnag, ar y pryd, y tîm yn Ysbyty Brenhinol Caerdydd oedd yr unig dîm yng Nghymru a oedd â seicolegydd. Felly, mae'n hanfodol bod timoedd amlddisgyblaethol yn cael eu rhoi ar waith i gynghori pan fydd y sawl sy'n goroesi strôc yn cyrraedd yr ysbyty, a phan fydd angen cymorth adsefydlu arnynt.

Byddwn yn ddiolchgar pe bai'r Gweinidog yn gallu egluro sut y bydd hi, ynghyd â'r byrddau iechyd lleol, yn gallu cynnal swyddi megis swyddi'r therapyddion lleferydd ac iaith, y soniwyd amdanynt gydol y ddadl hon, o ystyried bod dogfen y fframwaith gweithredu blynyddol yn ceisio lleihau swyddi band 5 ac uwch 3 y cant y flwyddyn dros y pum mlynedd nesaf. Mae trwch y swyddi hyn ym mand 5, ac mae'r ganolfan wedi dweud wrth y byrddau iechyd lleol am dynnu'r swyddi hynny allan o'r system. Sut y bydd y Gweinidog, gyda'i chynllun ar gyfer modelu'r gweithlu, yn gallu bodloni'r argymhellion yn yr adroddiad?

Mae'n hollol amlwg bod gwasanaeth yn y gymuned yn bwysig ar gyfer cymorth adsefydlu. Cawsom dystiolaeth ynghylch natur integredig y gwasanaeth yng Ngogledd Iwerddon, a'r broses bontio ddi-dor yn ôl i'r gymuned ar gyfer asesiad, ar ôl i'r clinigwyr a'r staff meddygol gyflawni eu rôl yn y gwasanaeth iechyd. Mae'n amlwg bod adnoddau wedi eu darparu yno, ond yr wyf yn derbyn yn llwyr y ddadl bod Gogledd Iwerddon yn cael dyraniad mwy hael o lawer o ran cyllid, oherwydd materion hanesyddol, sy'n golygu bod modd defnyddio mwy o adnoddau. Fodd bynnag, heb rithyn o

easier transition there, because the social worker is embedded in the hospital to work with hospital clinicians to facilitate transfers back into the community and speedy rehabilitation.

I welcome the committee's report and the Minister's positive nature in addressing the recommendations, albeit with recommendation 5 failing to be accepted. Comparing across the United Kingdom is a common occurrence, and the Nuffield report touched on it, so we should, perhaps, be working on that. This report is a blueprint for taking forward stroke services in Wales, including 25 key recommendations, and I hope that LHBs and the Government will engage with it. I look forward to hearing the Minister's response to this debate this afternoon.

**Val Lloyd:** I agree with much that has already been said, so I will be mindful of that in my speech.

The committee Chair and previous speakers referred to the prevalence of strokes. Not only do they account for 11 per cent of deaths in England and Wales, but, as Joyce illustrated, have a profound effect on the lives of individual survivors. As such, it is important that the focus is on preventing strokes, providing the right diagnosis in a timely manner, and appropriate treatment, as we have heard many speakers allude to.

I will limit myself to a small number of recommendations, given the previous comments that have been made by other Members. Evidence shows that lifestyle factors, such as high blood pressure, diabetes, weight, alcohol and tobacco consumption, increase the risk of having a stroke. It is salutary to think how many of us may be in some of those categories. Some of these factors tend to be more prevalent in Wales than the rest of the UK, and are linked to areas of higher deprivation. Therefore, prevention should take centre stage, and should focus on health education and raising awareness of the link between those lifestyle factors, particularly high blood pressure and its relativity to the risk of stroke.

amheuaeth, ceir proses bontio haws yno, oherwydd mae'r gweithiwr cymdeithasol yn yr ysbyty i weithio gyda chlinigwyr i hwyluso'r broses o drosglwyddo cleifion yn ôl i'r gymuned a sicrhau cymorth adsefydlu cyflym iddynt.

Yr wyf yn croesawu adroddiad y pwyllgor ac agwedd gadarnhaol y Gweinidog wrth fynd i'r afael â'r argymhellion, er na dderbyniwyd argymhelliad 5. Mae cymharu ledled y Deyrnas Unedig yn ddigwyddiad cyffredin, a soniodd adroddiad Nuffield amdano, felly efallai y dylem fod yn gweithio ar hynny. Mae'r adroddiad hwn yn lasbrint ar gyfer symud gwasanaethau strôc, gan gynnwys 25 o argymhellion allweddol, yn eu blaen yng Nghymru, a gobeithiaf y bydd byrddau iechyd lleol a'r Llywodraeth yn ymgysylltu ag ef. Edrychaf ymlaen at glywed ymateb y Gweinidog i'r ddadl hon y prynhawn yma.

**Val Lloyd:** Yr wyf yn cytuno â llawer sydd wedi cael ei ddweud eisoes, felly cadwaf hynny mewn cof wrth draddodi fy araith.

Cyfeiriodd Cadeirydd y pwyllgor a siaradwyr blaenorol at gyffredinolrwydd achosion o strôc. Yn ogystal â bod yn gyfrifol am 11 y cant o farwolaethau yng Nghymru a Lloegr, maent hefyd, fel yr eglurodd Joyce, yn cael effaith aruthrol ar fywydau'r unigolion sy'n goroesi strôc. Felly, mae'n bwysig canolbwyntio ar atal strôc, rhoi'r diagnosis cywir yn brydlon, a darparu triniaeth briodol, fel yr ydym wedi clywed llawer o siaradwyr yn sôn.

Hoffwn grybwyll nifer fach o argymhellion yn unig, o ystyried y sylwadau blaenorol a wnaed gan Aelodau eraill. Mae tystiolaeth yn dangos bod ffactorau sy'n ymwneud â ffordd o fyw, megis pwysedd gwaed uchel, diabetes, pwysau, alcohol a thybaco, yn cynyddu'r perygl o gael strôc. Byddai'n fuddiol meddwl faint ohonom ni a allai fod yn perthyn i rai o'r categorïau hynny. Mae rhai o'r ffactorau hyn yn tueddu i fod yn fwy cyffredin yng Nghymru nag yng ngweddill y DU, ac maent yn gysylltiedig ag ardaloedd o amddifadedd uwch. Felly, dylai atal strôc fod yn flaenoriaeth, a dylai'r gwaith hwnnw ganolbwyntio ar addysg am iechyd a chodi ymwybyddiaeth o'r cysylltiad rhwng y ffactorau hynny sy'n ymwneud â ffordd o

Recommendation 11 of our report asks for any campaign to be incorporated into strategic documents, and I look forward to seeing this develop.

Ensuring a timely, accurate diagnosis of strokes has a huge impact on the chances of an individual making a full recovery. That is because thrombolysis administered swiftly to patients who have suffered a stroke can lessen considerably the effects of physical and emotional damage. However, before this treatment can be administered, patients need to be appropriately scanned and tested. I therefore welcome the news that we are to have a new, dedicated CT scanner located in the Morrision Hospital accident and emergency department. That will allow patients from a wide area in south-west Wales to be assessed quickly in order to receive the fast, appropriate treatment that they deserve.

That links in to recommendation 6, which states that any stroke strategy should include the aspiration that all patients should have access to a dedicated stroke unit. The evidence that we took pointed out that caring for stroke patients on a general ward was not the optimum choice, as it did not have the correct equipment or facilities to deliver the much-needed specific treatment. I thank the Minister for her agreement to action on that point. While evidence given to us did not seem to indicate that a stroke unit was necessary in every hospital, such units should be strategically distributed throughout Wales, and thus within easy reach of the population. I particularly want to emphasise the need for designated specialist teams across all disciplines, as we have heard, attached to stroke beds. Having staff with specific expertise caring for patients in a dedicated environment ensures the best quality of care and maximises the chances of recovery, which is beneficial to the individual, their family and society as a whole.

Moving on to the recovery phase, the committee identified that priority for stroke services are currently focused on the acute and secondary stage of the patient pathway.

fyw, yn enwedig pwysedd gwaed uchel a'i berthnasedd i'r perygl o ddirodded strôc. Mae argymhelliad 11 yn ein hadroddiad yn gofyn i unrhyw ymgyrch gael ei hymgorffori mewn dogfennau strategol, ac edrychaf ymlaen at weld hynny'n datblygu.

Mae sicrhau diagnosis prydlon a chywir o strôc yn effeithio'n aruthrol ar obeithion unigolyn o wella'n llwyr. Y rheswm am hynny yw y gall thrombolysis, a roddir yn fuan i gleifion sydd wedi dirodded strôc, leihau'n sylweddol yr effeithiau sy'n deillio o niwed corfforol ac emosiynol. Fodd bynnag, cyn y gellir rhoi'r driniaeth honno, bydd angen i gleifion gael sganiau a phroffion priodol. Felly, yr wyf yn croesawu'r newyddion y byddwn yn cael sganiwr CT newydd pwrpasol yn adran damweiniau ac achosion brys Ysbyty Treforys. Bydd hynny'n caniatáu i gleifion o ardal eang yn y de-orllewin gael eu hasesu'n gyflym er mwyn cael y driniaeth gyflym a phriodol y maent yn ei haeddu.

Mae hynny'n cysylltu ag argymhelliad 6, sy'n nodi y dylai unrhyw strategaeth strôc gynnwys y dyhead y dylai pob claf gael mynediad i uned strôc bwrpasol. Yr oedd y dystiolaeth a gawsom yn nodi nad gofalu am gleifion strôc ar ward gyffredinol oedd y dewis gorau, am nad oedd yr offer na'r cyfleusterau cywir yno i ddarparu'r driniaeth benodol y mae ei hangen yn fawr. Diolchaf i'r Gweinidog am gytuno i weithredu ar y pwynt hwnnw. Er nad oedd y dystiolaeth a roddwyd inni fel pe bai'n dangos bod uned strôc yn angenrheidiol ym mhob ysbyty, dylid dosbarthu unedau o'r fath yn strategol ledled Cymru, er mwyn iddynt fod o fewn cyrraedd yn rhwydd i'r boblogaeth. Yn benodol, yr wyf am bwysleisio'r angen am dimoedd arbenigol pwrpasol ar draws pob disgyblaeth sydd, fel y clywsom, ynghlwm wrth welyau strôc. Mae cael staff ag arbenigedd penodol yn gofalu am gleifion mewn amgylchedd pwrpasol yn sicrhau gofal o'r ansawdd gorau ac yn cynyddu'r posibilrwydd o wella, sydd o fudd i'r unigolyn, ei deulu, a'r gymdeithas gyfan.

Gan symud ymlaen at y cam sy'n gysylltiedig â gwella, nododd y pwyllgor fod blaenoriaethau ar gyfer gwasanaethau strôc yn canolbwyntio ar hyn o bryd ar y cam

The committee felt that there should be increasing emphasis on longer-term rehabilitation and support within the community. This, as we heard from Joyce, is extremely important as the aftermath of a stroke has a significant effect on patients' and families' lives, and appropriate support and advice should be available and easily accessed in a community setting. I look forward to seeing the agreed improvements to stroke services in Wales so that we can better meet the needs of patients.

4.10 p.m.

**Nick Ramsay:** I am pleased to have the opportunity to contribute to this debate today on what is a very important report for all of us to consider. I start by paying tribute to those in my constituency who work at Nevill Hall Hospital in Abergavenny. They are an amazing testament to the dedication and hard work of all those who work on the front line, and the sort of services provided there and the dedication of staff is, I am sure, reflected across all areas of Wales. I also pay tribute to the work of patient representative groups such as the Stroke Association and to national organisations such as the Wales Stroke Alliance, all of which were involved in putting together this thorough and interesting report—one of the most interesting reports that I have read in this area of health for a while.

As Val Lloyd has said, it is vital that we raise awareness of stroke, high blood pressure and atrial fibrillation issues. Perhaps just a bare majority of the general public understands that a stroke is a brain attack, and even fewer have a clear understanding of what leads to a stroke. Yet in mortality and morbidity terms, strokes are the greater risk and they are the leading cause of disability, as has been pointed out, in the UK and the third most common cause of death, after cancer and heart disease. I know that these statistics are often banded about in speeches here, but they need repeating, because they are statistics that stand out. In Wales, around 1,400 people died from suffering a stroke in 2007. Despite this high number, only 45 per cent of eligible Welsh hospitals have a specialist stroke unit,

aciwt a'r cam eilaidd yn llwybr y claf. Yr oedd y pwyllgor yn teimlo y dylid rhoi pwyslais cynyddol ar gymorth adsefydlu a chefnogaeth tymor hwy yn y gymuned. Fel y clywsom gan Joyce, mae hynny'n hynod o bwysig, oherwydd caiff canlyniadau strôc effaith sylweddol ar fywydau cleifion a theuluoedd, a dylai cefnogaeth a chynghor priodol fod ar gael yn hawdd mewn lleoliad cymunedol. Edrychaf ymlaen at weld y gwelliannau y cytunwyd arnynt i wasanaethau strôc yng Nghymru, er mwyn inni allu diwallu anghenion cleifion yn well.

**Nick Ramsay:** Yr wyf yn falch o gael y cyfle i gyfrannu at y ddadl hon heddiw ynghylch adroddiad y mae'n bwysig iawn inni i gyd ei ystyried. Hoffwn ddechrau drwy roi teyrnged i'r bobl hynny yn fy etholaeth sy'n gweithio yn Ysbyty Nevill Hall yn y Fenni. Maent yn dystiolaeth wych o ymroddiad a gwaith caled pawb sy'n gweithio yn y rheng flaen, ac yr wyf yn siŵr y caiff y math o wasanaethau a ddarperir yno, ac ymroddiad y staff, eu hadlewyrchu ar draws pob ardal yng Nghymru. Hoffwn roi teyrnged hefyd i waith grwpiau sy'n cynrychioli cleifion, megis y Gymdeithas Strôc, a sefydliadau cenedlaethol, megis Cynghrair Strôc Cymru, y bu pob un ohonynt yn ymwneud â llunio'r adroddiad trylwyr a diddorol hwn—un o'r adroddiadau mwyaf diddorol imi ei ddarllen ers tro yn y maes hwn sy'n ymwneud ag iechyd.

Fel y dywedodd Val Lloyd, mae'n hanfodol ein bod yn codi ymwybyddiaeth o faterion sy'n ymwneud â strôc, pwysedd gwaed uchel a ffibrilio atrïaidd. Efallai mai mwyafrif bach yn unig o aelodau'r cyhoedd sy'n deall mai pwl ar yr ymennydd yw strôc, a bydd llai fyth ohonynt yn deall yn glir beth sy'n arwain at strôc. Eto i gyd, o safbwynt marwolaeth ac afiachusrwydd, strôc yw'r perygl mwyaf, a strôc yw prif achos anabledd yn y DU, fel y nodwyd eisoes, a thrydydd achos mwyaf cyffredin marwolaeth, ar ôl canser a chlefyd y galon. Gwn y caiff yr ystadegau hyn eu crybwyll yn aml mewn areithiau yn y fan hon, ond mae angen eu hailadrodd, oherwydd maent yn ystadegau trawiadol. Yng Nghymru, bu farw tua 1,400 o bobl yn 2007 ar ôl dioddef strôc. Er gwaethaf y ffigur uchel

compared with a figure of 97 per cent in England. The conclusion reached in the 'National Sentinel Audit for Stroke in 2006' is that patients in Wales are more likely to die from a stroke and, if they survive, they will have higher levels of disability than patients in England or Northern Ireland. I note that one of the key recommendations is that

'The Welsh Assembly Government, Commissioners, Managers and Clinicians should urgently address the growing divide in quality of stroke care between Wales and rest of the United Kingdom. The highest priority should be given to the development of specialist stroke services, both in hospital with full provision of stroke units and the community.'

I am sure that we all agree with that. To that end, I am delighted that the Minister has accepted the bulk of the committee's recommendations. I am pleased that she accepts the need for an all-Wales stroke strategy, for formal systems of monitoring, and for the introduction of a risk reduction plan. She also recognises the importance of fully funded academic posts that allow academic and clinical research to be undertaken. Having said that, I express concern over the lukewarm response to proposal 7, which recommends that the term 'stroke unit' should be clearly defined and that this definition should be applied uniformly throughout the NHS. In your response, you have claimed that the Assembly Government avoids using the term 'stroke unit' as it conjures up an image of a formal, discrete four-walled ward. I find that a strange thing to say, Minister; perhaps you could explain in your response what exactly you meant by that. You probably come to that with a good intention, but the way that it has come across is not entirely as one would have hoped. An accusation could be levelled that that is kicking this into the long grass, which I am sure you would not want to do.

Patients not managed in specialist stroke units tend to stay in hospital longer, cost more and have worse outcomes than those

hwn, dim ond 45 y cant o ysbytai cymwys yng Nghymru sydd ag uned strôc arbenigol, o gymharu â 97 y cant yn Lloegr. Y casgliad y daethpwyd iddo yn yr archwiliad cenedlaethol ar gyfer strôc yn 2006 yw bod cleifion yng Nghymru yn fwy tebygol o farw o strôc, ac os byddant yn goroesi, bydd ganddynt lefelau uwch o anabledd na chleifion yn Lloegr neu Ogledd Iwerddon. Gwelaf mai un o'r argymhellion allweddol yw y

dylai Llywodraeth Cynulliad Cymru, comisiynwyr, rheolwyr a chlinigwyr fynd i'r afael ar frys â'r bwlch cynyddol rhwng ansawdd gofal strôc yng Nghymru a gweddill y Deyrnas Unedig. Dylid rhoi'r flaenoriaeth bennaf i ddatblygu gwasanaethau strôc arbenigol yn yr ysbyty, drwy sicrhau darpariaeth gyflawn o ran unedau strôc, ac yn y gymuned.

Yr wyf yn siŵr ein bod i gyd yn cytuno â hynny. I'r perwyl hwnnw, yr wyf wrth fy modd bod y Gweinidog wedi derbyn trwch argymhellion y pwyllgor. Yr wyf yn falch ei bod yn derbyn yr angen am strategaeth strôc i Gymru gyfan, yr angen am systemau ffurfiol ar gyfer monitro, a'r angen i gyflwyno cynllun lleihau risg. Mae hefyd yn cydnabod pwysigrwydd swyddi academaidd a gaiff eu cyllido'n llawn, fel y bydd modd ymgymryd ag ymchwil academaidd a chlinigol. Wedi dweud hynny, hoffwn fynegi pryder ynghylch yr ymateb llugoer i gynnyg 7, sy'n argymhell y dylai'r term 'uned strôc' gael ei ddiffinio'n glir ac y dylai'r diffiniad gael ei arfer yn gyson ledled y GIG. Yn eich ymateb, bu ichi honni bod Llywodraeth y Cynulliad yn osgoi defnyddio'r term 'uned strôc' am ei fod yn creu delwedd o ward ffurfiol, ar wahân o fewn pedair wal. Credaf fod hynny'n beth rhyfedd i'w ddweud, Weinidog; efallai y gallech egluro yn eich ymateb beth yn union yr oeddech yn ei olygu wrth hynny. Mae bwriad da y tu ôl i'ch penderfyniad, fwy na thebyg, ond nid yw'r modd y cafodd ei gyfleu'n cyd-fynd yn union â'r hyn y byddai rhywun wedi ei obeithio. Gellid eich cyhuddo o wthio'r mater i'r naill ochr, ac yr wyf yn siŵr na fydddech am wneud hynny.

Mae cleifion na chânt eu rheoli mewn unedau strôc arbenigol yn tueddu i aros yn yr ysbyty am gyfnod hwy, costio mwy, a chael gwaeth

who are admitted to such units. The development of specialist stroke units in Sweden has driven up service standards and quality of treatment and has improved patient outcomes. I think that it is worth exploring the idea of developing a unit specialising in a range of conditions where we bring together nursing, physiotherapy, bed management and medical expertise, concentrated more fully on stroke patients. The provision of these units could be done on a regional basis.

Suffering a stroke need not be a life-limiting condition. It is, too often, a life-limiting condition, but as long as there is early action, and that the right facilities are in place to deal with the stroke at the earliest stages, there can be a substantially better outcome at the end of the medical process. If we recognise that it need not be that life-limiting condition, and recognise the need for sufficient resources to be dedicated to this at the front end, so that, later on, other resources can be saved, we will be in a better place.

Finally, it is time that the Welsh Assembly Government took this on board. Thank you, Minister, for taking on board the recommendations. This is an interesting report and I look forward to hearing what you have to say.

**The Minister for Health and Social Services (Edwina Hart):** I wish to put formally on record my thanks to the committee for the work that it has undertaken in producing this inquiry into stroke services in Wales. It is an excellent report that has focused my mind and that of Government on how we deal with further improvements in stroke service provision across Wales. I always think that we see the Assembly at its best when it is discussing these reports, which are written on the basis of extremely useful evidence from individuals and groups. Like Nick Ramsay I pay tribute to the voluntary sector, which has so assiduously campaigned on issues around stroke services and on what people who have had strokes and their carers require in help and assistance from the national health service, and, of course, to social services departments and all the organisations involved.

canlyniadau na'r bobl a dderbynnir i unedau arbenigol. Mae datblygu unedau strôc arbenigol yn Sweden wedi codi safonau gwasanaethau ac ansawdd triniaeth, ac wedi gwella canlyniadau i gleifion. Credaf ei bod yn werth archwilio'r syniad o ddatblygu uned sy'n arbenigo mewn ystod o anhwylderau, lle'r ydym yn cyfuno darpariaeth nyrsio, ffisiotherapi, gwaith rheoli gwelyau ac arbenigedd meddygol, gan ganolbwyntio'n llawnach ar gleifion strôc. Gellid darparu'r unedau hyn yn rhanbarthol.

Nid oes angen i strôc gyfyngu ar fywyd unigolyn. Yn rhy aml, mae'n gyflwr sy'n cyfyngu ar fywyd, ond cyhyd ag y bo modd gweithredu'n fuan, a bod y cyfleusterau cywir ar gael i ymdrin â'r strôc yn gynnar, gellir sicrhau canlyniad gwell o lawer ar ddiwedd y broses feddygol. Byddwn mewn sefyllfa well o gydnabod nad oes angen i strôc fod yn gyflwr sy'n cyfyngu ar fywyd, a chydabod yr angen i glustnodi adnoddau digonol ar gyfer y maes hwn yn y rheng flaen, fel y gellir arbed adnoddau eraill yn ddiweddarach.

Yn olaf, mae'n bryd i Lywodraeth y Cynulliad ystyried hyn. Diolch, Weinidog, am ystyried yr argymhellion. Mae hwn yn adroddiad diddorol, ac edrychaf ymlaen at glywed yr hyn sydd gennych i'w ddweud.

**Y Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol (Edwina Hart):** Hoffwn gofnodi'n ffurfiol fy niolch i'r pwyllgor am y gwaith y mae wedi'i wneud wrth gynhyrchu'r ymchwiliad hwn i wasanaethau strôc yng Nghymru. Mae'n adroddiad ardderchog sydd wedi sianelu fy meddwl i a meddwl y Llywodraeth ynghylch sut mae ymdrin â gwelliannau pellach i'r ddarpariaeth o ran gwasanaethau strôc ledled Cymru. Credaf bob amser ein bod yn gweld y Cynulliad ar ei orau pan fo'n trafod yr adroddiadau hyn, a ysgrifennir ar sail tystiolaeth hynod ddefnyddiol gan unigolion a grwpiau. Fel Nick Ramsay, rhoddaf deyrnged i'r sector gwirfoddol sydd wedi ymgyrchu mor ddiwyd dros faterion sy'n ymwneud â gwasanaethau strôc, a'r hyn y mae ar bobl sydd wedi cael strôc, a'u gofalwyr, ei angen o safbwynt help a chymorth gan y gwasanaeth iechyd gwladol, a rhoddaf deyrnged, wrth gwrs, i



adrannau gwasanaethau cymdeithasol a phob sefydliad sy'n ymwneud â'r maes hwn.

Improving stroke services is one of the Assembly Government's top priorities and a 'One Wales' commitment. I recognise that stroke services in Wales, as in other parts of the UK, are not as good as we would wish. Much work has been undertaken in the past 18 months to improve service provision and to provide better patient outcomes. I was struck by Nick Ramsay's reference to what he thought was my lukewarm response to recommendation 7. I have very much taken to heart the evidence given by Dr Rudd and Dr Shetty to the committee about stroke units, their utilisation and how they should be regarded. It is clearly about how services are brought together and how the professionals are brought together. However, I am mindful of some of the comments that have been made in the debate by Nick Ramsay and Val Lloyd about the location of stroke units. We must understand that if we are going to bring the multidisciplinary teams together, everybody has to know where those are in any local health board area. That is quite important in how we deal with service provision across Wales.

I was very pleased to see that the recommendations in the committee's report highlight some of the issues that we are trying to address, and the major recommendations are being taken forward at local health board level or at an all-Wales level. These include an improved system of monitoring performance and progress, improving the quality and level of stroke services, and a clear structure of leadership within LHBs, because I do not think that that has existed in the NHS to deal with stroke issues in previous years. Importantly, at an all-Wales level, action is needed to champion and lead the programme of improvements across the whole of the patient pathway. So, we have to remind ourselves that this is about the patient pathway, the delivery of care and ensuring that, at the end of the day, we achieve a better outcome for anyone who has a stroke than has previously been the case.

Gwella gwasanaethau strôc yw un o brif flaenoriaethau Llywodraeth y Cynulliad, ac mae'n un o ymrwymïadau 'Cymru'n Un'. Yr wyf yn cydnabod nad yw gwasanaethau strôc yng Nghymru, fel mewn rhannau eraill o'r DU, gystal ag y byddem yn dymuno iddynt fod. Mae llawer o waith wedi'i wneud yn ystod y 18 mis diwethaf i wella'r ddarpariaeth o ran gwasanaethau a darparu gwell canlyniadau i gleifion. Fe'm trawyd gan gyfeiriad Nick Ramsay at fy ymateb llugoer, yn ei farn ef, i argymhelliad 7. Yr wyf wedi cymryd o ddifrif y dystiolaeth a roddwyd gan Dr Rudd a Dr Shetty i'r pwyllgor ynghylch unedau strôc, dulliau o'u defnyddio, a'r modd y dylid eu hystyried. Mae'n amlwg bod a wnelont â'r modd y caiff gwasanaethau eu dwyn at ei gilydd, a'r modd y caiff y gweithwyr proffesiynol eu dwyn at ei gilydd. Fodd bynnag, ystyriaf rai o'r sylwadau a wnaed yn y ddadl gan Nick Ramsay a Val Lloyd, ynghylch lleoliad unedau strôc. Os ydym yn bwriadu dod â'r timoedd aml-ddisgyblaethol at ei gilydd, rhaid inni ddeall bod yn rhaid i bawb wybod ble mae'r rheini mewn unrhyw ardal bwrdd iechyd lleol. Mae hynny'n agwedd eithaf pwysig ar y modd y byddwn yn ymdrin â'r ddarpariaeth o ran gwasanaethau ledled Cymru.

Yr oeddwn yn falch iawn o weld bod yr argymhellion yn adroddiad y pwyllgor yn tynnu sylw at rai o'r materion yr ydym yn ceisio mynd i'r afael â hwy, a bod y prif argymhellion yn cael eu symud ymlaen ar lefel byrddau iechyd lleol neu lefel Cymru gyfan. Mae'r rheini'n cynnwys system well ar gyfer monitro perfformiad a chynnydd, gwaith gwella ansawdd a lefel gwasanaethau strôc, a strwythur clir ar gyfer arweinyddiaeth mewn byrddau iechyd lleol, oherwydd ni chredaf i hynny fodoli yn y GIG er mwyn ymdrin â materion yn ymwneud â strôc yn ystod y blynyddoedd blaenorol. Yr hyn sy'n bwysig iawn, ar lefel Cymru gyfan, yw bod angen gweithredu i hyrwyddo ac arwain y rhaglen o welliannau ar draws holl lwybr y claf. Felly, rhaid inni ein hatgoffa ein hunain bod a wnelo hyn â llwybr y claf, darparu gofal, a sicrhau yn y pen draw ein bod yn arwain at ganlyniad gwell nag o'r blaen i

bawb sy'n cael strôc.

Therefore, my response to the report accepts the majority of the recommendations made and the recommendations' underlying principles. Until now, my focus has been on the acute phase of care, because compelling evidence confirms that high-quality care immediately following a stroke will improve patient outcomes in the longer term. Therefore, I have accepted recommendation 15 and fully acknowledge that rehabilitation is an integral part of the overall package of care. It is important to recognise that there must be equity of access to rehabilitation services. Just because someone is older does not mean that they do not require that level of intervention from a physiotherapist or speech therapist. It is important that we recognise that we have to get this right. The action plans that the LHBs have created map the journey across the whole patient pathway, starting with prevention—and I must say that some excellent points were made about the prevention agenda today. One Member—and I think it was Val—said that we need to look at ourselves to see what bad habits we may have in life in considering the issues that we need to deal with to prevent stroke. That is a relevant point for the whole population. We need to get more key messages about some of these issues out in the public domain. I expect the LHBs to achieve full compliance with all of the national standards and targets for stroke services by 2015.

To deal with some of the general points made by Members, I will review the Record of Proceedings in order to ensure that, where I have to send written responses, these will all be covered fully. On the first point about all the policy documents, the committee is quite right that there are too many documents, so it is important that I bring all those together. It is important that we do that over the course of the next 12 months, and I will do it on the website, because that will be cost-effective. We must also recognise that, within the five-year service workforce and financial strategic framework, there is an aspiration to achieve the integrated care that we need to deliver

Felly, mae fy ymateb i'r adroddiad yn derbyn mwyafrif yr argymhellion a wnaed ac egwyddorion sylfaenol yr argymhellion. Hyd yma, bûm yn canolbwyntio ar ofal aciwt, oherwydd mae tystiolaeth rymus yn cadarnhau bod gofal o ansawdd uchel yn syth ar ôl cael strôc yn gwella canlyniadau i gleifion yn y tymor hwy. Felly, yr wyf wedi derbyn argymhelliad 15 ac yn cydnabod yn llawn bod cymorth adsefydlu'n rhan annatod o'r pecyn cyffredinol o ofal. Mae'n bwysig cydnabod bod yn rhaid sicrhau mynediad teg i wasanaethau adsefydlu. Nid yw'r ffaith bod unigolyn yn hŷn yn golygu nad oes arno angen y lefel honno o ymyrraeth gan ffisiotherapydd neu therapydd iaith. Mae'n bwysig ein bod yn cydnabod bod yn rhaid inni ymdrin yn iawn â'r mater. Mae'r cynlluniau gweithredu y mae'r byrddau iechyd lleol wedi eu creu yn mapio'r daith ar hyd holl lwybr y claf, gan ddechrau gyda gwaith atal—a rhaid imi ddweud bod rhai pwyntiau ardderchog wedi eu gwneud ynghylch yr agenda atal heddiw. Dywedodd un Aelod—credaf mai Val ydoedd—fod angen inni edrych ar ein hunain i weld pa arferion gwael a allai fod gennym ni yn ein bywydau, wrth ystyried pa faterion y mae angen inni ymdrin â hwy er mwyn atal strôc. Mae hwnnw'n bwynt perthnasol i'r boblogaeth gyfan. Mae angen inni gyfleu mwy o negeseuon allweddol i'r cyhoedd am rai o'r materion hyn. Disgwyliaf i'r byrddau iechyd lleol sicrhau eu bod yn cydymffurfio'n llawn â phob un o'r targedau a'r safonau cenedlaethol ar gyfer gwasanaethau strôc erbyn 2015.

I ymdrin â rhai o'r pwyntiau cyffredinol a wnaed gan yr Aelodau, byddaf yn adolygu Cofnod y Trafodion er mwyn sicrhau, os bydd yn rhaid imi anfon ymatebion ysgrifenedig, yr ymdrinnir â phob pwynt yn llawn. O ran y pwynt cyntaf ynghylch yr holl ddogfennau polisi, mae'r pwyllgor yn llygad ei le wrth ddweud bod gormod o ddogfennau, felly mae'n bwysig fy mod yn dod â'r cyfan ynghyd. Mae'n bwysig ein bod yn gwneud hynny yn ystod y 12 mis nesaf, a byddaf yn gwneud hynny ar y wefan, gan y bydd yn ddull cost-ffeithiol. Rhaid inni gydnabod hefyd bod y fframwaith gwasanaeth, gweithlu a chyllid strategol pum mlynedd yn cynnwys

stroke services. That is an important point.

dyhead i sicrhau'r gofal integredig y mae ei angen arnom i ddarparu gwasanaethau strôc. Mae hwnnw'n bwynt pwysig.

4.20 p.m.

I am not cool on the issue of a national register. It is evolving, and I accept the point made today that we must take a stepwise approach because of the money involved. I think that people understand that. We also need to make better use of the information that we currently have, because I am not certain that we are using that information that well. It is important to have virtual disease registers for stroke and other conditions. I have to get a pragmatic and practical solution to this, but I can assure the committee that that is very much the focus of some of the issues that I wish to look at.

Nid wyf yn ddidaro ynghylch cael cofrestr genedlaethol. Mae'n esblygu, ac yr wyf yn derbyn y pwynt a wnaed heddiw ynghylch y ffaith bod yn rhaid inni weithredu gam wrth gam oherwydd yr arian sydd dan sylw. Credaf fod pobl yn deall hynny. Mae angen hefyd inni ddefnyddio'r wybodaeth sydd gennym ar hyn o bryd yn well, oherwydd nid wyf yn hollol siŵr ein bod yn defnyddio'r wybodaeth honno'n dda. Mae'n bwysig bod gennym gofrestrau rhithwir ar gyfer strôc a chyflyrau eraill. Rhaid imi gael ateb pragmatig ac ymarferol i hyn, ond gallaf sicrhau'r pwyllgor mai dyna'n bendant iawn yw ffocws rhai o'r materion yr wyf am edrych arnynt.

On recommendation 5, I understand absolutely why the committee wanted to go in this direction. However, as I made quite clear in rejecting the recommendation, I cannot guarantee that I can do that with the spending levels on strokes, but I have taken to heart the comments made in the debate, and I will discuss with my officials whether we can look at other issues and draw comparisons across the United Kingdom if that would be helpful.

O ran argymhelliad 5, yr wyf yn deall yn iawn pam yr oedd y pwyllgor am fynd i'r cyfeiriad hwn. Fodd bynnag, fel yr eglurais wrth wrthod yr argymhelliad, ni allaf warantu bod modd imi wneud hynny o safbwynt y lefelau gwariant ar achosion o strôc, ond yr wyf wedi cymryd o ddifrif y sylwadau a wnaed yn y ddadl, a byddaf yn trafod â'm swyddogion i weld a allwn edrych ar faterion eraill a chymharu ledled y Deyrnas Unedig, pe bai hynny'n ddefnyddiol.

We have seen changes across the NHS over the last 12 months. The annual operating framework target will help. I have accepted recommendation 2, which specifies the need for a formal system of monitoring targets, as I think that that was particularly important. There are formal systems in place, but when we move to intelligent targets that are focused around continuous improvement and the measurement of clinical interventions and outcomes I think that this will provide a much better mechanism for monitoring the quality of stroke care. I expect all hospitals providing acute stroke care to be assessed as compliant with the intelligent target set for acute stroke care by the end of September 2010. That is something that we need to await.

Yr ydym wedi gweld newidiadau ledled y GIG dros y 12 mis diwethaf. Bydd targed y fframwaith gweithredu blynyddol yn helpu. Yr wyf wedi derbyn argymhelliad 2, sy'n nodi'r angen am system ffurfiol i fonitro targedau, oherwydd credaf fod hynny'n arbennig o bwysig. Mae systemau ffurfiol ar waith, ond pan symudwn at dargedau deallus sy'n canolbwyntio ar welliant parhaus ac ar fesur ymyriadau clinigol a chanlyniadau, credaf y bydd yn darparu system well o lawer ar gyfer monitro ansawdd gofal strôc. Disgwyliaf i bob ysbyty sy'n darparu gofal strôc aciwt gael ei asesu er mwyn sicrhau ei fod yn cydymffurfio â'r targed deallus a osodwyd ar gyfer gofal strôc aciwt, erbyn diwedd mis Medi 2010. Mae hynny'n rhywbeth y mae angen inni aros amdano.

Intelligent targets relating to transient

Mae targedau deallus terfynol sy'n ymwneud

ischaemic attack early recovery and rehabilitation are being finalised and will be introduced during 2010-11, and they will be formally monitored in the 2011-12 annual operating framework process. From the Assembly Government's response to the committee inquiry into stroke services, I am sure that you will agree that we have made significant progress. However, it is not an area that will be transformed over night. The Assembly Government remains fully committed to the work needed to continue this and very much accepts what has emerged from the report.

Normally, as I have said before, I would indicate that I would provide an update on progress to the committee in 12 months' time. However, if it does not cause any problems, and the Assembly is agreeable, I thought that I might give an update in six months' time on some of the important issues around stroke services. I will be happy to make a Government statement on this particular issue, because we have seen from the report, the contributions today, and the evidence that came to the committee, that there are issues of concern to all of us across the Chamber, and it is important that I, as a Government Minister, recognise this and report on the improvements that are being made and will continue to be made.

**Darren Millar:** Thank you for that response to the debate, Minister. I also thank everyone who has taken part in what has been not only an interesting debate, but a debate on an issue that has touched the hearts of many in the Chamber in personal experience. I was taken by Joyce Watson's opening remarks about her personal family experience in relation to her husband. It is because stroke affects so many people in so many families in Wales that this has been such a public priority for service improvement, as Dai Lloyd quite rightly pointed out in his contribution.

Many people touched on the inconsistency of the service in Wales and the fact that it is not

â chymorth adsefydlu ac adferiad iechyd buan yn dilyn pwl o isgemia dros dro'n cael eu paratoi. Byddant yn cael eu cyflwyno yn ystod 2010-11, a byddant yn cael eu monitro'n ffurfiol yn ystod proses fframwaith gweithredu blynyddol 2011-12. O ymateb Llywodraeth y Cynulliad i ymchwiliad y pwyllgor i wasanaethau strôc, yr wyf yn siŵr y byddwch yn cytuno ein bod wedi gwneud cynnydd sylweddol. Fodd bynnag, nid yw'n faes a weddnewidir dros nos. Mae Llywodraeth y Cynulliad wedi ymrwymo'n llawn o hyd i'r gwaith y mae angen ei wneud i barhau â hyn, ac mae'n derbyn yn foddog yr hyn sydd wedi deillio o'r adroddiad.

Fel yr wyf wedi dweud o'r blaen, byddwn fel rheol yn nodi fy mwriad i ddarparu'r newyddion diweddaraf am gynnydd i'r pwyllgor ymhen 12 mis. Fodd bynnag, os nad yw'n achosi problemau, ac os yw'r Cynulliad yn cytuno, meddyliais y gallwn roi'r newyddion diweddaraf am rai o'r materion pwysig sy'n ymwneud â gwasanaethau strôc ymhen chwe mis. Byddaf yn fwy na pharod i gyflwyno datganiad gan y Llywodraeth ar y mater penodol hwn, oherwydd yr ydym wedi gweld o'r adroddiad, y cyfraniadau heddiw, a'r dystiolaeth a ddaeth i'r pwyllgor, y ceir materion sy'n peri pryder inni i gyd ar draws y Siambr, ac mae'n bwysig fy mod i, fel Gweinidog yn y Llywodraeth, yn cydnabod hynny ac yn adrodd ynghylch y gwelliannau a wneir ac a fydd yn parhau i gael eu gwneud.

**Darren Millar:** Diolch am yr ymateb hwnnw i'r ddadl, Weinidog. Hoffwn innau ddiolch i bawb sydd wedi cymryd rhan yn y ddadl hon a fu nid yn unig yn ddadl ddiddorol, ond yn ddadl ar fater sydd wedi cyffwrdd â chalonnau llawer o bobl yn y Siambr hon oherwydd profiad personol. Gwnaeth sylwadau agoriadol Joyce Watson, ynghylch ei phrofiad teuluol personol yng nghyswllt ei gŵr, argraff arnaf. Y rheswm pam mae'r mater hwn wedi bod yn gymaint o flaenoriaeth gyhoeddus o ran gwella gwasanaethau yw oherwydd bod strôc yn effeithio ar gynifer o bobl mewn cynifer o deuluoedd yng Nghymru, fel y dywedodd Dai Lloyd yn gywir ddigong yn ei gyfraniad.

Soniodd llawer o bobl am anghysondeb y gwasanaeth yng Nghymru, a'r ffaith nad

good enough as it currently stands. You also acknowledged, Minister, that things need to improve and we are grateful for that acknowledgement. I think that it was Peter Black who mentioned the inconsistent access to high-quality services provided by therapists. As we heard at first hand, there is nothing more frustrating for stroke patients than not being able to communicate exactly how they are feeling and what their needs might be. Speech and language therapy in the immediate aftermath of a stroke is important. I thank you, Minister, for taking on board our recommendations about the need for multidisciplinary teams to be available to people who have suffered a stroke at the very earliest opportunity.

Dai Lloyd touched on the need to improve thrombolysis treatment rates. We found that there was a significant difference between the proportion of stroke patients treated with thrombolysis in Wales and that in some of the best performing countries in Europe, such as Sweden. Clearly, there is a need for CT scanners to be available so that clinicians can diagnose the type of stroke that someone has suffered from. That is very important. We welcome the investment that the NHS has made in CT scanners in Wales, but that needs to be improved, so that people can get to a scanner at the earliest opportunity to determine whether thrombolysis is an appropriate treatment.

Andrew R.T. Davies made another important point, which related to the question of how the NHS will address the need for additional therapists through the workforce planning agenda. Minister, I think that you were unable to respond fully to that point within the time that you had, but I would appreciate it if you could write to me, as Chair of the committee, at the earliest opportunity, so that I can report back to Members on how you will address the need to increase the number of therapists in Wales through workforce planning in order to address the issue of specialised stroke services. It is clear that, at present, there is insufficient investment in the multidisciplinary team approach. Investment in training was mentioned by Peter Black, and people need to be able to have time away from the workplace so that they can dedicate themselves to improving their knowledge, in

yw'n ddigon da fel y mae ar hyn o bryd. Bu ichi gydnabod hefyd, Weinidog, fod angen i bethau wella, ac yr ydym yn ddiolchgar am y gydnabyddiaeth honno. Credaf mai Peter Black a soniodd am y mynediad anghyson i wasanaethau o ansawdd uchel a ddarperir gan therapyddion. Fel y clywsom yn uniongyrchol, nid oes dim yn peri mwy o rwystredigaeth i gleifion strôc na methu â chyfathrebu sut yn union y maent yn teimlo a beth allai eu hanghenion fod. Mae therapi lleferydd ac iaith yn syth ar ôl strôc yn bwysig. Diolchaf ichi, Weinidog, am ystyried ein hargymhellion ynghylch yr angen i ddimoddd amlddisgyblaethol fod ar gael cyn gynted â phosibl i bobl sydd wedi dioddef strôc.

Soniodd Dai Lloyd am yr angen i wella cyfraddau triniaeth thrombolysis. Gwelsom fod gwahaniaeth sylweddol rhwng cyfran y cleifion strôc sy'n cael triniaeth thrombolysis yng Nghymru a'r gyfran yn rhai o'r gwledydd sy'n perfformio orau yn Ewrop, megis Sweden. Mae'n amlwg bod angen i sganwyr CT fod ar gael er mwyn i glinigwyr allu diagnosio'r math o strôc y mae unigolyn wedi ei dioddef. Mae hynny'n bwysig iawn. Yr ydym yn croesawu'r buddsoddiad y mae'r GIG wedi'i wneud mewn sganwyr CT yng Nghymru, ond mae angen i hynny wella er mwyn i bobl allu cyrraedd sganiwr cyn gynted â phosibl er mwyn penderfynu a yw thrombolysis yn driniaeth briodol.

Gwnaeth Andrew R.T. Davies bwynt pwysig arall, a oedd yn ymwneud â sut y bydd y GIG yn mynd i'r afael â'r angen am therapyddion ychwanegol drwy agenda cynllunio'r gweithlu. Weinidog, credaf ichi fethu ag ymateb yn llawn i'r pwynt hwnnw yn yr amser a oedd gennych, ond byddwn yn gwerthfawrogi pe gallech ysgrifennu ataf, fel Cadeirydd y pwyllgor, cyn gynted â phosibl, er mwyn imi allu adrodd yn ôl wrth yr Aelodau ynghylch sut y byddwch yn mynd i'r afael â'r angen i gynyddu nifer y therapyddion yng Nghymru drwy gynllunio'r gweithlu, er mwyn rhoi sylw i'r mater sy'n ymwneud â gwasanaethau strôc arbenigol. Mae'n amlwg nad oes digon o fuddsoddi ar hyn o bryd mewn defnyddio timoedd amlddisgyblaethol. Soniodd Peter Black am fuddsoddi mewn hyfforddiant, ac mae angen i bobl allu cael amser i ffwrdd o'r gweithle i

order to improve services to patients.

There was a lot of talk about the prevention agenda. I referred in my opening speech to the Act FAST campaign and the good work that has been done by it to raise awareness of strokes and what to do in the event of an emergency. However, that preventative agenda does not receive enough attention. We recognise that the Minister has invested in a campaign that talks about the risks of high blood pressure, but that is not the only risk factor associated with strokes. We must remember that there are all sorts of risks, in relation to weight and so on, of which we need to make sure that people are aware.

Nick Ramsay paid tribute to the excellent work of patients' groups and the dedicated staff in the NHS, and I echo his words in that respect. He talked in particular about Nevill Hall Hospital, but there are hospital staff, therapists and patients' groups across the country doing fantastic work in raising awareness and providing those services. I was taken with his comment about strokes being brain attacks. The term 'stroke' sounds so gentle, but strokes can have devastating consequences for people. We should perhaps focus on the term 'brain attack' as a hook to capture people's attention to ensure that we raise people's awareness levels to where they should be.

In conclusion, this is a big issue, and we have to ensure that we monitor things going forward. I am delighted that the Minister has committed to bringing a statement to the Chamber in six months' time. I look forward, as Chair of the committee, to working with her to bring forward ideas to ensure that stroke patients in Wales get the services that they deserve.

**Y Llywydd:** Y cwestiwn yw bod adroddiad y pwyllgor yn cael ei nodi. A oes gwrthwynebiad? Mae'n ymddangos nad oes. Felly, yn unol â Rheol Sefydlog Rhif 7.25, yr wyf yn datgan bod yr adroddiad wedi'i nodi.

*Derbyniwyd y cynnig.  
Motion agreed.*

allu ymroi i wella eu gwybodaeth, er mwyn gwella gwasanaethau i gleifion.

Bu llawer o sôn am yr agenda atal. Yn fy araith agoriadol, cyfeiriais at ymgyrch Act FAST, a'r gwaith da a wnaed ganddi i godi ymwybyddiaeth o strôc a'r hyn y dylid ei wneud mewn argyfwng. Fodd bynnag, nid yw'r agenda atal honno'n cael digon o sylw. Yr ydym yn cydnabod bod y Gweinidog wedi buddsoddi mewn ymgyrch sy'n sôn am beryglon pwysedd gwaed uchel, ond nid dyna'r unig ffactor risg sy'n gysylltiedig â strôc. Rhaid inni gofio bod pob math o risgiau, sy'n ymwneud â phwysau ac yn y blaen, y mae angen inni wneud yn siŵr bod pobl yn ymwybodol ohonynt.

Rhoddodd Nick Ramsay deyrnged i waith ardderchog grwpiau cleifion a staff ymroddedig y GIG, a hoffwn adleisio ei eiriau yn hynny o beth. Soniodd yn benodol am Ysbyty Nevill Hall, ond mae staff ysbytai, therapyddion a grwpiau cleifion ledled y wlad yn gwneud gwaith gwyach i godi ymwybyddiaeth a darparu'r gwasanaethau hynny. Gwnaeth ei sylw am y ffaith mai pwl ar yr ymennydd yw strôc argraff arnaf. Mae'r term 'strôc' yn swnio mor addfwyn, ond gall strociau arwain at ganlyniadau dinistriol i bobl. Efallai y dylem ganolbwyntio ar y term 'pwl ar yr ymennydd' fel bachyn i ddal sylw pobl, er mwyn sicrhau ein bod yn codi lefelau eu hymwybyddiaeth i'r man lle dylent fod.

I gloi, mae hwn yn fater pwysig, a rhaid inni sicrhau ein bod yn monitro pethau wrth iddynt symud ymlaen. Yr wyf wrth fy modd bod y Gweinidog wedi ymrwymo i gyflwyno datganiad i'r Siambr ymhen chwe mis. Edrychaf ymlaen, fel Cadeirydd y pwyllgor, at weithio gyda hi i gyflwyno syniadau er mwyn sicrhau bod cleifion strôc yng Nghymru yn cael y gwasanaethau y maent yn eu haeddu.

**The Presiding Officer:** The proposal is that the committee report is noted. Is there any objection? It appears that there is not. Therefore, in accordance with Standing Order No. 7.25, I declare the report noted.

## Pwynt o Drefn Point of Order

**Mark Isherwood:** In light of the comments of several Members during the statement on the draft legislative competence Order on housing on whether the actions of the UK Government were in breach of the democratic will of this place, I seek your guidance on whether that is not a direct consequence of the legislative competence Order system in the Government of Wales Act 2006, which was agreed at the same time by the Governments in the two places. That also led, for example, to UK Ministers predetermining the contents of the proposed Measure on Welsh language through the LCO on the Welsh language and to UK Ministers attempting to acquire powers through the original draft LCO on affordable housing, which was ultimately ruled as not being ultra vires by Westminster lawyers.

**Mark Isherwood:** Yng ngoleuni sylwadau llawer o Aelodau, yn ystod y datganiad am y Gorchymyn cymhwysedd deddfwriaethol drafft ynghylch tai, ar a oedd camau gweithredu Llywodraeth y DU yn mynd yn groes i ewyllys democrataidd y lle hwn, gofynnaf ichi am arweiniad ynghylch a yw hynny'n ganlyniad uniongyrchol y system ar gyfer Gorchymynion cymhwysedd deddfwriaethol, a geir yn Neddf Llywodraeth Cymru 2006, y cytunwyd arni ar yr un pryd gan y Llywodraethau yn y ddau le. Arweiniodd hynny hefyd, er enghraifft, at sefyllfa lle'r oedd Gweinidogion y DU yn rhagbennu cynnwys y Gorchymyn arfaethedig ynghylch yr iaith Gymraeg drwy'r Gorchymyn cymhwysedd deddfwriaethol ynghylch yr iaith Gymraeg, ac at sefyllfa lle'r oedd Gweinidogion y DU yn ceisio caffael pwerau drwy'r Gorchymyn cymhwysedd deddfwriaethol drafft gwreiddiol ynghylch tai fforddiadwy, y dyfarnodd cyfreithwyr San Steffan yn y pen draw nad oedd y tu hwnt i allu cyfreithiol.

4.30 p.m.

**The Presiding Officer:** I am grateful for that point of order and I will respond to it, but I may also wish to return to it. Mark Isherwood is quite right in saying that what has happened to the progress, if one may so describe it, of the attempt to secure powers to legislate on housing is indeed indicative of the process rather than of a particular case. The original draft Order was redrafted in the light of comments from the Welsh Affairs Committee and included powers given to the Secretary of State over the abolition of the right to buy. This version of the draft Order was approved by the Assembly, but then, as you rightly say, the Joint Committee on Statutory Instruments, following notification from lawyers and clerks to that committee, raised concern about the constitutional implications and the vires of the draft Order. It was not, in fact, presented to either House of Parliament.

**Y Llywydd:** Yr wyf yn ddiolchgar am y pwynt hwnnw o drefn a byddaf yn ymateb iddo, ond efallai y byddaf hefyd yn dymuno dychwelyd ato. Mae Mark Isherwood yn llygad ei le wrth ddweud bod yr hyn sydd wedi digwydd i gynnydd, os dyna'r ffordd o'i ddisgrifio, o ran yr ymgais i gael pwerau i ddeddfu ynghylch tai yn adlewyrchu'r broses yn hytrach nag achos penodol. Cafodd y Gorchymyn drafft gwreiddiol ei ailddrafftio yng ngoleuni sylwadau gan y Pwyllgor Materion Cymreig, ac yr oedd yn cynnwys pwerau a roddwyd i'r Ysgrifennydd Gwladol dros ddiddymu'r hawl i brynu. Cafodd y fersiwn hon o'r Gorchymyn drafft ei chymeradwyo gan y Cynulliad, ond yna, fel y dywedasoeh yn gywir ddigon, cododd y Cydbwyllgor ar Offerynnau Statudol, yn dilyn hysbysiad gan gyfreithwyr a chlercod y cydbwyllgor hwnnw, bryder am oblygiadau cyfansoddiadol a gallu cyfreithiol y Gorchymyn drafft. Mewn gwirionedd, ni chafodd ei gyflwyno i'r naill Dŷ na'r llall yn Senedd y DU.

However, there was a further form of the draft Order—the later form that was approved by the Assembly—and my understanding is that this is the version that the Wales Office now seeks to change and the statement that the Minister made here today in the Assembly results from intergovernmental discussions that have taken place on this draft Order. This, as you rightly say, is not unusual. The process of agreeing a form of a proposed Order in Council is an intergovernmental process, which is informed by scrutiny, in the National Assembly, in the Welsh Affairs Committee of the House of Commons and in the Constitution Committee of the House of Lords. The current form of discussion is not unusual, although the length of the discussion is protracted as compared with the other draft Order processes.

The process is not a matter of order for me; it is what we have before us in the Government of Wales Act 2006. I have sought, to the utmost extent, to try to ensure that this process works as well as it possibly ever could. In the Assembly, we have all bent over backwards, including Ministers from both parties, officials of the Welsh Government and of the Assembly, in order to make the system work. I do not think that I should say more on this matter given that there is to be, I understand, a referendum soon.

Fodd bynnag, cafwyd ffurf arall ar y Gorchymyn drafft—y ffurf ddiweddarach a gymeradwywyd gan y Cynulliad—a chaf ar ddeall mai dyma'r fersiwn y mae Swyddfa Cymru yn ceisio'i newid yn awr, ac mae'r datganiad a wnaeth y Gweinidog yma heddiw yn y Cynulliad yn deillio o drafodaethau rhynglywodraethol sydd wedi digwydd ar y Gorchymyn drafft hwn. Nid yw hynny'n anarferol, fel y dywedasoeh yn gywir ddigon. Mae'r broses o gytuno ar ffurf ar Orchymyn arfaethedig yn y Cyfrin Gyngor yn broses rynglywodraethol, a gaiff ei llywio gan waith craffu, yn y Cynulliad Cenedlaethol, yn y Pwyllgor Materion Cymreig yn Nhŷ'r Cyffredin, ac yn y Pwyllgor Cyfansoddiad yn Nhŷ'r Arglwyddi. Nid yw'r math presennol o drafodaeth yn anarferol, er bod y drafodaeth yn hwy o'i chymharu â phrosesau Gorchymynion drafft eraill.

Nid yw'r broses yn fater o drefn i mi; mae'n fater sydd ger ein bron yn Neddf Llywodraeth Cymru 2006. Yr wyf wedi gwneud popeth o fewn fy ngallu i geisio sicrhau bod y broses hon yn gweithio gystal ag y gall weithio byth. Yn y Cynulliad, yr ydym i gyd, gan gynnwys Gweinidogion o'r ddwy blaid, a swyddogion Llywodraeth Cymru a'r Cynulliad, wedi gwneud ein gorau glas er mwyn gwneud i'r system weithio. Ni chredaf y dylwn ddweud rhagor am y mater o gofio, hyd y deallaf, y cynhelir refferendwm cyn bo hir.

*Daeth y Dirprwy Lywydd (Rosemary Butler) i'r Gadair am 4.33 p.m.  
The Deputy Presiding Officer (Rosemary Butler) took the Chair at 4.33 p.m.*

### **Adroddiad Blynyddol y Pwyllgor Safonau Ymddygiad The Annual Report of the Committee on Standards of Conduct**

**Jeff Cuthbert:** I move that

*the National Assembly for Wales:*

*notes the annual report of the Committee on Standards of Conduct, which was laid in the Table Office on 25 May 2010. (NDM4500)*

I welcome the opportunity to introduce this report by the Committee on Standards of Conduct to you today. This report covers the period from the establishment of the present

**Jeff Cuthbert:** Cynigiau fod

*Cynulliad Cenedlaethol Cymru:*

*yn nodi adroddiad blynyddol y Pwyllgor Safonau Ymddygiad, a osodwyd yn y Swyddfa Gyflwyno ar 25 Mai 2010. (NDM4500)*

Croesawaf y cyfle i gyflwyno'r adroddiad hwn gan y Pwyllgor Safonau Ymddygiad ichi heddiw. Mae'r adroddiad hwn yn ymdrin â'r cyfnod rhwng sefydlu'r pwyllgor presennol



committee in June 2007 to March 2010.

I begin by paying tribute to my fellow Members on that committee, namely Brynle Williams, Jenny Randerson and Chris Franks and to the officers who support us, namely John Grimes, the clerk to the committee, and his predecessor, Sulafa Halstead, and to their staff, who support us in our work.

The functions of the committee are set out in Standing Order No. 16. In particular, the committee is responsible for investigating, reporting on and, if appropriate, recommending action in respect of any complaint referred to it by the National Assembly for Wales Commissioner for Standards in relation to a Member not complying with the matters set out in Standing Order No.16.1(i).

It is with great pleasure that I am able to say that, during the period covered by this report, the commissioner for standards has not referred any complaints to the committee. It is for that reason that this is the committee's first annual report since 2007. Despite the lack of complaints, we thought that now would be an appropriate time to publish our first annual report given the extensive work carried out on the National Assembly for Wales Commissioner for Standards Measure 2009, which I will refer to in more detail later on.

While any complaint is a cause for concern, the committee considers that the lack of admissible complaints during this period indicates that Members' ethical standards in the conduct of the Assembly's business are taken very seriously indeed. Despite the lack of complaints for the committee to investigate, we have been busy overseeing procedures in relation to monitoring and maintaining ethical standards in the conduct of the Assembly's business. In particular, we have reviewed and advised on the code of conduct for Assembly Members and the National Assembly for Wales's procedure for dealing with complaints against Assembly Members. We have also drafted a protocol, as required by the Government of Wales Act 2006, on the different roles and responsibilities of constituency Members and regional Members. Alongside these issues,

ym mis Mehefin 2007 a mis Mawrth 2010.

Dechreuaf drwy roi teyrnged i'm cyd-Aelodau ar y pwyllgor hwnnw, sef Brynle Williams, Jenny Randerson a Chris Franks a'r swyddogion sy'n rhoi cymorth inni, sef John Grimes, clerc y pwyllgor, a'i ragflaenydd, Sulafa Halstead, a'u staff, sy'n rhoi cymorth inni gyda'n gwaith.

Mae swyddogaethau'r pwyllgor wedi'u nodi yn Rheol Sefydlog Rhif 16. Yn benodol, mae'r pwyllgor yn gyfrifol am ymchwilio i unrhyw gŵyn a gyfeirir ato gan Gomisiynydd Safonau Cynulliad Cenedlaethol Cymru am Aelod yn methu â chydymffurfio â'r materion a nodir yn Rheol Sefydlog Rhif 16.1(i). Mae'r pwyllgor hefyd yn adrodd ar gwynion o'r fath ac yn argymhell camau gweithredu os yw hynny'n briodol.

Mae'n bleser mawr gennyf allu dweud nad yw'r comisiynydd safonau wedi cyfeirio unrhyw gwynion at y pwyllgor, yn ystod y cyfnod yr ymdrinnir ag ef yn yr adroddiad hwn. Am y rheswm hwnnw, dyma adroddiad blynyddol cyntaf y pwyllgor er 2007. Er gwaetha'r diffyg cwynion, yr oeddem o'r farn y byddai'n briodol inni fynd ati'n awr i gyhoeddi ein hadroddiad blynyddol cyntaf, o ystyried y gwaith sylweddol a wnaed ar Fesur Comisiynydd Safonau Cynulliad Cenedlaethol Cymru 2009, y byddaf yn cyfeirio ato'n fanylach yn nes ymlaen.

Er bod unrhyw gŵyn yn destun pryder, mae'r pwyllgor yn ystyried bod y diffyg cwynion derbyniadwy yn ystod y cyfnod hwn yn nodi bod safonau moesegol yr Aelodau wrth gynnal busnes y Cynulliad yn fater sy'n cael ei gymryd o ddifrif. Er na chafwyd cwynion i'r pwyllgor ymchwilio iddynt, buom yn brysur iawn yn goruchwyllo gweithdrefnau sy'n gysylltiedig â monitro a chynnal safonau moesegol wrth gynnal busnes y Cynulliad. Yn benodol, yr ydym wedi adolygu'r cod ymddygiad i Aelodau'r Cynulliad a gweithdrefn Cynulliad Cenedlaethol Cymru ar gyfer ymdrin â chwynion yn erbyn Aelodau'r Cynulliad, ac wedi rhoi cyngor yn eu cylch. Yr ydym hefyd wedi llunio protocol drafft, fel sy'n ofynnol dan Ddeddf Llywodraeth Cymru 2006, ar wahanol rolau a chyfrifoldebau Aelodau etholaethol ac Aelodau rhanbarthol. Ochr yn ochr â'r

we have considered and advised on the question of Assembly Members employing family members. We have issued guidance on this matter and we have also considered and advised on the use of blog sites by Members. Most recently, we have been considering guidance to give effect to recommendation 15 of 'Getting it Right for Wales', the report of the independent review panel, which asked that Assembly Members be required to record the time involved in any additional employment.

One of the committee's major activities, and something of which I am especially proud, was the work that the committee undertook in relation to the National Assembly for Wales Commissioner for Standards Measure 2009. This was a key piece of work, and I am pleased by the high level of care and commitment shown by all to get this legislation through. This also happened to be the first Measure proposed by an Assembly committee. We began by considering the status of the commissioner in light of the recommendations made in the Woodhouse report in 2002 and the impact of the Government of Wales Act 2006, and concluded that we should propose a committee-led Measure to create a statutory post of commissioner for standards.

We undertook two consultation exercises in 2008 and received oral evidence from key stakeholders to inform the proposal. We then laid the proposed Measure and explanatory memorandum in March 2009. The Measure is of great significance to the people of Wales, and it will give them increased confidence in their elected representatives by enshrining in law the powers and independence of the Assembly's commissioner for standards. I was delighted when the Measure was granted Royal Approval in December 2009—arrangements are currently in place to appoint the first statutory commissioner.

It was also with great pride that, as Chair of the committee, I was able to share our experiences with the Northern Ireland Committee on Standards and Privileges,

materion hyn, yr ydym wedi ystyried a ddylai Aelodau'r Cynulliad gyflogi aelodau o'u teulu. Yr ydym wedi rhoi cyngor ac wedi cyhoeddi canllawiau ar y mater hwn. Yr ydym hefyd wedi ystyried defnydd Aelodau o safleoedd blog ac wedi rhoi cyngor ynghylch hynny. Yn fwyaf diweddar, yr ydym wedi bod yn ystyried canllawiau ynghylch gweithredu argymhelliad 15 yn 'Yn Gywir i Gymru', sef adroddiad y panel adolygu annibynnol, a oedd yn ei gwneud yn ofynnol i Aelodau'r Cynulliad gofnodi'r amser y maent yn ei dreulio ymgymryd ag unrhyw gyflogaeth ychwanegol.

Un o brif weithgareddau'r pwyllgor, a rhywbeth yr wyf yn arbennig o falch ohono, oedd y gwaith a wnaeth y pwyllgor mewn cysylltiad â Mesur Comisiynydd Safonau Cynulliad Cenedlaethol Cymru 2009. Yr oedd hwn yn ddarn allweddol o waith, ac yr wyf yn falch o'r gofal a'r ymrwymiad mawr a ddangoswyd gan bawb i sicrhau bod y ddeddfwriaeth hon yn mynd rhagddi. Fel mae'n digwydd, dyma oedd y Mesur cyntaf i gael ei gynnig gan un o bwyllgorau'r Cynulliad. Bu inni ddechrau drwy ystyried statws y comisiynydd yng ngoleuni'r argymhellion a wnaed yn adroddiad Woodhouse yn 2002 ac effaith Deddf Llywodraeth Cymru 2006, a daethpwyd i'r casgliad y dylem gynnig Mesur a arweinir gan bwyllgor i greu swydd statudol ar gyfer comisiynydd safonau.

Cynhaliwyd dau ymarfer ymgynghori yn 2008 a chasglwyd tystiolaeth lafar gan randdeiliaid allweddol i lywio'r cynnig. Yna cyflwynwyd y Mesur arfaethedig a'r memorandwm esboniadol ym mis Mawrth 2009. Mae'r Mesur o bwys sylweddol i bobl Cymru, a bydd yn rhoi mwy o hyder iddynt yn eu cynrychiolwyr etholedig drwy ddiogelu pwerau ac annibyniaeth comisiynydd safonau'r Cynulliad mewn cyfraith. Yr oeddwn wrth fy modd pan roddwyd Cymeradwyaeth Frenhinol i'r Mesur ym mis Rhagfyr 2009—mae trefniadau ar waith ar hyn o bryd i benodi'r comisiynydd statudol cyntaf.

Gyda balchder mawr hefyd, fel Cadeirydd y pwyllgor, y bu modd imi rannu ein profiadau gyda Phwyllgor Safonau a Breintiau Gogledd Iwerddon, a oedd yn cynnal ymchwiliad i

which was undertaking an inquiry into the appointment of an Assembly commissioner for standards.

Dirprwy Lywydd, I thank you for the opportunity to speak today, and I hope that this report will assure you and Members of the high priority that we and they attach to the maintenance of ethical standards within the National Assembly. I commend this report to the Assembly.

**Brynle Williams:** I would also like to thank the committee service, Jeff, and my colleagues. One of the most significant points to note is the absence of complaints being referred to the committee, which itself recognises, as the report notes, the seriousness with which Members regard their conduct and the respect that they have for the Welsh public who have elected them to serve here.

As well as recognising the committee's work in reviewing the code of conduct for Assembly Members and several other matters important to standards in public life in the Assembly, the most important work has been the Measure to establish a commissioner for standards, as Jeff, our Chair, pointed out, to ensure that this position would have the right powers and independence to perform its role, so that the Welsh public can have full confidence in the Assembly.

**Chris Franks:** I echo the Chair's comments and associate myself with his congratulations to the support staff.

4.40 p.m.

It is also right to highlight the leadership of the Chair and his wise counsel when dealing with challenging issues. We deal with sensitive matters, and the appropriate skills are required. Our concern is helping to prevent inappropriate behaviour and assist in maintaining and enhancing the reputation of the Assembly.

You have heard that much good work has been undertaken, such as the code of conduct, the complaints procedure and the protocol regarding constituency and regional

benodi comisiynydd safonau i'r Cynulliad.

Ddirprwy Lywydd, diolchaf ichi am y cyfle i siarad heddiw, a gobeithiaf y bydd yr adroddiad hwn yn eich sicrhau chi a'r Aelodau o'r flaenoriaeth uchel yr ydym ninnau a hwythau yn ei rhoi i'r gwaith o gynnal safonau moesegol yn y Cynulliad Cenedlaethol. Cymeradwyaf yr adroddiad hwn i'r Cynulliad.

**Brynle Williams:** Hoffwn innau ddiolch i wasanaeth y pwyllgorau, Jeff, a'm cyd-Aelodau. Un o'r pwyntiau pwysicaf i'w nodi yw'r ffaith nad oes cwynion yn cael eu cyfeirio at y pwyllgor, sydd ei hun yn cydnabod, fel y noda'r adroddiad, y modd y mae'r Aelodau'n cymryd eu hymddygiad o ddifrif, a'r parch sydd ganddynt tuag at bobl Cymru sydd wedi'u hethol i wasanaethu yma.

Yn ogystal â chydabod gwaith y pwyllgor wrth adolygu cod ymddygiad Aelodau'r Cynulliad a sawl mater arall sy'n bwysig i safonau ym mywyd cyhoeddus y Cynulliad, y gwaith pwysicaf fu'r Mesur i sefydlu comisiynydd safonau, fel y nododd Jeff, ein Cadeirydd, er mwyn sicrhau y byddai gan y swydd hon y pwerau a'r annibyniaeth gywir i gyflawni ei rôl, fel y gall pobl Cymru fod yn hollol hyderus yn y Cynulliad.

**Chris Franks:** Adleisiaf sylwadau'r Cadeirydd ac ategaf ei longyfarchiadau i'r staff cymorth.

Mae'n briodol hefyd tynnu sylw at arweinyddiaeth y Cadeirydd a'i gyngor doeth wrth ymdrin â materion heriol. Yr ydym yn ymdrin â materion sensitif, ac mae gofyn cael y sgiliau priodol. Ein gwaith ni yw helpu i atal ymddygiad amhriodol a helpu i gynnal a gwella enw da'r Cynulliad.

Yr ydych wedi clywed bod llawer o waith da wedi'i wneud, fel y cod ymddygiad, y weithdrefn gwyno a'r protocol ynghylch cyfrifoldebau Aelodau etholaethol a

responsibilities. However, I am pleased to say that we almost always—if not always—achieve our results by unanimous vote. There is very much a non-party political attitude in committee. However, that is not to say that we do not have more work ahead, and we certainly will not rest on our laurels. I know that some Members have issues that they want us to take forward, and we welcome that. Reviews are always necessary, but I hope that Members will agree that we can face the future with confidence based on the work of the past.

**Jenny Randerson:** The important thing about this debate is that there is so little to say. It has been a quiet and peaceful year, and we take that very much as a sign that Assembly Members take their role as elected representatives of the public seriously. The fact that we have spent the vast majority of our time this year looking at the issue of the commissioner for standards is a significant development. It places the Assembly in a much stronger position if there is more trouble in the future than there has been this year.

**Trish Law:** I read this annual report with interest in a matter of minutes, which does not say a lot, does it? However, there are a couple of points that I want to pick up. The report refers to the fact that, during the period covered by the report, May 2007 to the end of March 2010, the commissioner for standards of conduct has not referred any complaint to the Committee on Standards for Conduct. It goes on to say that the lack of admissible complaints indicates that Members' ethical standards in the conduct of Assembly business are taken seriously by Members. However, are committee members and other Assembly Members aware that complaints can be upheld by the commissioner, but not treated as admissible? I will give you an example, although I shall not name any names.

I recently had occasion to make a complaint that a Member had used Assembly resources in pursuance of his election campaign. I produced the necessary evidence to show that

rhanbarthol. Fodd bynnag, mae'n bleser gennyf ddweud ein bod yn cyflawni ein canlyniadau drwy bleidlais unfrydol bron bob tro—os nad bob tro. Ceir agwedd amhleidiol iawn yn y pwyllgor. Fodd bynnag, nid yw hynny'n golygu nad oes mwy o waith o'n blaenau, ac yn sicr, ni fyddwn yn gorffwys ar ein rhwyfau. Gwn fod gan rai Aelodau faterion yr hoffent inni ymdrin â hwy, a chrosawn hynny. Mae adolygiadau bob amser yn angenrheidiol, ond gobeithiaf y bydd yr Aelodau'n cytuno y gallwn wynebu'r dyfodol yn hyderus ar sail gwaith y gorffennol.

**Jenny Randerson:** Yr hyn sy'n bwysig am y ddadl hon yw bod cyn lleied i'w ddweud. Bu'n flwyddyn dawel a heddychlon, ac yr ydym yn ystyried hynny'n arwydd bod Aelodau'r Cynulliad yn cymryd eu rôl fel cynrychiolwyr etholedig y cyhoedd o ddifrif. Mae'r ffaith ein bod wedi treulio'r rhan fwyaf o'n hamser eleni yn ystyried mater y comisiynydd safonau yn ddatblygiad arwyddocaol. Mae'n rhoi'r Cynulliad mewn sefyllfa gryfach o lawer os bydd mwy o drafferth yn y dyfodol nag a fu eleni.

**Trish Law:** Darllenais yr adroddiad blynyddol hwn â chryn ddiddordeb mewn ychydig funudau, nad yw'n dweud llawer, onid yw? Fodd bynnag, mae ambell bwynt yr hoffwn ei drafod. Mae'r adroddiad yn cyfeirio at y ffaith nad yw'r comisiynydd safonau ymddygiad wedi cyfeirio unrhyw gŵyn at y Pwyllgor Safonau Ymddygiad yn ystod y cyfnod yr ymdrinnir ag ef yn yr adroddiad, sef mis Mai 2007 tan ddiwedd mis Mawrth 2010. Â'r adroddiad rhagddo i ddweud bod y diffyg cwynion derbyniadwy yn dangos bod safonau moesegol Aelodau wrth gynnal busnes y Cynulliad yn fater sy'n cael ei gymryd o ddifrif gan yr Aelodau. Fodd bynnag, a yw aelodau'r pwyllgor ac Aelodau eraill y Cynulliad yn ymwybodol bod modd i gŵyn beidio â chael ei thrin fel cwyn dderbyniadwy er iddi gael ei chadarnhau gan y comisiynydd? Rhoddaf enghraifft ichi, heb enwi neb.

Yn ddiweddar, cefais reswm i wneud cwyn bod Aelod wedi defnyddio adnoddau'r Cynulliad wrth gynnal ei ymgyrch etholiadol. Cyflwynais y dystiolaeth angenrheidiol i

the Member concerned had used Assembly headed writing paper bearing the Assembly logo and his Assembly e-mail account to further his political ends. I was told by the commissioner that the Member concerned had contacted the Assembly's Chief Operating Officer to apologise for his inappropriate use of resources, and had made arrangements to repay any costs that could be identified. The commissioner said that he had recommended to the Chair of the Committee on Standards of Conduct that, although a breach had been found, he considered this to be minor in nature and that no further action should be taken. The Chair of the committee agreed with this.

The point that I wish to make is that a complaint has been upheld but was considered to be so trivial in nature that it did not warrant further investigation or referral to the committee. I do not consider the use of Assembly resources to further an election campaign to be trivial, but that is another matter. So, it raises the question: how many complaints that are upheld are not referred to the Committee on Standards of Conduct?

**Angela Burns:** Will you give way?

**Trish Law:** No, Angela, I am sorry. The assumption on page 2, paragraph 5 that there is a lack of admissible complaints may not be true.

**The Deputy Presiding Officer:** Can I just stop you there, because I think that you are getting a bit too detailed? Can you wind up now please?

**Trish Law:** I do not want to pre-empt procedure, but I wish to make a couple of observations based on my recent experiences. While I acknowledge the need for the commissioner to be independent, he or she should be answerable to someone. I was not happy with the way in which my complaints to the current commissioner were dealt with, but I had no recourse to a third party. The commissioner must be independent, but he or she must also be accountable, and his or her actions must be seen to be transparent and above reproach. I could say plenty about the

ddangos bod yr Aelod dan sylw wedi defnyddio papur pennawd y Cynulliad a oedd yn cynnwys logo'r Cynulliad a'i gyfrif e-bost yn y Cynulliad i hybu ei achos gwleidyddol ei hun. Dywedodd y comisiynydd wrthyf fod yr Aelod dan sylw wedi cysylltu â Phrif Swyddog Gweithredu'r Cynulliad i ymddiheuro am ddefnyddio'r adnoddau mewn ffordd amhriodol, a'i fod wedi gwneud trefniadau i ad-dalu'r costau y gellid eu nodi. Dywedodd y comisiynydd ei fod wedi argymhell i Gadeirydd y Pwyllgor Safonau Ymddygiad, er bod y rheolau wedi'u torri, ei fod o'r farn nad oedd y digwyddiad yn un difrifol ac na ddylid cymryd unrhyw gamau pellach. Cytunodd Cadeirydd y pwyllgor ag ef.

Y pwynt yr hoffwn ei wneud yw bod cwyn wedi cael ei chadarnhau ond iddi gael ei hystyried mor ddibwys fel nad oedd yn cyfiawnhau ymchwiliad pellach nac yn cyfiawnhau cael ei chyfeirio at y pwyllgor. Nid wyf yn ystyried defnyddio adnoddau'r Cynulliad i gefnogi ymgyrch etholiadol yn ddibwys, ond mater arall yw hynny. Felly, mae'n codi'r cwestiwn: sawl cwyn a gaiff eu cadarnhau ond na chânt eu chyfeirio at y Pwyllgor Safonau Ymddygiad?

**Angela Burns:** A wnewch chi ildio?

**Trish Law:** Na wna, Angela, mae'n ddrwg gennyf. Mae'n bosibl nad yw'r dybiaeth ar dudalen 2, paragraff 5 sy'n nodi diffyg cwynion derbyniadwy, yn wir.

**Y Dirprwy Lywydd:** A allaf ofyn ichi dewi, oherwydd credaf eich bod yn mynd i ormod o fanylion? A allwch dynnu at y terfyn yn awr, os gwelwch yn dda?

**Trish Law:** Nid wyf am achub y blaen ar y weithdrefn, ond hoffwn nodi rhai sylwadau yn seiliedig ar fy mhrofiadau diweddar. Er fy mod yn cydnabod bod angen i'r comisiynydd fod yn annibynnol, dylai ef neu hi fod yn atebol i rywun. Nid oeddwn yn fodlon â'r ffordd yr ymdriniwyd â'm cwynion i'r comisiynydd presennol, ond nid oedd modd imi droi at drydydd parti am gymorth. Rhaid i'r comisiynydd fod yn annibynnol, ond rhaid iddo fod yn atebol, a rhaid dangos bod ei weithredoedd yn dryloyw ac yn ddi-fai. Gallwn ddweud digon am yr angen i adolygu

need to review procedures for dealing with complaints, but I will keep that for another day.

**Jeff Cuthbert** *rose*—

**Trish Law:** All that I will say at this stage is that I feel strongly that there should be dialogue between the Member making the complaint and the commissioner. In my recent dealings with him, I did not hear from the commissioner once. The decision letter that I received from him about my complaints was not even signed by him—

**The Deputy Presiding Officer:** Order. I am sorry, but I must stop you there. That is not a matter for today; if you have an issue, you must take it up elsewhere.

**Trish Law:** There are, as I have experienced, shortcomings in the current procedures, but I am pleased to see that the committee intends to review them and, hopefully, revise them.

**Jeff Cuthbert:** First, I express my thanks to Brynle, Chris and Jenny for their kind comments. I stress and remind Members that this is not a committee that is weighted to represent political parties; there is just one representative from each party, but we operate objectively and without regard to party affiliation. That is to the credit of our structures.

I was very uncomfortable with the points that you raised, Trish, because I am presenting the report of the Committee on Standards of Conduct; I am not dealing with any individual meetings or discussions that there may or may not have been with the Commissioner for Standards and I am certainly not dealing with any correspondence that he may have had with you. All that the committee is concerned with is complaints that the commissioner deems to be admissible and that are then referred to the committee. Complaints that are not referred to the committee are, by definition, not part of our work or our report.

gweithdrefnau ar gyfer ymdrin â chwynion, ond cadwaf hynny ar gyfer diwrnod arall.

**Jeff Cuthbert** *a gododd*—

**Trish Law:** Y cyfan a ddywedaf ar hyn o bryd yw fy mod yn teimlo'n gryf y dylai fod trafodaeth rhwng yr Aelod sy'n gwneud cwyn a'r comisiynydd. Yn fy mhrofiadau diweddar o ymwneud ag ef, ni chlywais gan y comisiynydd unwaith. Nid oedd y llythyr a gefais ganddo yn rhoi ei benderfyniad ynghylch fy nghwynion wedi'i lofnodi ganddo hyd yn oed—

**Y Dirprwy Lywydd:** Trefn. Mae'n ddrwg gennyf, ond rhaid imi ofyn ichi dewi. Nid yw hynny'n fater i'w drafod heddiw; os oes problem gennych, rhaid ichi ei chodi rywle arall.

**Trish Law:** Ceir diffygion yn y gweithdrefnau cyfredol, fel yr wyf wedi profi, ond yr wyf yn falch o weld bod y pwyllgor yn bwriadu eu hadolygu, a'u diwygio, gobeithio.

**Jeff Cuthbert:** Yn gyntaf, diolchaf i Brynle, Chris a Jenny am eu sylwadau caredig. Hoffwn bwysleisio ac atgoffa'r Aelodau nad yw'r pwyllgor hwn yn bwyllogor sy'n cynnwys nifer benodol o gynrychiolwyr o bob plaid wleidyddol; dim ond un cynrychiolydd a geir o bob plaid, ond yr ydym yn gweithredu'n wrthrychol a heb ymlyniad gwleidyddol. Rhaid canmol ein strwythurau am hynny.

Yr oeddwn yn anesmwyth iawn gyda'r pwyntiau a godwyd gennych, Trish, oherwydd yr wyf yn cyflwyno adroddiad y Pwyllgor Safonau Ymddygiad; nid wyf yn ymdrin ag unrhyw gyfarfodydd unigol neu drafodaethau a gafwyd gyda'r Comisiynydd Safonau, neu beidio, ac yn sicr nid wyf yn ymdrin ag unrhyw ohebiaeth y gallai fod wedi'i hanfon atoch. Y cyfan y mae'r pwyllgor yn ymdrin ag ef yw'r cwynion sy'n dderbyniadwy ym marn y comisiynydd, ac a gyfeirir at y pwyllgor wedi hynny. Nid yw'r cwynion na chânt eu cyfeirio at y pwyllgor, drwy ddiffiniad, yn rhan o'n gwaith na'n hadroddiad.

**The Deputy Presiding Officer:** The proposal is to note the committee's annual report. Is there any objection? I see that there is not. The motion is therefore agreed in accordance with Standing Order No. 7.35.

*Derbyniwyd y cynnig.  
Motion agreed.*

**Y Dirprwy Lywydd:** Y cynnig yw bod adroddiad y pwyllgor yn cael ei nodi. A oes gwrthwynebiad? Gwelaf nad oes. Caiff y cynnig ei dderbyn yn unol â Rheol Sefydlog Rhif 7.35, felly.

### **Dadl ar Gaza Debate on Gaza**

**The Deputy Presiding Officer:** In accordance with Standing Order No. 7.19(iii) I have not selected the amendment to the motion.

**Rhodri Glyn Thomas:** Cynigiaf y cynnig canlynol yn fy enw i ac enwau Alun Davies, David Melding a Jenny Randerson. Cynigiaf fod

*Cynulliad Cenedlaethol Cymru:*

1. yn nodi'r pryderon a godwyd yng Nghymru ynghylch y ffaith bod Israel wedi rhyng-gipio'r llynges fach Free Gaza, ac yn gresynu'n fawr y bywydau a gollwyd yn sgîl y weithred hon;

2. yn credu y dylid cynnal ymchwiliad annibynnol, diduedd, credadwy llawn i'r digwyddiadau hyn; ac yn

3. nodi'r gefnogaeth eang yng Nghymru i benderfyniad rhif 1860 Cyngor Diogelwch y Cenhedloedd Unedig. (NDM4494)

Ar adegau, er eu bod yn adegau prin, mae cyfrifoldeb ar y Cynulliad i gynnal dadl yn y Siambr ynghlŷn â materion rhyngwladol. Mae hynny am fod y materion hynny o bwys i bobl Cymru a bod teimladau cryf ymysg poblogaeth Cymru amdanynt. Mae hynny'n wir ynghlŷn â'r ymosodiad gan lynges Israel ar gychod a oedd yn ceisio mynd â chymorth dyngarol i Gaza. Fel mae'r cynnig hwn yn datgan, mae teimlad cryf yng Nghymru bod angen ymchwiliad annibynnol i'r digwyddiadau hyn. Yr ydym i gyd yn gresynu y collwyd bywydau ac yr ydym yn cefnogi galwad y Cenhedloedd Unedig i godi'r gwarchae ar Gaza o'r môr. Yr wyf yn ddiolchgar i Alun Davies, Jenny Randerson a

**Y Dirprwy Lywydd:** Yn unol â Rheol Sefydlog Rhif 7.19(iii), nid wyf wedi dethol y gwelliant i'r cynnig.

**Rhodri Glyn Thomas:** I move the following motion in my name and the names of Alun Davies, David Melding and Jenny Randerson. I move that

*the National Assembly for Wales:*

1. notes the concerns raised in Wales regarding the Israeli interception of the Free Gaza flotilla, and deeply regrets the loss of life resulting from this action;

2. believes that these events must be investigated by a full, credible, impartial and independent inquiry; and

3. notes the widespread support in Wales for the United Nations Security Council resolution No. 1860. (NDM4494)

Sometimes, though rarely, there is a responsibility on the Assembly to debate international affairs in the Chamber. That is because those issues matter to people in Wales and there are strong feelings about them among the people of Wales. That is true of the raid by the Israeli navy on boats that were trying to get humanitarian assistance to Gaza. As the motion states, there is strong feeling in Wales that there needs to be an independent inquiry into these events. We all regret the loss of life and we support the United Nations' call to lift the blockade on Gaza from the sea. I am grateful to Alun Davies, Jenny Randerson and David Melding for their co-operation in preparing this

David Melding am eu cydweithrediad wrth lunio'r cynnig hwn ac am eu cefnogaeth iddo. Yr wyf yn digwydd bod yn agor y drafodaeth, bydd David Melding yn cau'r ddadl, a bydd Alun a Jenny yn cyfrannu yn ystod y ddadl.

motion and for their support for it. I happen to be opening the discussion, David Melding will close the debate, and Alun and Jenny will contribute during the debate.

Y cyfan y gallaf ei wneud yw sôn am fy mhrofiad o fod yn Gaza. Nid dyma'r lle priodol i fanylu ar hanes y tyndra sydd wedi bod yn y dwyrain canol na cheisio cynnig atebion iddo. Cefais gyfle ym mis Tachwedd 2008 i fynd i Gaza mewn cwch. Cawsom ein herio gan lynges Israel, ond, yn ffodus, ni chawsom ein hatal ac ni ymosodwyd ar ein cwch, a chyraeddasom Gaza drwy'r blocâd. Yr hyn a'm tarodd yn syth pan gyrhaeddais yno oedd bod y Palesteiniaid yn Gaza o dan warchae.

All I can do is talk about my experience of being in Gaza. This is not the appropriate place to go into detail on the history of the tension in the middle east or to try to offer solutions. I had the opportunity in November 2008 to go to Gaza by boat. We were challenged by the Israeli navy, but, fortunately, we were not stopped, our boat was not attacked and we arrived at Gaza through the blockade. What struck me immediately when I arrived was that the Palestinians in Gaza are under siege.

4.50 p.m.

Mae poblogaeth o 1.4 miliwn o Balesteiniaid yn byw mewn ardal ddaearyddol fach—mae'r darn o dir ryw 40 km o hyd a 9.5 km o led. Felly, darn bach iawn o dir ydyw, gyda'r holl bobl yna wedi'u gwasgu i mewn iddo. Nid oes yno gyflenwad cyson o ddŵr glân ac mae problemau dybryd o ran carthffosiaeth a'r economi leol, ac nid yw gwres na golau yn cyrraedd y bobl yn gyson. Cefais gyfle i ymweld ag ysbyty, ond nid oedd y math o bethau y byddem yn eu cymryd yn ganiataol—hynny yw, y pethau sylfaenol o ran gwasanaeth iechyd—i'w gweld yno. Yr oedd ward argyfwng yno heb unrhyw offer argyfwng. Y cyfan oedd yno oedd gwelyau ac ychydig o offer i drin pobl. Yr oeddent yn cwyno yn yr ysgolion nad oedd ganddynt ddigon o bapur na phensiliau er mwyn galluogi'r plant i gael eu haddysgu.

A population of 1.4 million Palestinians live in a small geographic area—the slice of land is some 40 km long and 9.5 km wide. Therefore, it is a very small piece of land, with all those people squeezed into it. There is no constant supply of clean water, there are pressing problems with sewerage and the local economy, and heat and light do not reach the people consistently. I had the opportunity to visit a hospital, but the sorts of things that we take for granted—essential elements of a health service—were not to be seen. There was an emergency ward without any emergency equipment. All that was there were beds and a few items of equipment to treat people. They were complaining in the schools that they did not have enough paper or pencils to enable children to be educated.

Yr oedd yn wlad, ac yr oedd wedi bod yn wlad llwyddiannus. Yr oeddwn yn aros mewn gwesty a oedd yn amlwg wedi bod yn westy moethus, ond nid oedd wedi cael ei ddefnyddio ers rhai blynyddoedd erbyn i ni gyrraedd, ac yr oedd y cyfleusterau wedi dirywio'n enbyd. Yr oedd gwarchae gwirioneddol yno a dim ond ychydig o gymorth dyngarol a oedd yn cyrraedd y wlad a'i thrigolion.

It was a country, and it had been a successful country. I was staying in a hotel that had obviously been a luxury hotel, but which had not been used for many years by the time that we got there, and the facilities had gone into a terrible decline. There really was a siege there and only a little humanitarian aid was reaching the country and its inhabitants.

Pan adewais, adeg y Nadolig 2008, yr oeddwn yn teimlo'n drist am y sefyllfa, ond,

When I left, around Christmas 2008, I felt sad about the situation, but, if you recall, in early



os cofiwch, yn gynnar yn 2009, bu ymosodiad ar Balesteina gan luoedd Israel, pan laddwyd dros 1,000 o Balesteiniaid, gan gynnwys 300 o blant. Cafodd naw Israeliad eu lladd yn yr ymosodiad, ac er bod unrhyw golli bywyd i resynu ato, rhaid bod yn gymesur.

The issue here is proportionality with regard to the way in which the Israeli state acted in this recent attack on the flotilla and the consequential loss of life, in the earlier attack in 2009, and in the way that the Palestinians in the Gaza strip have been under siege and have not been able to acquire even the basic requirements of everyday life. It is therefore important—and I hope that we can be united on this—not to apportion blame or to try to decide the future of the middle east—that should be avoided—but to say that we believe that the actions of the Israeli state have not been proportional in this or other instances. We need to get to a situation in the middle east where there is an opportunity for peace and for the Palestinian people to have a standard of life that they deserve. I can say from my experience of being there for a very short time that there was no bitterness among the Palestinian people; all they want is justice. Therefore, I believe that what we are trying to do in this debate is to echo that call for justice, and there is a strong feeling of support in Wales for the Palestinian cause because of that.

**Darren Millar:** I understand that my amendment has been deselected, and I understand the reasons for that.

While the precise details remain uncertain, the loss of life incurred during Israel's raid on the flotilla bound for Gaza was, without question, deeply tragic, and all sides involved must consider what more they could have done to prevent such a terrible outcome. Answers must be sought and lessons learned. However, it is imperative that this event does not derail the ongoing peace talks in search of a two-state solution that achieves a viable and sovereign Palestinian state, living alongside a secured Israel with her right to live in peace and security and recognised by all of her

2009, there was an attack on Palestine by Israeli forces that killed over 1,000 Palestinians, including 300 children. Nine Israelis were killed in the attack, and although any loss of life is regrettable, one must be proportionate.

Yr hyn sydd dan sylw yn y fan hon yw cymesuredd o ran y ffordd y bu i wladwriaeth Israel weithredu yn yr ymosodiad diweddar hwn ar y llynges fach a'r bywydau a gollwyd o ganlyniad i hynny, yn yr ymosodiad cynharach yn 2009, ac yn y ffordd y mae'r Palesteiniaid ar lain Gaza wedi bod dan warchae, heb allu sicrhau'r gofynion sylfaenol hyd yn oed ar gyfer bywyd pob dydd. Felly, mae'n bwysig—a gobeithiaf y gallwn ni i gyd fod yn gytún ar hyn—peidio â bwrw bai na cheisio penderfynu ar ddyfodol y dwyrain canol—dylid osgoi hynny—ond ein bod yn dweud ein bod o'r farn nad yw gweithredoedd gwladwriaeth Israel wedi bod yn gymesur ar yr achlysur hwn nac ar achlysuron eraill. Mae angen inni gyrraedd sefyllfa yn y dwyrain canol lle ceir cyfle i sicrhau heddwch a chyfle i bobl Palesteina gael safon byw y maent yn ei haeddu. Gallaf ddweud o'm profiad personol o fod yno am amser byr iawn nad oedd unrhyw chwerwder ymhlith y Palesteiniaid; cyfiawnder yw'r unig beth y maent am ei gael. Felly, credaf mai'r hyn yr ydym yn ceisio ei wneud yn y ddadl hon yw adleisio'r cais hwnnw am gyfiawnder, a cheir teimlad cryf o gefnogaeth yng Nghymru i achos y Palesteiniaid oherwydd hynny.

**Darren Millar:** Deallaf fod fy ngwelliant wedi'i ddad-ddewis, a deallaf y rhesymau dros hynny.

Er nad yw'r union fanylion yn glir, yn ddi-os yr oedd y bywydau a gollwyd yn ystod ymosodiad Israel ar y llynges fach a oedd ar ei ffordd i Gaza, yn drychinebus iawn, ac mae'n rhaid i bawb dan sylw ystyried beth y gallent fod wedi'i wneud i atal canlyniad mor ofnadwy. Rhaid ceisio atebion a dysgu gwersi. Fodd bynnag, mae'n hollbwysig nad yw'r digwyddiad hwn yn ansefydlogi'r trafodaethau heddwch sy'n mynd rhagddynt i geisio canfod ateb dwy wladwriaeth sy'n sicrhau gwladwriaeth Balesteinaidd sofran a hyfyw, sy'n cyd-fyw ochr yn ochr ag Israel

neighbours.

That is why I warmly welcomed the announcement by Israel on Monday, 15 June of an internal inquiry into the unfortunate events on the Mavi Marmara. This panel of three leading Israeli legal officials will be overseen by two international observers and this is being granted considerable investigative powers. The presence of the former First Minister of Northern Ireland, Lord David Trimble, is particularly commendable. As a Nobel Peace prize winner for his role in the historic 1998 Good Friday agreement, Lord Trimble is, in my opinion, a highly respected individual and held in high regard by many across the middle east after his many visits to the region to discuss conflict resolution. This investigation is of the utmost necessity and I trust that it will be carried out with full impartiality and in a timely manner—of course, it would be expected to do that by the international community.

Since 2007, both Israel and Egypt—we must remember that Egypt also has a border with Gaza—have imposed a blockade on goods and materials coming in and out of the Gaza strip. Given the neighbourhood that they are living in, it is easy to see why they felt that this was the best course of action at that time. Israel is currently providing 15,000 tonnes of humanitarian aid to Gaza per week. I do not doubt or question the fact that there is a humanitarian crisis in Gaza, but we are now witnessing in Israel the beginning of a process of identifying ways to ensure that even larger amounts of aid reach the Gaza strip. The need for unimpeded provision of food and fuel was enshrined in the UN security council resolution 1860, which is referred to in today's motion. This resolution has been strongly supported by Members here and, therefore, we can welcome the announcement by the Israeli Government that it will be improving the flow of civilian goods into the Gaza strip.

The British Government ought to be actively supporting Israel in its efforts to stop the

ddiogel gyda'i hawl i fyw mewn heddwch a diogelwch ac sy'n cael ei chydnabod gan bob un o'i chymdogion.

Dyna pam y croesewais y cyhoeddiad a wnaed gan Israel ddydd Llun, 15 Mehefin ynglŷn ag ymchwiliad mewnol i'r digwyddiadau anffodus ar y Mavi Marmara. Bydd y panel hwn o dri o swyddogion cyfreithiol blaenllaw o Israel yn cael ei oruchwylio gan ddau arsylwr rhyngwladol a rhoddwyd pwerau ymchwilio sylweddol iddo. Mae presenoldeb cyn-Brif Weinidog Gogledd Iwerddon, yr Arglwydd David Trimble, i'w ganmol yn fawr. Fel enillydd gwobr Heddwch Nobel am ei gyfraniad i gytundeb hanesyddol Dydd Gwener y Groglith 1998, mae'r Arglwydd Trimble, yn fy marn i, yn unigolyn uchel ei barch ac mae llawer o bobl ar draws y dwyrain canol yn ei barchu yn dilyn ei ymweliadau niferus â'r rhanbarth er mwyn trafod ateb i'r gwrthdaro. Mae'r ymchwiliad hwn yn hollol angenrheidiol a hyderaf y caiff ei gynnal mewn dull cwbl ddiuedd ac amserol—wrth gwrs, byddai'r gymuned ryngwladol yn disgwyl i hynny ddigwydd.

Er 2007, mae Israel a'r Aifft—rhaid inni gofio bod yr Aifft yn ffinio â Gaza hefyd—wedi gweithredu blocâd sy'n rhwystro nwyddau a deunyddiau rhag cyrraedd a gadael llain Gaza. O ystyried yr ardal y maent yn byw ynddi, mae'n hawdd deall pam yr oeddent yn credu mai dyna'r ffordd orau o weithredu ar y pryd. Ar hyn o bryd, mae Israel yn darparu 15,000 o dunelli o gymorth dyngarol i Gaza bob wythnos. Nid wyf yn amau nad oes argyfwng dyngarol yn Gaza, nac yn cwestiynu'r ffaith, ond yn awr, yn Israel, yr ydym yn gweld dechrau proses o adnabod ffyrdd o sicrhau bod mwy fyth o gymorth yn cyrraedd llain Gaza. Mae'r angen i fwyd a thanwydd gael eu darparu heb rwystr wedi'i ddiogelu ym mhenderfyniad rhif 1860 cyngor diogelwch y Cenedloedd Unedig, y cyfeirir ato yn y cynnig heddiw. Mae'r penderfyniad hwn wedi cael cefnogaeth gref gan yr Aelodau yma ac, felly, gallwn groesawu'r cyhoeddiad gan Lywodraeth Israel y bydd yn gwella'r llif o nwyddau i lain Gaza ar gyfer y boblogaeth sifil.

Dylai Llywodraeth y DU fod yn rhoi pob cefnogaeth i Israel yn ei hymdrechion i roi'r

blockade, rather than demanding that all borders are opened indiscriminately. We need to begin to understand the complexities of Israel's predicament. Israel is straddling a line between humanitarian responsibility and real concerns about its national security. The international community, instead of grandstanding on the issue, should take steps to help to provide real solutions to the problem of smuggling arms into Gaza.

While I strongly support the current efforts to ease the blockade of Gaza, it is imperative that all parties adhere to the full terms of the UN security council resolution 1860. Before Members choose to come back at me and get on a high horse, let us remind ourselves that Hamas continued to breach other parts of that security council resolution. The resolution stipulated that Hamas must stop all violence against Israel and that it should cease all smuggling of contraband, arms and weaponry. This has clearly not happened.

**Rhodri Glyn Thomas:** I would not want to try to justify all the actions of Hamas, but can you take my point of proportionality on board? Is it not fair to say that, in respect of proportionality, the actions of Israel have been far greater than anything the Palestinians have done to Israel or the Israeli state?

**Darren Millar:** I take on board the point about proportionality and it is important that when there is a response, it is proportionate to the attacks that have been made against Israel. However, we have to remember that while we have been persuaded—or perhaps many of us in the west have been persuaded—that members of Hamas are victims of Israeli oppression, over 5,000 missiles have been indiscriminately fired into Israel by Hamas since 2007.

Terrorists also continue to infiltrate Israel from Gaza via complex tunnelling systems to execute some horrific terror attacks. These are the very same tunnels that enable Hamas to illegally smuggle the weapons and explosives supplied by the backers of the Hamas regime—Iran and Syria—to be used

gorau i'r blocâd, yn hytrach na mynnu bod yr holl ffiniau'n cael eu hagor yn ddiwahân. Mae angen inni ddechrau deall holl gymhlethdod y cyfyng-gyngor sy'n wynebu Israel. Ar y naill law, mae gan Israel gyfrifoldeb dyngarol ac ar y llaw arall mae'n pryderu o ddifrif am ei diogelwch gwladol. Yn hytrach na dangos ei hun ar y mater, dylai'r gymuned ryngwladol gymryd camau i helpu i ddarparu atebion gwirioneddol i'r broblem o smyglo arfau i Gaza.

Er fy mod yn cefnogi'r ymdrechion presennol i leddfu'r blocâd ar Gaza yn fawr, mae'n hollbwysig i'r holl bartïon perthnasol gadw at delerau llawn penderfyniad 1860 cyngor diogelwch y Cenhedloedd Unedig. Cyn i Aelodau ddadlau yn ôl a mynd ar gefn eu ceffyl, gadewch inni ein hatgoffa ein hunain bod Hamas wedi parhau i dorri rhannau eraill o'r penderfyniad hwnnw gan y cyngor diogelwch. Yr oedd y penderfyniad yn datgan bod yn rhaid i Hamas roi terfyn ar yr holl drais yn erbyn Israel ac y dylai roi'r gorau i smyglo nwyddau gwaharddedig ac arfau. Mae'n amlwg nad yw hynny wedi digwydd.

**Rhodri Glyn Thomas:** Nid wyf am geisio cyfiawnhau holl weithredoedd Hamas, ond a allwch dderbyn fy mhwynt am gymesuredd? Onid yw'n deg dweud, yn nhermau cymesuredd, bod gweithredoedd Israel wedi bod yn llawer mwy difrifol na dim y mae'r Palesteiniaid wedi'i wneud i Israel neu i wladwriaeth Israel?

**Darren Millar:** Yr wyf yn derbyn y pwynt am gymesuredd a phan fydd ymateb, mae'n bwysig ei fod yn gymesur i'r ymosodiadau a wnaed yn erbyn Israel. Fodd bynnag, rhaid inni gofio er inni gael ein darbwylllo—neu efallai i lawer ohonom yn y gorllewin gael ein darbwylllo—bod aelodau Hamas yn dioddef gormes Israel, bod Hamas wedi tanio mwy na 5,000 o daflegrau at Israel er 2007, a hynny ar hap.

Mae terfysgwyr hefyd yn parhau i dreiddio i Israel o Gaza drwy systemau cymhleth o dwnelau er mwyn cyflawni ymosodiadau terfysgol erchyll. Y twnelau hyn hefyd sy'n galluogi Hamas i smyglo arfau a ffrwydradau'n anghyfreithlon. Caiff y rhain eu cyflenwi gan gefnogwyr cyfundrefn

against Israeli citizens and territory. To those who argue that Hamas should be brought into the fold of the international community, I say, 'Do not be so naive'. Hamas does not want peace with Israel or the west, it blatantly violates security council resolutions and it colludes with the rogue states of Syria and Iran.

I know that time is short, Deputy Presiding Officer, but I want to close by saying that I do not think that we, in the west, or the international community, should do anything that emboldens Hamas to pursue its course of aggression against Israel. We need to bear in mind the need for Israel to have its secure borders recognised, and for the international community, including those countries in the middle east that do not currently recognise the right of Israel to exist, to ensure that they are recognised in future. Of course, I will support the motion because I think that it is the right thing to do.

5.00 p.m.

**Alun Davies:** Like Rhodri Glyn Thomas, I am glad that the Assembly is able to find time on occasion to discuss these issues of international importance. Of course, in Wales, we have a long tradition of doing so. In particular, the Welsh Labour movement throughout its history has been internationalist in outlook and action, which we can all be proud of.

In the debate this afternoon, like Rhodri Glyn, I will be basing my contribution on personal experience of work in this region. Darren, I do not want to frame this afternoon's debate according to whether we support Hamas or Israel, because I think that that misses the importance of what is happening here. It also means falling somewhat naively into a trap. I do not like Hamas as an organisation. I do not like what it stands for or the philosophy that underpins it. I have spoken to people who support it, and I have not found them to be people with whom I feel entirely comfortable, to be quite

Hamas—Iran a Syria—i'w defnyddio yn erbyn dinasyddion a thiriogaeth Israel. I'r rhai sy'n dadlau y dylid derbyn Hamas i mewn i'r gymuned ryngwladol, yr wyf yn dweud, 'Peidiwch â bod mor naif'. Nid yw Hamas am weld heddwch gydag Israel na'r gorllewin, mae'n haerllug yn y modd y mae'n gweithredu'n groes i benderfyniadau'r cyngor diogelwch ac mae'n cynllwynio gyda gwladwriaethau Syria ac Iran, y maent ill dwy yn amharchu gwledydd eraill wrth weithredu'n rhyngwladol.

Gwn fod amser yn brin, Ddirprwy Lywydd, ond hoffwn orffen drwy ddweud nad wyf yn credu y dylem ni, yn y gorllewin, na'r gymuned ryngwladol, wneud dim sy'n annog Hamas i barhau â'i ymgyrch o ymosod ar Israel. Mae angen inni gofio'r angen i ffiniau diogel Israel gael eu cydnabod, ac i'r gymuned ryngwladol, gan gynnwys y gwledydd hynny yn y dwyrain canol nad ydynt yn cydnabod hawl Israel i fodoli ar hyn o bryd, sicrhau eu bod yn cael eu cydnabod yn y dyfodol. Wrth gwrs, byddaf yn cefnogi'r cynnig oherwydd credaf mai dyna'r peth cywir i'w wneud.

**Alun Davies:** Fel Rhodri Glyn Thomas, yr wyf yn falch bod y Cynulliad yn gallu neilltuo amser yn achlysurol i drafod y materion hyn sydd o bwysigrwydd rhyngwladol. Wrth gwrs, yng Nghymru, mae gennym draddodiad hir o wneud hynny. Yn benodol, bu mudiad Llafur Cymru yn fudiad rhyng-genedlaetholaidd ei agwedd a'i natur, drwy gydol ei hanes, ac mae hynny'n rhywbeth y gallwn ni i gyd ymfalchïo ynddo.

Yn y ddadl y prynhawn yma, byddaf innau, fel Rhodri Glyn, yn seilio fy nghyfraniad ar brofiad personol o weithio yn y rhanbarth hwn. Darren, nid wyf am i'r ddadl hon y prynhawn yma droi'n ddadl ynghylch a ydym yn cefnogi Hamas neu Israel, oherwydd credaf fod hynny'n colli pwysigrwydd yr hyn sy'n digwydd yn y fan hon. Mae hefyd yn golygu disgyn i drap mewn modd braidd yn naif. Nid wyf yn hoffi Hamas fel sefydliad. Nid wyf yn hoffi'r hyn y mae'n ei gynrychioli na'r athroniaeth sy'n sail iddo. Yr wyf wedi siarad â phobl sy'n ei gefnogi, ac wedi gweld nad ydynt yn bobl yr wyf wedi

frank with you. Some of the things that they say about the Jewish people and the Israeli state are wholly unacceptable, and I think that it is an act of terrible naivety on the part of many people on the left, I must say, to believe that it is a group of freedom fighters. It is not. Hamas is as opposed to the way we live here as it is to the Israeli state. Therefore, we need to be very careful about how we set the terms of the debate.

However, that does not allow the Israeli state to get away with some of the most brutal war crimes known in recent times. Hamas is a pretty awful organisation, I have to say. It has the democratic legitimacy of having won an election, although I guess that that had more to do with the corruption of the previous administration than any commitment to the wider intellectual or philosophical aims of Hamas. However, the actions of the Israeli state betray much of the history of the Israeli people on some of these issues. As someone who has worked with Palestinian refugees and in the occupied territories, I have seen at first hand the terrible cruelty exercised almost daily by Israeli soldiers against children and defenceless civilians. They have executed some of the most appalling crimes. It is not good enough to say that the fact that Hamas is a terrorist organisation justifies the collective punishment of 1.5 million people. That is unacceptable. It is wrong under international law and it is morally wrong, and we here should have the opportunity to say that that action is not acceptable in any state or any Government without being accused either of anti-Semitism or of supporting an organisation with which we have virtually nothing in common. We must have the ability to criticise the actions of the Israeli Government.

I know that other people in the Chamber have been invited to take part in the flotillas. I thought that they were foolish to take part in that action. I thought that they were being deliberately provocative, creating a crisis and a confrontation with the Israeli Government.

teimlo'n gwbl gyfforddus yn eu cwmni, a dweud y gwir. Mae rhai o'r pethau y maent yn eu dweud am yr Iddewon a gwladwriaeth Israel yn gwbl annerbyniol, a chredaf ei bod yn naif iawn ar ran llawer o'r bobl ar y chwith, mae'n rhaid dweud, i gredu mai grŵp o bobl sy'n ymladd dros ryddid ydyw. Nid yw hynny'n wir. Mae Hamas yn gwrthwynebu'r ffordd yr ydym ni'n byw yn y wlad hon lawn cymaint ag y mae'n gwrthwynebu gwladwriaeth Israel. Felly, mae angen inni fod yn ofalus iawn ynglŷn â'r ffordd yr ydym yn llywio'r ddadl.

Fodd bynnag, nid yw hynny'n caniatáu i wladwriaeth Israel beidio â chael ei chosbi am rai o'r troseddau rhyfel mwyaf ciaidd a welwyd mewn hanes diweddar. Mae Hamas yn sefydliad digon ofnadwy, rhaid imi ddweud. Mae ganddo gyfreithlondeb democrataidd am iddo ennill etholiad, ond yr wyf yn amau mai'r ffaith bod y weinyddiaeth flaenorol yn llwgr sydd i gyfrif am hynny, yn hytrach nag unrhyw ymrwymiad i nodau deallusol neu athronyddol ehangach Hamas. Fodd bynnag, mae gweithredoedd gwladwriaeth Israel yn datgelu llawer o hanes pobl Israel ar rai o'r materion hyn. Fel rhywun sydd wedi gweithio gyda ffoaduriaid Palesteinaidd ac yn y tiriogaethau dan oresgyniad, yr wyf wedi gweld dros fy hun y creulondeb ofnadwy y mae milwyr Israel yn ei ddangos bron pob dydd tuag at blant a dinasyddion diamddiffyn. Maent wedi cyflawni rhai o'r troseddau mwyaf erchyll. Nid yw'n ddigon da dweud bod y ffaith bod Hamas yn sefydliad terfysgol yn cyfiawnhau cosbi 1.5 miliwn o bobl. Mae hynny'n annerbyniol. Mae'n beth drwg dan gyfraith ryngwladol ac mae'n beth drwg o safbwynt moesol, a dylem ni, yn y fan hon, gael cyfle i ddweud nad yw'r gweithredoedd yn dderbyniol mewn unrhyw wladwriaeth nac unrhyw Lywodraeth heb gael ein cyhuddo o wrth-Semitiaeth neu o gefnogi sefydliad nad oes gennym bron dim yn gyffredin ag ef. Rhaid inni allu beirniadu gweithredoedd Llywodraeth Israel.

Gwn fod pobl eraill yn y Siambr wedi cael gwahoddiad i fod yn rhan o'r llyngesau bach. Yr oeddwn yn credu eu bod yn ffôl i gymryd rhan yn y gweithredu hwnnw. Yr oeddwn yn credu eu bod yn ymddwyn mewn modd herfeiddiol yn fwiadol, gan greu argyfwng a

I thought that they were wrong to do so. However, that does not justify a Government raiding unarmed civilian vessels in international waters and killing people on board. That is piracy, and we must say that very clearly. It is not acceptable.

I hope that we will have a good debate this afternoon and that we can have an ongoing discussion. I hope that it will be a reasonable discussion that recognises the suffering on both sides of the divide in the middle east over the past 50 years or so. The circumstances that led to the creation of the Israeli state were a crisis in the history of the Jewish people. There is widespread recognition that many people had responsibility for allowing that to take place. We must stand firm to ensure the continued security of the Israeli state. We must do that.

When I see states such as Iran seeking to have nuclear weapons, the real prospect of another Jewish holocaust is horrible and we must stand firmly against that. However, at the same time, we cannot allow the Israeli state to act as a war criminal and get away with some of the most brutalising examples of action against a civilian population.

**Jenny Randerson:** This latest event has a sad and terrible background. It is a tragedy of 60 years in the making. The combination of population density, a lack of basic amenities, and the very high percentage of refugees has caused a situation to develop in which Gaza is now, in effect, an open prison.

It is important to remember that refugees have rights, and that the people whom we are talking about have rights recognised in international law. The problem is that the international community has not spent enough time and attention ensuring that those rights are upheld and finding a way out of the impasse. The important thing here is that the latest incident has to be seen as a way forward rather than yet one more occurrence

gwrthdaro gyda Llywodraeth Israel. Yr oeddwn yn credu eu bod yn anghywir i wneud hynny. Fodd bynnag, nid yw hynny'n cyfiawnhau ymosodiad Llywodraeth ar longau sy'n cludo dinasyddion heb arfau mewn dyfroedd rhyngwladol a lladd pobl ar fwrdd y llongau hynny. Môr-ladrad yw hynny, a rhaid inni ddatgan hynny'n glir iawn. Mae'n annerbyniol.

Gobeithiaf y byddwn yn cael dadl dda y prynhawn yma ac y gallwn barhau â'r drafodaeth yn y dyfodol. Gobeithiaf y bydd yn drafodaeth resymol sy'n cydnabod y dioddefaint ar y ddwy ochr yn y dwyrain canol dros yr 50 mlynedd ddiwethaf. Yr oedd yr amgylchiadau a arweiniodd at greu gwladwriaeth Israel yn argyfwng yn hanes yr Iddewon. Ceir cydnabyddiaeth eang bod llawer o bobl wedi bod yn gyfrifol am ganiatáu i hynny ddigwydd. Rhaid inni sefyll yn gadarn er mwyn sicrhau y bydd gwladwriaeth Israel yn parhau'n ddiogel. Rhaid inni wneud hynny.

Pan welaf wladwriaethau fel Iran yn ceisio cael arfau niwclear, mae'r posibilrwydd gwirioneddol y gallem weld yr Iddewon yn dioddef holocost arall yn erchyll, a rhaid inni sefyll yn gadarn yn erbyn hynny. Fodd bynnag, ar yr un pryd, ni allwn ganiatáu i wladwriaeth Israel weithredu fel troseddwr rhyfel a pheidio â chael ei chosbi am rai o'r enghreifftiau mwyaf ciaidd o weithredu yn erbyn poblogaeth sifil.

**Jenny Randerson:** Mae cefndir trist ac ofnadwy i'r digwyddiad diweddaraf hwn. Mae'n drasiedi sydd wedi'i chreu dros 60 mlynedd. Mae'r cyfuniad o ddwysedd poblogaeth, diffyg amwynderau sylfaenol, a'r ganran uchel iawn o ffoaduriaid wedi achosi i sefyllfa ddatblygu sy'n golygu bod Gaza, i bob pwrpas, yn garchar agored erbyn hyn.

Mae'n bwysig cofio bod gan ffoaduriaid hawliau, a bod gan y bobl yr ydym wedi bod yn eu trafod hawliau sy'n cael eu cydnabod gan gyfraith ryngwladol. Y broblem yw nad yw'r gymuned ryngwladol wedi rhoi digon o amser a sylw i sicrhau bod yr hawliau hynny'n cael eu parchu a chanfod ffordd allan o'r sefyllfa amhosibl hon. Y peth pwysig yn y fan hon yw bod yn rhaid ystyried y digwyddiad diweddaraf fel ffordd

in the sad series of events of this unfolding tragedy. Since the election of Hamas, it is essential that we recognise that there was some element of democratic legitimacy, as Alun Davies said. That has to be taken into account.

The Israeli interception of the Free Gaza Movement flotilla was a tragic incident but, in some ways, it was almost surprising that something like it had not happened before, given the tactics that had been used. Israel has every right to defend itself and to protect its own citizens from threats—from Gaza and elsewhere. However, I would argue that it is not in Israel's long-term security interest to have so many people confined to that tiny sliver of land. Although Israel has a right to defend itself, and although it undoubtedly faces daily provocation, it must now look at the endgame and at how this will pan out in future decades.

Both sides need to accept that, in the end, you have to talk. Closer to home, in Northern Ireland, albeit in different circumstances, we have examples of people in high office, who were at one point regarded as terrorists, in coalition Government with people who, in past decades, were certainly not prepared to speak to them, indeed, were prepared to use force against them. At some point, you must overcome the past and move forward. I believe that the opportunity here could be the inquiry, which I strongly welcome, as Israel is now being given an opportunity to look forward. It is certainly not in Israel's long-term interest to continue the blockade, and it is surely not in its long-term strategy to continue the blockade. Where do you go next? You cannot continue the blockade forever. It is not sustainable in humanitarian terms and certainly not in respect of the international reputation of Israel, which has suffered immensely as a result of this series of events. Something has to change.

5.10 p.m.

Finally, I strongly welcome the inquiry, but the key issue is that it must be seen to be independent and thorough, and it has to be

ymlaen yn hytrach nag fel un digwyddiad arall yn y gyfres drist o ddiwyddiadau yn y drasiedi hon sy'n dal i ddatblygu. Ers i Hamas gael ei ethol, mae'n hollbwysig ein bod yn cydnabod bod yna ryw elfen o gyfreithlondeb democrataidd, fel y dywedodd Alun Davies. Mae'n rhaid ystyried hynny.

Yr oedd y modd y rhyng-gipiodd Israel lynges fach y Mudiad Rhyddid i Gaza yn ddiwyddiad trasig ond, mewn rhai ffyrdd, bron nad oedd yn syndod nad oedd rhywbeth fel hyn wedi digwydd o'r blaen, o ystyried y tactegau a ddefnyddiwyd. Mae gan Israel bob hawl i amddiffyn ei hun a diogelu ei dinasyddion ei hun rhag bygythiadau—o Gaza a mannau eraill. Fodd bynnag, byddwn yn dadlau na fydd cael cymaint o bobl wedi'u caethiwo i'r darn bach iawn hwnnw o dir o fudd i ddiogelwch Israel yn yr hirdymor. Er bod gan Israel hawl i amddiffyn ei hun, ac er nad oes amheuaeth nad yw'n wynebu cael ei herio'n ddyddiol, mae'n rhaid iddi edrych yn awr am ddiwedd i'r sefyllfa ac ar sut y bydd hyn yn datblygu yn y degawdau sydd i ddod.

Mae angen i'r naill ochr a'r llall dderbyn, yn y pen draw, bod angen iddynt siarad. Yn nes adref, yng Ngogledd Iwerddon, er mewn amgylchiadau gwahanol, mae gennym enghreifftiau o bobl mewn swyddi uchel, a oedd yn cael eu hystyried yn derfysgwyr ar un adeg, mewn Llywodraeth glymbleidiol gyda phobl nad oeddent, yn sicr, yn barod i siarad â hwy yn y blynyddoedd a fu, ac yn wir, pobl yr oeddent yn barod i ddefnyddio grym yn eu herbyn. Rywbryd, rhaid goresgyn y gorffennol a symud ymlaen. Credaf y gallai'r ymchwiliad fod yn gyfle i wneud hynny, ac yr wyf yn ei groesawu'n fawr, wrth i Israel gael cyfle yn awr i edrych ymlaen. Yn sicr nid yw parhau â'r blocâd o fudd i Israel yn yr hirdymor, a go brin bod hynny'n rhan o'i strategaeth hirdymor. I ble mae mynd nesaf? Ni allwch barhau â'r blocâd am byth. Nid yw'n gynaliadwy mewn termau dyngarol ac yn sicr nid yw'n gynaliadwy o safbwynt enw da Israel yn rhyngwladol, sydd wedi dioddef yn aruthrol o ganlyniad i'r gyfres hon o ddiwyddiadau. Rhaid i rywbeth newid.

Yn olaf, yr wyf yn croesawu'r ymchwiliad yn fawr iawn, ond y mater allweddol yw bod yn rhaid iddo gael ei weld i fod yn annibynnol

seen to be determined to look not just at the specific events of that incident but to the future.

**Mohammad Asghar:** Thank you for the opportunity to contribute to this important debate. I welcome the decision to hold this discussion in the Senedd, even though it was prompted by the shocking loss of life that will have upset us and deeply saddened us all a few weeks ago. It is appropriate for such issues to be raised and discussed in places such as the National Assembly. Following the Israeli interception of the flotilla, there was widespread discussion and scenes of protest in Wales and across the United Kingdom. The concern raised by people in all corners of Wales and the United Kingdom is testimony to why issues such as this should, under certain circumstances, be discussed here in the Assembly.

The events of 31 May were deeply tragic, and all in the Chamber will agree that the scenes of violence and death were devastating. The loss of life is absolutely deplorable. As the Secretary of State for Foreign and Commonwealth Affairs, William Hague, said, it is important that Israel acts

‘with restraint and in line with international obligations.’

To see nine people killed on the flotilla was shocking and deeply regrettable. The constraints on access to Gaza must be lifted. Israel says that the blockade is designed to prevent arms being smuggled into Gaza. Of course, it is crucial that arms should not be smuggled into Gaza, and reports that there were weapons on board the flotilla must be investigated in full.

I come from that part of the world. Pakistan and Israel are built on the basis of religion, and they have a full right to exist. Israel has a democratically elected Government, and it is the only such country in the world to be surrounded by countries that are, unfortunately, not democratic—and I can ask my friend here about this, as he raised a question on this point.

ac yn drylwyr, ac mae'n rhaid i bobl weld ei fod yn benderfynol o edrych i'r dyfodol, yn ogystal ag ar y digwyddiadau penodol yn yr achos hwn.

**Mohammad Asghar:** Diolch ichi am y cyfle i gyfrannu i'r ddadl bwysig hon. Croesawaf y penderfyniad i gynnal y drafodaeth hon yn y Senedd, er y cafodd ei hysgogi gan y colli bywyd ofnadwy a fyddai wedi peri gofid inni ac wedi ein tristáu ni i gyd yn fawr iawn ychydig wythnosau'n ôl. Mae'n briodol i faterion o'r fath gael eu codi a'u trafod mewn mannau megis y Cynulliad Cenedlaethol. Ar ôl i Israel ryng-gipio'r llynges fach, cafwyd trafodaethau helaeth a phrotestiadau yng Nghymru ac ar draws y Deyrnas Unedig. Mae'r pryder a fynegwyd gan bobl ym mhob cwr o Gymru a'r Deyrnas Unedig yn dangos pam y dylid, mewn rhai amgylchiadau penodol, trafod materion tebyg i hyn yma yn y Cynulliad.

Yr oedd digwyddiadau 31 Mai yn drasig tu hwnt, a bydd pawb yn y Siambr yn cytuno bod y golygfeydd o drais a marwolaeth yn ofnadwy. Mae'n druenus i rai golli eu bywyd. Fel y dywedodd yr Ysgrifennydd Gwladol dros Faterion Tramor a'r Gymanwlad, William Hague, mae'n bwysig bod Israel yn gweithredu

gyda rheolaeth ac yn unol â rhwymedigaethau rhyngwladol.

Yr oedd gweld naw o bobl yn cael eu lladd ar y llynges fach yn frawychus ac yn anffodus iawn. Mae'n rhaid codi'r cyfyngiadau ar fynediad i Gaza. Mae Israel yn dweud bod y blocâd wedi'i fwriadu i atal arfau rhag cael eu smyglo i Gaza. Wrth gwrs, mae'n hollbwysig sicrhau nad yw arfau'n cael eu smyglo i Gaza, ac mae'n rhaid ymchwilio'n llawn i'r adroddiadau bod arfau ar fwrdd y llynges fach.

Yr wyf yn hanu o'r rhan honno o'r byd. Ar sail crefydd y codwyd Pacistan ac Israel, ac mae ganddynt hawl gyflawn i fodoli. Mae gan Israel Lywodraeth sydd wedi'i hethol yn ddemocrataidd, a hon yw'r unig wlad o'i math yn y byd sydd wedi'i hamgylchynu gan wledydd nad ydynt, yn anffodus, yn ddemocrataidd—a gallaf holi fy nghyfaill yn y fan hon am hynny, gan iddo godi cwestiwn



am y pwynt hwn.

**Rhodri Glyn Thomas:** For the purposes of the debate that we are having here, Oscar, I point out that Hamas won the election in 2007. It was elected, and so there is a democratically elected Government in Gaza.

**Rhodri Glyn Thomas:** At ddibenion y ddadl yr ydym yn ei chael yn awr, Oscar, yr wyf yn nodi'r ffaith i Hamas ennill yr etholiad yn 2007. Cafodd ei ethol, ac felly mae yna Lywodraeth sydd wedi'i hethol yn ddemocrataidd yn Gaza.

**Mohammad Asghar:** Listen, Rhodri. I do not want to talk about religion, but I will say this. Once, Moses asked God why he punished civilisation with famine, earthquakes and floods when one person had committed a sin, and God told him to wait. Moses slept, and while he was sleeping, an ant bit him on the thigh. He woke up and killed the ant. God then asked him how many ants he had killed, and he saw that he had killed not only one ant with his arm, but 10 or 20, even though only one ant had done the damage.

**Mohammad Asghar:** Gwrandewch, Rhodri, nid wyf am drafod crefydd, ond dywedaf hyn. Un tro, gofynnodd Moses i Dduw pam yr oedd pechod un unigolyn wedi peri iddo gosbi'r ddynoliaeth gyfan gyda newyn, daeargrynfeydd a llifogydd, a dywedodd Duw wrtho am aros. Cysgodd Moses, ac wrth iddo gysgu, cafodd ei frathu ar ei glun gan forgrugyn. Deffrodd a lladdodd y morgrugyn. Yna, gofynnodd Duw iddo sawl morgrugyn yr oedd wedi'u lladd, a gwelodd nad dim ond un morgrugyn yr oedd wedi'i ladd gyda'i fraich, ond 10 neu 20 ohonynt, er mai dim ond un morgrugyn a oedd wedi gwneud y niwed.

Hamas is an organisation that is only recognised in that part of the world. Who is financing it? The Israelis are not getting a piece of it. If every nation in the world guaranteed today the safety and security of Israel, I guarantee that, tomorrow morning, everything would be hunky-dory in that part of the world, and maybe prosperity would come. Why is everything going to one side? I know that the United Nations Security Council has, under resolution 1860, already approved plans to make it easier for Palestinians to travel home from overseas to live happily, but when will they give a guarantee in return? They have produced missiles, rockets and all sorts. There is no difference between spilling an Israeli child's blood and a Palestinian child's blood. It is exactly the same. Why do we not propose a motion to stress strongly that Palestinians should at least recognise Israel? They should recognise Israel, and there should be a guarantee of its security. I can assure you that there would be no need for tunnels or anything else then. The border would be open and they could get on with living their lives. Not long ago—just 60 years—Europe and Britain were staunch enemies, but look at things now. Why can that part of the world not achieve peace and harmony? I have had

Mae Hamas yn sefydliad sydd ond yn cael ei gydnabod yn y rhan honno o'r byd. Pwy sy'n ei ariannu? Nid yw'r Israeliaid yn cael unrhyw gyfran ohono. Pe bai pob gwlad yn y byd yn gwarantu diogelwch Israel heddiw, gallaf eich sicrhau y byddai popeth yn fendigedig bore yfory yn y rhan honno o'r byd, ac efallai y byddai'n ffynnu. Pam mae popeth yn mynd i un ochr? Gwn fod Cyngor Diogelwch y Cenhedloedd Unedig, dan benderfyniad 1860, eisoes wedi cymeradwyo cynlluniau i'w gwneud yn haws i Balesteiniaid deithio adref o dramor i fyw'n hapus, ond pryd y byddant yn rhoi'r un sicrwydd o'r ochr arall? Maent wedi creu taflegrau, rocedi a phob math o bethau. Nid oes gwahaniaeth rhwng tywallt gwaed plentyn Israelaidd a gwaed plentyn Palesteinaidd. Yr un peth yn union ydyw. Pam nad ydym yn cyflwyno cynnig i bwysleisio'n gryf y dylai'r Palesteiniaid o leiaf gydnabod Israel? Dylent gydnabod Israel, a dylid cael sicrwydd y bydd yn ddiogel. Gallaf eich sicrhau na fyddai angen twnelau na dim arall wedyn. Byddai'r ffin ar agor a gallent fwrw ymlaen â byw eu bywydau. Yr oedd Ewrop a Phrydain yn elynion mawr—dim ond 60 mlynedd yn ôl—ac edrychwch ar y sefyllfa yn awr. Pam na all y rhan hon o'r byd sicrhau heddwch a

discussions with the Israelis, but I am yet to see their Arab counterparts, to get peace and harmony in that part of the world. I certainly support the motion, but we still have to look to both sides and at that balance; we should not only look to one side.

**David Melding:** We have heard a very succinct, well focused and appropriate debate, started by Rhodri Glyn Thomas, who has a longstanding interest in the middle east. Rhodri talked about his visit there in 2008 when he saw at first hand the situation in Gaza; I thought that his presentation of that situation was powerful. He was right to emphasise the key theme of proportionality, because many fear that that is what has been lacking sometimes in the actions that are taken and the retaliation that follows. When any side reacts disproportionately, that can only serve to increase the difficulties in a particular conflict zone. So, Rhodri was right to sum up, in a fair-minded way, the situation and to emphasise, as others did, the great regret that we must have at the loss of life.

Darren was candid in saying that the loss of life was nothing less than a tragic incident. We all felt that and were all surprised and quite shocked by the images seen across the world on television. They caused anguish here, but, in many countries, they would have evoked extra poignant feelings. We need a worldwide solution to this problem. The role of the United Nations is hugely important and it is incumbent on all actors, particularly the Israeli Government, to be mindful of how things may be portrayed and how that will impact on the future work for peace.

I thought that Darren, who has sincerely held views on this whole situation, made a constructive contribution and emphasised the need for a two-state solution, which we all agree is at the heart of this conflict. We all believe that that should be what all nations

chytgord? Yr wyf wedi cael trafodaethau gyda'r Israeliaid, ond nid wyf eto wedi cael cyfle i gyfarfod â'u cymheiriaid Arabaidd, er mwyn trafod heddwch a chytgord yn y rhan honno o'r byd. Yr wyf yn sicr yn cefnogi'r cynnig, ond mae'n rhaid inni barhau i ystyried y ddwy ochr a'r cydbwysedd hwnnw; ni ddylem ystyried un ochr yn unig.

**David Melding:** Yr ydym wedi clywed dadl gryno, briodol gyda ffocws da iawn, a ddechreuwyd gan Rhodri Glyn Thomas, sydd â diddordeb yn y dwyrain canol ers blynyddoedd lawer. Bu Rhodri yn sôn am ei ymweliad yno yn 2008, pan welodd y sefyllfa yn Gaza drosto'i hun; yr oedd ei gyflwyniad o'r sefyllfa honno yn un pwerus iawn yn fy marn i. Yr oedd yn iawn wrth bwysleisio'r thema allweddol, sef cymesuredd, oherwydd mae llawer o bobl yn ofni mai dyna sydd wedi bod ar goll weithiau yn y camau sy'n cael eu cymryd a'r dial sy'n dilyn. Pan fydd unrhyw ochr yn ymateb mewn ffordd anghymesur, y cyfan a wna hynny yw cynyddu'r anawsterau mewn ardal benodol o wrthdaro. Felly, yr oedd yn deg i Rhodri grynhoi'r sefyllfa mewn modd diduedd, a phwysleisio, fel y gwnaeth eraill, bod yn rhaid inni resynu'n fawr at y bywydau a gollwyd.

Yr oedd Darren yn ddiffuant wrth ddweud bod y colli bywydau yn ddim llai na digwyddiad trasig. Yr oeddem i gyd yn credu hynny a chawsom i gyd ein synnu a'n dychryn gan y delweddau a welwyd ar y teledu ar draws y byd. Bu iddynt achosi gwewyr yn y fan hon, ond, mewn llawer o wledydd, byddent wedi ysgogi teimladau arbennig o ingol. Mae angen ateb rhyngwladol i'r broblem hon arnom. Mae swyddogaeth y Cenhedloedd Unedig yn bwysig tu hwnt ac mae'n ddyletswydd ar bawb y mae a wnelont â'r sefyllfa, yn arbennig Llywodraeth Israel, i ystyried sut y gallai pethau gael eu portreadu a sut y bydd hynny'n effeithio ar waith sy'n cael ei wneud yn y dyfodol i sicrhau heddwch.

Credaf fod Darren, sydd â safbwyntiau diffuant ar y sefyllfa hon, wedi gwneud cyfraniad adeiladol ac wedi pwysleisio'r angen am ateb dwy wladwriaeth, a byddai pob un ohonom yn cytuno bod hynny wrth wraidd y gwrthdaro hwn. Mae pob un

and governments, including our own, must work towards facilitating.

Alun said that it is occasionally important to discuss international matters in the National Assembly, although we obviously do not have any devolved responsibility for foreign affairs. I completely agree with him. It is a bit like applying salt to food: if you do too much of it, it will be damaging. Occasionally, it is important to allow for national debate here. The test is whether we receive a lot of representations from constituents as to the importance of particular issues. We have all received representations about what we can do to make peace in the middle east, between the Palestinians and Israelis in particular, more likely. We have precedence for debating such issues here—I remember our debate on the events of 11 September 2001 and the terrible impact of terrorism on the United States and we have discussed Afghanistan and Iraq and the impact on Welsh families of serving soldiers and so on.

Jenny brought us back to the humanitarian issue and the state that many live in in Gaza. That was also touched on by Rhodri Glyn. She was right to say that we should focus on refugees in a situation where they have not been able to build permanent homes or have the security of permanent homes. That will be a big issue until the two-state solution is finally agreed on. Both sides need to talk more. She put it eloquently when she said that they must overcome the past. That is true; they must go forward and be brave enough to reach a solution and recognise that many people have been hurt on both sides. She then said that the inquiry must be seen to be independent and we would all agree with that, and Darren also made that point.

5.20 p.m.

Finally, Mohammad reminded us that the loss of life was shocking, and it is not something that we want to see repeated. However, he

ohonom yn credu mai dyna ddylai'r holl wledydd a llywodraethau, gan gynnwys ein llywodraeth ni, fod yn gweithio tuag ato.

Dyweddodd Alun ei bod weithiau'n bwysig trafod materion rhyngwladol yn y Cynulliad Cenedlaethol, er nad oes gennym, yn amlwg, unrhyw gyfrifoldeb datganoledig am faterion tramor. Yr wyf yn cytuno'n llwyr ag ef. Mae'n debyg i roi halen ar fwyd: os byddwch yn gwneud gormod ohono, gall fod yn niweidiol. Weithiau, mae'n bwysig caniatáu cyfle i gael dadl genedlaethol yn y fan hon. Y prawf yw a fyddwn yn cael nifer o sylwadau gan etholwyr am bwysigrwydd materion penodol. Mae'n debyg bod pob un ohonom wedi cael sylwadau am yr hyn y gallwn ei wneud i wneud heddwch yn fwy tebygol yn y dwyrain canol, a rhwng y Palesteiniaid a'r Israeliaid yn benodol. Mae gennym enghreifftiau blaenorol o drafod materion o'r fath—cofiar ein dadl ar ddigwyddiadau 11 Medi 2001 ac effaith ofnadwy terfysgaeth ar yr Unol Daleithiau ac yr ydym wedi trafod Affganistan ac Irac a'r effaith ar deuluoedd o Gymru yn nhermau milwyr sy'n gwasanaethu ac yn y blaen.

Cawsom ein hatgoffa gan Jenny o'r safbwynt dyngarol a'r amgylchiadau y mae llawer o bobl yn byw ynddo yn Gaza. Soniodd Rhodri Glyn yn fyr am hynny hefyd. Yr oedd Jenny yn iawn i ddweud y dylem ganolbwyntio ar ffoaduriaid mewn sefyllfa lle nad ydynt wedi gallu adeiladu cartrefi parhaol neu lle nad oes ganddynt y diogelwch sy'n gysylltiedig â chartrefi parhaol. Bydd hynny'n broblem fawr nes gellir cytuno ar ateb dwy wladwriaeth. Mae angen i'r ddwy ochr drafod mwy. Llwyddodd i gyfleu'n huawdl y ffaith bod yn rhaid goresgyn y gorffennol. Mae hynny'n wir; mae'n rhaid iddynt fentro ymlaen a bod yn ddigon dewr i ddod o hyd i ateb a chydabod bod llawer o bobl wedi'u brifo ar y ddwy ochr. Yna dywedodd bod yn rhaid i bobl weld bod yr ymchwiliad yn annibynnol a byddai pob un ohonom yn cytuno â hynny, a gwnaed y pwynt hwn gan Darren hefyd.

Yn olaf, cawsom ein hatgoffa gan Mohammad bod y bywydau a gollwyd yn ddychrynlyd, ac nid yw'n rhywbeth yr ydym

made a pertinent point, namely that, within Israel, as a democracy, these forces are free to examine the actions of the Israeli Government and perhaps give us confidence that the nature of the inquiry that they will hold will be robust. At the heart of any solution is the affirmation, around the world and in the middle east, in particular, that Israel has a right to exist. When they are confident about that right, there is more chance that they will reach out for a generous and full solution.

In conclusion, we have had an appropriate debate this afternoon, and I thank all speakers. I now urge all Members to agree unanimously the motion before us.

**The Deputy Presiding Officer:** The proposal is to agree the motion. Does any Member object? There are no objections, so the motion is agreed in accordance with Standing Order No. 7.35.

*Derbyniwyd y cynnig.  
Motion agreed.*

am ei weld yn digwydd eto. Fodd bynnag, gwnaeth bwynt perthnasol, sef, bod gan y grymoedd hyn, yn Israel, fel democratiaeth, yr hawl i archwilio gweithredoedd Llywodraeth Israel a rhoi'r hyder inni, o bosibl, y bydd yr ymchwiliad a gynhelir ganddynt yn gadarn. Wrth wraidd unrhyw ateb yw'r cadarnhad, o amgylch y byd ac yn y dwyrain canol, yn arbennig, bod gan Israel hawl i fodoli. Pan fyddant yn hyderus ynglŷn â'r hawl honno, mae'n fwy tebygol y byddant yn barod i ddod o hyd i ateb hael a llawn.

I gloi, yr ydym wedi cael dadl briodol y prynhawn yma, a hoffwn ddiolch i'r holl siaradwyr. Yn awr, yr wyf yn annog yr Aelodau i gytuno'n unfrydol ar y cynnig sydd ger ein bron.

**Y Dirprwy Lywydd:** Y cynnig yw ein bod yn cytuno â'r cynnig. A oes unrhyw Aelod yn gwrthwynebu? Gwelaf nad oes gwrthwynebiad, felly, caiff y cynnig ei dderbyn yn unol â Rheol Sefydlog Rhif 7.35.

## Dadl y Ceidwadwyr Cymreig Welsh Conservatives Debate

### Diabetes

**The Deputy Presiding Officer:** I have selected amendments 1 and 2 in the name of Jane Hutt.

**Andrew R.T. Davies:** I move that

*the National Assembly for Wales:*

*1. notes the increase in rates of diabetes in Wales and the consequential public health challenges;*

*2. recognises the role of Welsh research establishments in developing research into a possible cure for diabetes;*

*3. calls on the Welsh Assembly Government to conduct a review of local health board provision of diabetes services;*

**Y Dirprwy Lywydd:** Yr wyf wedi dethol gwelliannau 1 a 2 yn enw Jane Hutt.

**Andrew R.T. Davies:** Cynigiau fod

*Cynulliad Cenedlaethol Cymru:*

*1. yn nodi'r cynnydd mewn cyfraddau diabetes yng Nghymru a'r sialensiau i iechyd y cyhoedd o ganlyniad i hynny;*

*2. yn cydnabod swyddogaeth sefydliadau ymchwil yng Nghymru o ran datblygu ymchwil i driniaeth a allai wella diabetes;*

*3. yn galw ar Lywodraeth Cynulliad Cymru i gynnal adolygiad o ddarpariaeth byrddau iechyd lleol o wasanaethau diabetes;*

*4. urges the Welsh Assembly Government to implement a SCI-DC type system, to help ensure that the national service framework for diabetes in Wales is effectively delivered.* (NDM4501)

The motion calls on the Assembly to look at diabetes services and, in particular, asks the Assembly Government to look at what action it can take to improve those services. Two amendments have been tabled. Regrettably, we will not be able to support them, as we believe that they would diminish the main thrust of the motion. I will go into the arguments and the points that I wanted to make later on, but we believe that now is the time for concerted and clear action on the two points that the amendments clearly identify, namely points 3 and 4 concerning LHBs and the introduction of the SCI-DC system—an information and communications technology development that has proved so successful in Scotland. It is with regret that we cannot support the amendments, but I hope that the Government will support our motion unamended, because it seeks to work with the Government to address the concerns that various organisations and people who have diabetes have raised with us regarding treatment and care in Wales. Indeed, last week was National Diabetes Week, and I had great pleasure in meeting the various organisations and individuals who wanted to raise these issues and show their gratitude for some of the many aspects of care that they had received after being diagnosed with diabetes.

One of the points that came across in my discussions last week was how seriously people take diabetes, especially when they are diagnosed with it. It was put to me that many people turn up at a GP's surgery complaining of various forms of ill health, and are almost relieved when they are given a diagnosis of diabetes rather than perhaps cancer, heart problems, stroke or any other complication. However, many of the underlying causes for those illnesses are related to diabetes. We must, therefore, ensure that people understand the seriousness of diabetes, because so many of the preventative actions fall to the individual—an

*4. yn annog Llywodraeth Cynulliad Cymru i weithredu system math SCI-DC, i helpu i sicrhau bod y fframwaith gwasanaeth cenedlaethol ar gyfer diabetes yng Nghymru yn cael ei roi ar waith yn effeithiol.* (NDM4501)

Mae'r cynnig yn galw ar y Cynulliad i ystyried gwasanaethau diabetes, ac yn benodol, mae'n gofyn i Lywodraeth y Cynulliad ystyried y camau y gall eu cymryd i wella'r gwasanaethau hynny. Mae dau welliant wedi'u cyflwyno. Yn anffodus, ni fyddwn yn gallu eu cefnogi, gan ein bod o'r farn y byddent yn gwanhau prif fyrdwn y cynnig. Byddaf yn ymhelaethu ar y dadleuon a'r pwyntiau yr oeddwn am eu gwneud yn nes ymlaen, ond credwn mai dyma'r amser i gymryd camau clir ar y cyd ar y ddau bwynt y mae'r gwelliannau'n eu nodi'n glir, sef pwynt 3 a 4 sy'n ymwneud â byrddau iechyd lleol a chyflwyno'r system SCI-DC—datblygiad ym maes technoleg gwybodaeth a chyfathrebu sydd wedi bod mor llwyddiannus yn yr Alban. Mae'n flin gennym na allwn gefnogi'r gwelliannau, ond gobeithiaf y bydd y Llywodraeth yn cefnogi ein cynnig heb welliannau, oherwydd mae'n ceisio gweithio gyda'r Llywodraeth i fynd i'r afael â'r pryderon y mae gwahanol sefydliadau a phobl sydd â diabetes wedi'u codi gyda ni ynghylch triniaeth a gofal yng Nghymru. Yn wir, yr oedd yr wythnos diwethaf yn Wythnos Genedlaethol Diabetes, a chefais bleser mawr o gyfarfod â'r amryw sefydliadau ac unigolion a oedd am godi'r materion hyn a rhoi eu diolch am rai o'r agweddau niferus ar ofal yr oeddent wedi'u cael ar ôl cael diagnosis o ddiabetes.

Un o'r pwyntiau a ddaeth i'r amlwg yn fy nhrafodaethau yr wythnos diwethaf oedd pa mor ddifrifol y mae pobl yn cymryd diabetes, yn enwedig pan gânt ddiagnosis o'r cyflwr. Dywedwyd wrthyf fod nifer o bobl yn mynd i feddygfa yn cwyno o amrywiaeth o wahanol fathau o salwch, a bron yn teimlo rhyddhad wrth gael diagnosis o ddiabetes yn hytrach na chanser, problemau â'r galon, strôc neu unrhyw gymhlethdod arall efallai. Fodd bynnag, mae llawer o'r pethau sylfaenol sy'n achosi'r afiechydon hynny'n gysylltiedig â diabetes. Felly, rhaid inni sicrhau bod pobl yn deall difrifoldeb diabetes, oherwydd yr unigolyn sy'n gyfrifol am gymryd cynifer o'r

argument that is relevant to the stroke services that we discussed in an earlier debate—as a healthy lifestyle and the choices that we make can help to prevent type 2 diabetes, though not type 1 diabetes. We must start early with the public health argument, because the figures showing the hold that diabetes has on the population are daunting and impressive—not in a flattering way, but in a horrific way. Some 145,000 people suffer from diabetes in Wales, up to 25,000 of them with type 1 diabetes, and 14,000 of those are children. Last year alone, 7,000 people were diagnosed with diabetes. If we leave it go unchecked and carry on down the road that we are on now, by 2025, we could see 0.25 million people being treated for various forms and stages of diabetes. The long-term implications for our health service are severe, and finding the resources that we would have to channel into diabetes prevention and healthcare would be challenging, as I am sure many speakers will mention.

Many of us are walking around with the undiagnosed symptoms of diabetes and some 350,000 of us exhibit the underlying traits that could lead to diabetes. I see that Jeff Cuthbert, the chair of the all-party group on diabetes, is here. I welcome the actions of the all-party group to raise the profile of diabetes in the Assembly to ensure that we are aware of the issues surrounding it. If we are to move forward on a unified basis, we must ensure that we put solutions in place, because solutions do exist.

Some of these solutions are about understanding the role of LHBs in providing services for screening and education and a joined-up approach, so that we can treat diabetes in the community. However, it is with regret that I inform the Minister and Plenary that some LHBs, due to their reorganisation, sadly do not have that joined-up approach and structure in place to take account of the wider areas that they have to deal with. In north Wales and south-east

camau ataliol—ac mae'r ddadl honno'n berthnasol i'r gwasanaethau strôc y buom yn eu trafod mewn dadl gynharach—oherwydd gall ffordd iach o fyw a'r dewisiadau a wnawn helpu i atal diabetes math 2, ond nid diabetes math 1. Rhaid inni ddechrau'n gynnar gyda'r ddadl ynghylch iechyd y cyhoedd, oherwydd mae'r ffigurau sy'n dangos y gafael sydd gan ddiabetes ar y boblogaeth yn frawychus ac yn drawiadol—nid mewn modd cadarnhaol, ond mewn modd arswydus. Mae oddeutu 145,000 o bobl yng Nghymru yn dioddef o ddiabetes; mae gan hyd at 25,000 ohonynt ddiabetes math 1, ac mae 14,000 o'r rheini'n blant. Cafodd 7,000 o bobl ddiagnosis o ddiabetes y llynedd yn unig. Os na fyddwn yn gweithredu, ac os byddwn yn parhau i fynd ar hyd y llwybr yr ydym arno ar hyn o bryd, erbyn 2025 gallem weld 0.25 miliwn o bobl yn cael eu trin am amryw o wahanol fathau o ddiabetes, a gwahanol gyfnodau yn ei ddatblygiad. Mae'r goblygiadau tymor hir ar gyfer ein gwasanaeth iechyd yn ddifrifol, a byddai dod o hyd i'r adnoddau y byddai'n rhaid inni eu cyfeirio at atal diabetes a gofal iechyd yn heriol, fel y bydd nifer o siaradwyr yn nodi, mae'n siŵr.

Mae llawer ohonom yn cerdded o gwmpas gyda symptomau diabetes sydd heb gael diagnosis, ac mae oddeutu 350,000 ohonom yn arddangos y nodweddion sylfaenol a allai arwain at ddiabetes. Gwelaf fod Jeff Cuthbert yma, sef cadeirydd y grŵp hollbleidiol ar ddiabetes. Croesawaf y camau gweithredu y mae'r grŵp hollbleidiol wedi'u cymryd i godi proffil diabetes yn y Cynulliad i sicrhau ein bod yn ymwybodol o'r materion sy'n gysylltiedig â diabetes. Os ydym am symud ymlaen yn unedig, rhaid inni sicrhau ein bod yn cyflwyno atebion i'r broblem hon, oherwydd mae atebion yn bodoli.

Mae rhai o'r atebion hyn yn ymwneud â deall rôl y byrddau iechyd lleol wrth ddarparu gwasanaethau ar gyfer sgrinio ac addysg a dull gweithredu cydgysylltiedig, fel y gallwn drin diabetes yn y gymuned. Fodd bynnag, yn anffodus, rhaid imi hysbysu'r Gweinidog a'r Cyfarfod Llawn nad oes gan rai byrddau iechyd lleol, oherwydd iddynt gael eu had-drefnu, y dull gweithredu a'r strwythur cydgysylltiedig hwnnw ar waith i ystyried y meysydd ehangach y mae'n rhaid iddynt

Wales, I am led to believe that there are issues around the organisation of diabetes services. That is why the motion calls for a survey or audit so that we can understand who has the best practices and where they can be taken on board by other LHBs. That is of crucial importance: we should not duplicate for the sake of duplication. A diabetes sufferer in the Cardiff and Vale University Local Health Board area is exactly the same as one in the Betsi Cadwaladr University Health Board area, and they deserve the same level of treatment and be able to resume as active and normal a life as possible.

Our motion also celebrates the level of research that is being undertaken in Wales. I have talked about research in a debate on cancer services, as I have in many other debates, and it is heartening to see so much research going on in Wales. I particularly welcome the recent Juvenile Diabetes Research Foundation grant to look into T cells for type 1 diabetes at Cardiff University—another successful grant application from Cardiff University, which we should celebrate to highlight that we can do the business in Wales when we need to do so.

The fourth point of our motion highlights the example of Scotland, where there is an information technology package that links primary care, the secondary sector and the patient, providing a joined-up approach to ensure that care can be managed. I would be grateful if the Minister, in responding to the debate, could give us an indication as to what discussions she has had on this, and whether we are nearing the implementation stage of that package. When it was implemented in Scotland, it resulted in a massive turnaround in solutions for people who suffer with diabetes—a 40 per cent reduction in people admitted to hospital for amputations and eye problems. This is the action that we should be undertaking in Wales. As it was tested in Scotland in 2005-06, the evidence is available, so we call on the Minister to adopt that package in Wales, as it is the type of action with which we should be front-loading

ymdrin â hwy. Yn y gogledd a'r de-ddwyrain, caf ar ddeall bod problemau ynghylch y modd y caiff gwasanaethau diabetes eu trefnu. Dyna pam mae'r cynnig yn galw am gynnal arolwg neu archwiliad, fel y gallwn ddeall pwy sydd â'r arferion gorau, a ble y gall byrddau iechyd lleol eraill eu mabwysiadu. Mae hynny'n hollbwysig: ni ddylem ddyblygu er mwyn dyblygu. Yr un yw unigolyn sy'n dioddef o ddiabetes yn ardal Bwrdd Iechyd Lleol Prifysgol Caerdydd a'r Fro ag unigolyn sy'n dioddef o ddiabetes yn ardal Bwrdd Iechyd Prifysgol Betsi Cadwaladr, ac maent yn haeddu cael yr un lefel o driniaeth, a gallu ailddechrau byw bywyd mor weithgar a normal â phosibl.

Mae ein cynnig hefyd yn dathlu lefel yr ymchwil a gaiff ei gynnal yng Nghymru. Yr wyf wedi sôn am waith ymchwil mewn dadl ar wasanaethau canser, fel yr wyf wedi'i wneud mewn llawer o ddadleuon eraill, ac mae'n galonogol gweld cymaint o waith ymchwil yn cael ei wneud yng Nghymru. Croesawaf yn arbennig y grant a roddwyd yn ddiweddar gan y Sefydliad Ymchwil Diabetes Plant i ymchwilio i gelloedd T ar gyfer diabetes math 1 ym Mhrifysgol Caerdydd—cais llwyddiannus arall am grant gan Brifysgol Caerdydd, y dylem ei ddatlu er mwyn tynnu sylw at y ffaith y gallwn gyrraedd y nod yng Nghymru pan fydd angen inni wneud hynny.

Mae'r pedwerydd pwynt yn ein cynnig yn tynnu sylw at yr Alban fel enghraifft, lle ceir pecyn technoleg gwybodaeth sy'n cysylltu gofal sylfaenol, y sector eilaidd a'r claf, gan ddarparu dull gweithredu cydgysylltiedig er mwyn sicrhau bod modd rheoli gofal. Byddwn yn ddiolchgar pe gallai'r Gweinidog, wrth ymateb i'r ddadl, roi arwydd inni ynghylch y trafodaethau y mae wedi'u cael ynghylch hyn, ac a ydym yn agosáu at weithredu'r pecyn hwnnw. Pan gafodd ei weithredu yn yr Alban, arweiniodd at newid sylweddol yn yr atebion ar gyfer pobl sy'n dioddef o ddiabetes—cafwyd gostyngiad o 40 y cant yn nifer y bobl a gafodd eu derbyn i'r ysbyty gyda phroblemau â'u llygaid neu i gael llawdriniaeth i dorri rhan o'r corff i ffwrdd. Dyma'r cam gweithredu y dylem ei gymryd yng Nghymru. Gan iddo gael ei brofi yn yr Alban yn 2005-06, mae'r dystiolaeth ar gael, felly,

the system to ensure that we can make those improvements.

The national service framework in Wales has been up and running for a considerable time—since 2002-03—but it is regrettably patchy in its nature. That is something to be lamented, because many healthcare professionals and people who suffer with diabetes have talked with great passion about the drive of the national service framework. If it were to be implemented, it would lead to real improvements on the ground. Again, I would welcome the Minister's response on how she will take forward the national service framework so that it can be implemented to its full potential in Wales, so that we can see its benefits.

Screening is another vital tool. As I mentioned earlier, 50,000 people in Wales have diabetes but do not know it. Those 50,000 people could be suffering long-term damage, whether it is heart problems, stroke or even cancer. A robust screening system could alleviate a great deal of suffering for the individuals, but also save a great deal of cost for the NHS further down the road. Six years on from when the Assembly supported the process of screening, we are still seeing a patchy delivery of that service.

5.30 p.m.

Education for people diagnosed with diabetes does not, sadly, have a good take-up in Wales. Less than 2 per cent of people diagnosed with diabetes benefit from the DAFNE, the dose adjustment for normal eating, model of treatment and the DAFYDD, the dose adjustment for your daily diet, model of treatment. That is another aspect that we should expand to ensure that we are offering solutions and opportunities for people to take action when they know that they are suffering from diabetes. With the correct advice and help, people can manage their condition and have a significantly improved outcome. On average, a person

galwn ar y Gweinidog i fabwysiadu'r pecyn hwnnw yng Nghymru, gan mai dyna'r math o gam gweithredu y dylem ei gymryd ar ddechrau'r system er mwyn sicrhau y gallwn wneud y gwelliannau hynny.

Mae'r fframwaith gwasanaeth cenedlaethol yng Nghymru wedi bod ar waith ers cryn dipyn o amser—er 2002-03—ond yn anffodus, mae'n anghyson. Trueni am hynny, oherwydd mae llawer o weithwyr proffesiynol ym maes gofal iechyd a phobl sy'n dioddef o ddiabetes wedi siarad ag angerdd am y sbardun a gynigir gan y fframwaith gwasanaeth cenedlaethol. Pe bai'r fframwaith yn cael ei weithredu, byddai'n arwain at welliannau sylweddol ar lawr gwlad. Eto, byddwn yn croesawu ymateb y Gweinidog ynghylch sut y bydd yn symud y fframwaith gwasanaeth cenedlaethol yn ei flaen fel y gellir ei weithredu i'w lawn botensial yng Nghymru, er mwyn inni weld ei fanteision.

Mae sgrinio'n adnodd hanfodol arall. Fel y soniais yn gynharach, mae gan 50,000 o bobl yng Nghymru ddiabetes heb yn wybod iddynt. Gallai'r 50,000 o bobl hynny fod yn dioddef niwed tymor hir, yn broblemau â'r galon, strôc neu ganser hyd yn oed. Gallai system sgrinio gadarn leddfu cryn dipyn ar ddiodefaint yr unigolion dan sylw, ond gallai hefyd arbed cryn dipyn o gost i'r GIG yn y pen draw. Chwe blynedd wedi i'r Cynulliad gefnogi'r broses sgrinio, yr ydym yn dal i weld bod y gwasanaeth hwnnw'n cael ei weithredu mewn modd anghyson.

Yn anffodus, prin yw'r bobl â diabetes yng Nghymru sy'n cael addysg ynghylch y clefyd. Mae llai na 2 y cant o bobl sydd wedi cael diagnosis o ddiabetes yn elwa o'r model o driniaeth a elwir yn DAFNE, sef y dull addasu dos ar gyfer bwyta arferol, a'r model o driniaeth a elwir yn DAFYDD, sef y dull addasu dos ar gyfer eich deiet dyddiol. Mae honno'n agwedd arall y dylem ei hehangu i sicrhau ein bod yn cynnig atebion a chyfleoedd i bobl weithredu pan fyddant yn gwybod bod diabetes arnynt. O gael y cyngor a'r help cywir, gall pobl reoli eu cyflwr a chael canlyniad llawer gwell. Ar gyfartaledd, mae disgwyliad oes unigolyn sydd â diabetes



with type 1 diabetes, for example, has a decrease in life expectancy of 20 years. Clearly, we cannot accept that and we should ensure that we make the resources available to LHBs to tackle the challenge of twenty-first century lifestyles with regard to diabetes.

I look forward to listening to your response on those points, Minister, to see how you will take this forward following the all-party group's work last week, which was National Diabetes Week. I urge Members to support the motion before the Assembly today.

**The Minister for Health and Social Services (Edwina Hart):** I move the following amendments in the name of Jane Hutt. Amendment 1: delete point 3 and replace with:

*calls on the Welsh Assembly Government to ensure that local health boards have a clear view on what is needed to achieve the standards in the diabetes national service framework by 2013 and have action plans in place.*

Amendment 2: in point 4 delete 'implement' and replace with 'explore'.

**Angela Burns:** I am delighted to take part in this debate. Given that there is so much to say on this important subject, I want to concentrate on the fourth point of our motion, namely that the Welsh Assembly Government should

'implement a SCI-DC type system, to help ensure that the national service framework for diabetes in Wales is effectively delivered.'

First, why does this matter to the country? As Andrew R.T. Davies has already said, there has been a huge growth in type 1 and type 2 diabetes, which costs us over £480 million a year, and a high number of people currently suffer from it. Also, because the spread or growth of diabetes—I do not know whether it spreads or grows, as it is not a contagion, but more and more people are suffering from it—that number will grow exponentially.

math 1, er enghraifft, 20 mlynedd yn is na'r arfer. Yn amlwg, ni allwn dderbyn hynny, a dylem sicrhau ein bod yn darparu'r adnoddau i fyrddau iechyd lleol allu mynd i'r afael â'r her a geir yn sgîl ffyrdd o fyw'r unfed ganrif ar hugain o safbwynt diabetes.

Edrychaf ymlaen at wrando ar eich ymateb i'r pwyntiau hyn, Weinidog, i weld sut y byddwch yn symud hyn yn ei flaen yn dilyn y gwaith a wnaed gan y grŵp hollbleidiol yr wythnos diwethaf, sef Wythnos Genedlaethol Diabetes. Anogaf yr Aelodau i gefnogi'r cynnig sydd gerbron y Cynulliad heddiw.

**Y Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol (Edwina Hart):** Cynigïaf y gwelliannau canlynol yn enw Jane Hutt. Gwelliant 1: dileu pwynt 3 a rhoi yn ei le:

*yn galw ar Lywodraeth Cynulliad Cymru i sicrhau bod gan fyrddau iechyd lleol ddealltwriaeth glir o'r hyn y mae ei angen er mwyn cyflawni safonau'r fframwaith gwasanaeth cenedlaethol ar gyfer diabetes erbyn 2013 ynghyd â chynlluniau gweithredu.*

Gwelliant 2: ym mhwynt 4 dileu 'weithredu' a rhoi yn ei le 'archwilio'.

**Angela Burns:** Yr wyf yn falch o gymryd rhan yn y ddadl hon. O gofio bod cymaint i'w ddweud am y mater pwysig hwn, yr wyf am ganolbwyntio ar bedwerydd pwynt ein cynnig, sef y dylai Llywodraeth y Cynulliad

'weithredu system math SCI-DC, i helpu i sicrhau bod y fframwaith gwasanaeth cenedlaethol ar gyfer diabetes yng Nghymru yn cael ei roi ar waith yn effeithiol.'

Yn gyntaf, pam mae hyn yn bwysig i'r wlad? Fel y dywedodd Andrew R.T. Davies eisoes, gwelwyd twf aruthrol mewn diabetes math 1 a math 2, sy'n costio dros £480 miliwn y flwyddyn inni, ac mae nifer fawr o bobl yn dioddef o'r clefyd ar hyn o bryd. Yn ogystal, bydd y ffigur hwnnw'n tyfu'n gynt ac ynghynt oherwydd y modd y mae diabetes yn lledaenu neu'n tyfu—ni wn a yw'n lledaenu neu'n tyfu, gan nad haint mohono, ond mae mwyfwy o bobl yn dioddef o'r clefyd.

Secondly, why does it matter to the individual? It matters because the consequences are truly devastating. Type 1 diabetes is life-threatening: your kidneys can fail, you can lose your sight, your heart can give out, and you can lose a limb. I have spent time with a superb self-help group, the Dyfed Amputees Self Help Group, and a significant number of its members have lost a limb, mainly legs, as a result of diabetes. Type 2 diabetes is equally as awful and is affecting more and more people. Worse still, more and more young children are being diagnosed with it; that never used to happen.

Given the huge costs to the country and the devastating consequences to the individual, we need an effective way of managing and co-ordinating the provision of diabetes services in Wales. As Andrew has already mentioned, the software system SDI-DC is already in place in Scotland. It links data and enables patients to log in and see their personal records online. It is extraordinarily successful in reducing some of the awful consequences of diabetes. I want us to go further than the Scottish model and to take that system and develop it to include specialised help and support for vulnerable people, such as young children living in tumultuous households who do not have support, and who do not have their parents standing over them, reminding and nudging them, ensuring that they are eating the right food, using their type 1 injector pen at the right time and pricking their thumbs to check their blood-sugar levels. I want the model to be extended to take care of vulnerable adults, whether they are living in a home setting or are out on their own in the community.

I make no apologies for standing here yet again referring to examples from my constituency, because it is the constituents who walk in through our doors who inform us, because they are at the sharp end of life. We can stand here and talk about policies and how they should be implemented, and Ministers, Assembly Members and civil servants can go on and on about it, but those are the people who have to deal with it. I will

Yn ail, pam mae'n bwysig i'r unigolyn? Mae'n bwysig oherwydd bod y canlyniadau'n ddinistriol iawn. Mae diabetes math 1 yn peryglu bywyd: gall eich arenau fethu, gallwch gollu eich golwg, gall eich calon stopio, a gallwch gollu coes neu fraich. Yr wyf wedi treulio amser gyda grŵp hunangymorth gwyb, sef grŵp hunangymorth Dyfed i bobl sydd wedi colli rhan o'u corff, ac mae nifer sylweddol o aelodau'r grŵp wedi colli coes neu fraich, coesau yn bennaf, o ganlyniad i ddiabetes. Mae diabetes math 2 yr un mor ofnadwy ac mae'n effeithio ar fwyfwy o bobl. Yn waeth fyth, mae mwyfwy o blant ifanc yn cael diagnosis o ddiabetes math 2; nid oedd hynny'n arfer digwydd.

O gofio'r costau aruthrol i'r wlad a'r canlyniadau dinistriol i'r unigolyn, mae angen inni gael dull effeithiol o reoli a chydlynu'r ddarpariaeth o wasanaethau diabetes yng Nghymru. Fel y mae Andrew wedi sôn eisoes, mae'r system feddalwedd SDI-DC eisoes ar waith yn yr Alban. Mae'n cysylltu data ac mae'n galluogi cleifion i fewngofnodi a gweld eu cofnodion personol ar-lein. Mae'n hynod o lwyddiannus wrth leihau rhai o ganlyniadau ofnadwy diabetes. Yr wyf am inni fynd ymhellach na'r model yn yr Alban, a chymryd y system honno a'i datblygu i gynnwys help a chymorth arbenigol i bobl sy'n agored i niwed, megis plant ifanc sy'n byw mewn aelwydydd cythryblus nad ydynt yn cael cymorth, ac nad yw eu rhieni ar eu hŵl, yn eu hatgoffa a'u procio, yn sicrhau eu bod yn bwyta'r bwyd iawn, yn defnyddio eu chwistrellwr math 1 ar yr adeg gywir ac yn pigo eu bys bawd i wirio lefel y siwgr yn eu gwaed. Yr wyf am i'r model gael ei ehangu i gymryd gofal o oedolion sy'n agored i niwed, os ydynt yn byw mewn cartref neu ar eu pen eu hunain yn y gymuned.

Nid wyf yn ymddiheuro dim am sefyll yma unwaith yn rhagor yn cyfeirio at enghreifftiau o'm hetholaeth i, oherwydd yr etholwyr sy'n cerdded drwy ein drysau sy'n rhoi gwybodaeth inni, am eu bod hwy yn byw bywyd go iawn. Gallwn sefyll yma a siarad am bolisiau a sut y dylid eu gweithredu, a gall Gweinidogion, Aelodau'r Cynulliad a gweision sifil siarad yn ddi-ddiwedd am y mater, ond nhw yw'r bobl sy'n gorfod

refer to the case of a young man with moderate to severe mental health problems, who was just about capable of living on his own in the community. He had severe diabetes and, against his parents' wishes, he wanted to live on his own. The council housed him; it was told of his problems and that he had diabetes, but put him in a home that was on the other side of the estuary from where his parents lived, without a cooker, meaning that he could not cook food for himself, and without a fridge, so he could not keep his insulin. He died aged 21 because he could not manage the regime living in a property on his own, and his parents did not have the money to buy all these things for him. I got involved because we were lobbying the council to take a different decision, but it said, 'No, we've housed him, that is what he wants, and that's the end of it'. If we had had a software system that could have linked information together and highlighted that this was a vulnerable person, who needed a bit of extra care, and someone to go the extra mile, then we could have helped him. With such a system we could help young adults like him to lead independent lives, manage their condition, and not feel that they are beholden to everyone around them. Sadly, he lost his life, and I believe that comprehensive management would have prevented that.

I want to mention one other constituent—there are others; I have just picked out two—who was hospitalised for months because he was unable, for some medical reason, to absorb insulin subcutaneously. He languished in hospital with staff saying that they did not have a solution, and he was getting fed up, so he was then labelled as difficult and bolshy, but he was just a young man who wanted to go home to his wife and children. We got involved and managed to move things on, but it should not be necessary for Assembly Members to get involved; we could have a good IT system in place that would do that, so I ask you, Minister, to look at that most seriously.

**Jeff Cuthbert:** It is unusual for me to thank them, but I would like to thank the Welsh Conservatives for bringing forward this

ymdopi â'r sefyllfa. Cyfeiriaf at achos dyn ifanc â phroblemau iechyd meddwl cymedrol i ddifrifol, a oedd prin yn gallu byw ar ei ben ei hun yn y gymuned. Yr oedd ganddo ddiabetes difrifol, ac yr oedd am fyw ar ei ben ei hun, yn groes i ddymuniad ei rieni. Rhoddodd y cyngor gartref iddo; cafodd wybod am ei broblemau a'r ffaith bod ganddo ddiabetes, ond cafodd ei roi mewn cartref a oedd ar ochr arall yr aber i'r man lle'r oedd ei rieni'n byw, heb ffwrn, a oedd yn golygu na allai goginio bwyd iddo ef ei hun, a heb oergell, a oedd yn golygu na allai gadw ei inswlin. Bu farw yn 21 oed am na allai ymdopi â'r drefn o fyw mewn eiddo ar ei ben ei hun, ac nid oedd gan ei rieni yr arian i brynu'r holl bethau hyn iddo. Ymyrrais yn yr achos am ein bod yn ceisio dylanwadu ar y cyngor i benderfynu fel arall, ond dywedodd, 'Na, yr ydym wedi rhoi cartref iddo, dyna y mae'n ei ddymuno, a dyna ddiwedd ar y mater'. Pe bai gennym system feddalwedd a allai fod wedi cysylltu'r wybodaeth ynghyd a thynnu sylw at y ffaith bod hwn yn unigolyn agored i niwed yr oedd angen ychydig o ofal ychwanegol arno, a rhywun i wneud ychydig bach yn rhagor i'w gynorthwyo, gallem fod wedi'i helpu. Gyda system o'r fath, gallem helpu oedolion ifanc fel yr unigolyn hwn i fyw bywyd annibynnol, rheoli eu cyflwr a pheidio â theimlo eu bod dan ddyled i bawb o'u cwmpas. Yn anffodus, collodd ef ei fywyd, a chredaf y byddai dull rheoli cynhwysfawr wedi atal hynny.

Yr wyf am sôn am un etholwr arall—mae rhai eraill yn bodoli; yr wyf wedi dewis dau yn unig—a fu yn yr ysbyty am fisoedd am na allai dderbyn inswlin drwy chwistrelliad, am ryw reswm meddygol. Bu'n nychu yn yr ysbyty, gyda'r staff yn dweud nad oedd ganddynt ateb ar ei gyfer, ac yr oedd yn digalonni ac yna cafodd ei labelu fel rhywun anodd ac ystyfnig, ond dim ond dyn ifanc ydoedd a oedd am fynd adref at ei wraig a'i blant. Gwnaethom ni ymyrryd a llwyddo i symud pethau yn eu blaen, ond ni ddylai fod angen i Aelodau'r Cynulliad ymyrryd; gallem gael system TG dda ar waith a fyddai'n gwneud hynny, felly gofynnaf ichi, Weinidog, ystyried hynny o ddifrif.

**Jeff Cuthbert:** Mae'n anarferol imi ddiolch iddynt, ond hoffwn ddiolch i'r Ceidwadwyr Cymreig am gyflwyno'r ddadl hon ynghylch

debate on diabetes. As many of you are aware, Dai Lloyd and I founded the cross-party group on diabetes earlier this year and, as I have said many times, I am a type 2 diabetic, so this is an issue that is close to my heart. Many of the points in the Conservatives' motion look familiar to me, as they happen to have been the subjects of discussion on the cross-party group's agenda last week. Indeed, we wrote to the Minister in May about most of these issues, and had a very positive response.

My interest in diabetes extends far beyond my personal circumstances. There are 2.5 million people across the UK with diabetes, about 146,000 of whom are in Wales. Wales has a higher prevalence of diabetes than any other region of the UK, with 4.4 per cent of Welsh people suffering from diabetes. In fact, recent samples of GP surgeries released last week suggest that the number has increased to almost 4.7 per cent.

If those facts are not troubling enough, there is evidence that approximately one in 20 people across Wales have diabetes without knowing it, and that diabetes prevalence is set to double by 2025. These figures will only be made worse by predictions that there will be significant increases in the number of overweight and obese people in coming years, as well as a continually ageing population. It is an epidemic that we cannot afford to ignore—and I mean that literally, because diabetes in Wales costs the NHS about £0.5 billion each year.

You must also consider the direct effect that diabetes can have on other aspects of your health. There are direct links between diabetes and amputation, as has been mentioned, and between diabetes and heart disease, stroke, eyesight problems and even mental health problems. If you imagine the preparations that were made for swine flu, and then consider that diabetes is much more prevalent and causes significantly more deaths every year, you start to get a feel for

diabetes. Fel y gŵyr llawer ohonoch, sefydlodd Dai Lloyd a minnau'r grŵp trawsbleidiol ar ddiabetes yn gynharach eleni, ac fel yr wyf wedi'i ddweud droeon, mae gennyf ddiabetes math 2, felly mae'r mater hwn yn agos at fy nghalon. Mae llawer o'r pwyntiau yng nghynnig y Ceidwadwyr yn edrych yn gyfarwydd imi, oherwydd mai'r un pynciau ydynt a drafodwyd ar agenda'r grŵp trawsbleidiol yr wythnos diwethaf, digwydd bod. Yn wir, bu inni ysgrifennu at y Gweinidog ym mis Mai ynghylch y rhan fwyaf o'r materion hyn, a chawsom ymateb cadarnhaol iawn.

Mae fy niddordeb mewn diabetes yn ymestyn ymhell y tu hwnt i'm hamgylchiadau personol. Ceir 2.5 miliwn o bobl â diabetes ar draws y DU, ac mae oddeutu 146,000 o'r rheini yng Nghymru. Mae diabetes yn fwy cyffredin yng Nghymru nag yn yr un rhanbarth arall yn y DU, gyda 4.4 y cant o bobl Cymru'n dioddef o ddiabetes. Yn wir, mae samplau diweddar o feddygyfeydd meddygon teulu a gyhoeddwyd yr wythnos diwethaf yn awgrymu i'r ffigur godi i bron i 4.7 y cant.

Os nad yw'r ffeithiau hynny'n ddigon i beri gofid ichi, ceir tystiolaeth bod gan oddeutu un o bob 20 o bobl ar draws Cymru ddiabetes heb yn wybod iddynt, a bod disgwyl i nifer y bobl sydd â diabetes ddyblu erbyn 2025. Dim ond gwaethygu wnaiff y ffigurau hyn gyda rhagfynegiadau y bydd cynnydd sylweddol yn nifer y bobl sydd dros bwysau ac yn ordeu yn y blynyddoedd nesaf, yn ogystal â phoblogaeth sy'n parhau i heneiddio. Mae'n epidemig na allwn fforddio ei anwybyddu—ac yr wyf yn meddwl hynny'n llythrennol, oherwydd mae diabetes yng Nghymru'n costio oddeutu £0.5 biliwn y flwyddyn i'r GIG.

Rhaid ichi hefyd ystyried yr effaith uniongyrchol y gall diabetes ei chael ar agweddau eraill ar eich iechyd. Ceir cysylltiadau uniongyrchol rhwng diabetes a cholli rhan o'r corff, fel y soniwyd eisoes, a chysylltiad rhwng diabetes a chlefyd y galon, strôc, problemau â'r golwg a hyd yn oed problemau iechyd meddwl. Os dychmygwch y paratodau a wnaed ar gyfer y fflw moch, ac yna ystyried bod diabetes yn llawer mwy cyffredin ac yn achosi llawer mwy o

the effect that diabetes is having across Wales. By far the most prevalent type of diabetes is type 2, which in many cases could be avoided or at least minimised by individuals making lifestyle and dietary changes. It is imperative also that we increase awareness of the risk of diabetes and improve self-management. I hear stories all the time through Diabetes UK and other groups about people who are diagnosed and who do not realise that it is a serious and permanent condition, which is potentially fatal if not managed properly. Some people think that type 2 diabetes is the mild form of diabetes; that is nonsense, but it is a perception, nevertheless. I have managed my diabetes successfully for over 20 years by making lifestyle changes and using careful self-management, including taking insulin and other medication.

farwolaethau bob blwyddyn, byddwch yn dechrau deall yr effeithiau y mae diabetes yn eu cael ar draws Cymru. Heb os, y math mwyaf cyffredin o ddiabetes yw math 2, y gellid ei osgoi mewn llawer o achosion, neu o leiaf y gellir ei leihau wrth i unigolion wneud newidiadau i'w ffyrdd o fyw a'u deiet. Mae hefyd yn angenrheidiol inni godi ymwybyddiaeth o berygl diabetes a gwella dulliau hunanreoli. Clywaf straeon drwy'r amser drwy Diabetes UK a grwpiau eraill am bobl a gaiff ddiagnosis o ddiabetes ac nad ydynt yn sylweddoli ei fod yn gyflwr difrifol a pharhaol, a allai fod yn anghueuol os na chaiff ei reoli'n iawn. Mae rhai pobl yn credu mai diabetes math 2 yw'r math ysgafn o ddiabetes; nonsens yw hynny, ond mae'n ganfyddiad, serch hynny. Yr wyf wedi rheoli'r diabetes sydd arnaf yn llwyddiannus am dros 20 mlynedd drwy wneud newidiadau i'm ffordd o fyw a chan ddefnyddio dulliau hunanreoli gofalus, gan gynnwys cymryd inswlin a meddyginiaeth arall.

5.40 p.m.

In my case, my diabetes was discovered about 18 months after I had completed a seven-month course of chemotherapy for cancer, and it is now considered that there are some links between incorrect dosages of chemotherapy, which attacks every part of the body, and damage to the pancreas, which is a classic feature of diabetes. Whether that is the case or not, I cannot say; others must judge. I remember friends and family saying to me, 'You've been through all that chemotherapy and now you have diabetes', and my response was, 'I'm glad to be around to have the diabetes, quite frankly'. While there may be a cure within a few years or decades, it is more important at present that we take the key steps that we already know about, which are, in many instances, free, to mitigate the upward trend in diabetes.

Yn fy achos i, cefais ddiagnosis o'r diabetes sydd arnaf oddeutu 18 mis ar ôl imi gwblhau cwrs cemotherapi am ganser a barodd saith mis, ac erbyn hyn credir bod rhai cysylltiadau rhwng rhoi dos anghywir o gemotherapi, sy'n ymosod ar bob rhan o'r corff, a niwed i'r pancreas, sy'n nodweddiadol iawn o ddiabetes. Ni allaf ddweud a yw hynny'n wir ai peidio; rhaid i eraill farnu hynny. Cofiaf fy ffrindiau a'm teulu'n dweud wrthyf, 'Yr wyt ti wedi mynd drwy'r holl gemotherapi yna, a nawr mae diabetes arnat ti'. Fy ymateb i oedd, 'A dweud y gwir, yr wyf yn falch o fod yn fyw i gael diabetes'. Er y gallai fod triniaeth ar gael i wella diabetes cyn pen ychydig flynyddoedd neu ddegawdau, mae'n bwysicach ar hyn o bryd inni gymryd y camau allweddol y gwyddom amdanynt eisoes, sy'n rhad ac am ddim mewn llawer o achosion, i liniaru'r duedd am i fyny yn nifer yr achosion o ddiabetes.

I question calls from the Conservatives to conduct a review, which would undoubtedly be costly, of local health boards' provision of diabetes services. We already have the national service framework, which has assessment and continual review built into it. Local health boards already produce

Yr wyf yn amheus ynghylch galwadau gan y Ceidwadwyr i gynnal adolygiad o ddarpariaeth y byrddau iechyd lleol o wasanaethau diabetes, a fyddai'n siŵr o fod yn gostus. Mae gennym y fframwaith gwasanaeth cenedlaethol eisoes, sy'n cynnwys asesu ac adolygu parhaus. Mae

quarterly updates on their performance in meeting the NSF for diabetes. In addition, an assessment report was completed in autumn 2009 by the clinical lead on diabetes in the Welsh Assembly Government. The assessment noted that there were good areas of practice and a number of areas of concern. In fact, no LHB in Wales was achieving good practice across all the NSF guidelines.

The best thing that we could do is to go back to the report from autumn 2009 and agree on a plan to acknowledge and spread good practice where it exists and formulate a plan of actions to rectify areas of concern. This is clearly a problem and the cross-party group has already set to work upon it.

**Mohammad Asghar:** The importance of this debate is highlighted by the fact that more than 146,000 people in Wales have been diagnosed with diabetes—a higher proportion than in Scotland and Northern Ireland. By 2025, predictions suggest that another 79,000 people in Wales will have been diagnosed with diabetes, taking the Welsh total to 225,000.

Leading organisations have earmarked changing lifestyle habits and increased levels of weight gain as key factors behind the rising rate. With diabetes on the rise in Wales, the Welsh Assembly Government faces considerable challenges. A few weeks ago, I was delighted to praise the role that many Welsh organisations play in developing cancer treatments. Today, I am equally delighted to highlight the role that many Welsh institutions play in developing advanced treatments for diabetes. The Juvenile Diabetes Research Foundation recently invested £300,000 in type 1 diabetes research at Cardiff University. Swansea University's Institute of Life Science is also involved in important research into type 2 diabetes, and I join my colleagues in welcoming the financial support that it has been given by the Welsh Assembly Government.

byrddau iechyd lleol eisoes yn cyhoeddi bob chwarter y newyddion diweddaraf am eu perfformiad o ran diwallu'r fframwaith gwasanaeth cenedlaethol ar gyfer diabetes. Yn ogystal, cwblhawyd adroddiad asesu yn hydref 2009 gan yr arweinydd clinigol ar ddiabetes yn Llywodraeth y Cynulliad. Nododd yr asesiad fod rhai meysydd o arfer da, a nifer o feysydd a oedd yn peri pryder. Mewn gwirionedd, nid oedd yr un Bwrdd Iechyd Lleol yng Nghymru'n cyflawni arfer da ar draws pob un o ganllawiau'r fframwaith gwasanaeth cenedlaethol.

Y peth gorau y gallem ei wneud yw mynd yn ôl at yr adroddiad o hydref 2009, a chytuno ar gynllun i gydnabod a lledaenu arfer da lle mae'n bodoli, a llunio cynllun gweithredu i wella'r materion sy'n peri pryder. Mae'n amlwg bod hyn yn broblem, ac mae'r grŵp trawsbleidiol eisoes wedi dechrau gweithio arno.

**Mohammad Asghar:** Caiff pwysigrwydd y ddatl hon ei amlygu gan y ffaith i dros 146,000 o bobl yng Nghymru gael diagnosis o ddiabetes—sy'n gyfran uwch nag yn yr Alban a Gogledd Iwerddon. Erbyn 2025, mae'r rhagfynegiadau'n awgrymu y bydd 79,000 yn rhagor o bobl yng Nghymru'n cael diagnosis o ddiabetes, gan fynd â chyfanswm Cymru i 225,000.

Mae sefydliadau blaenllaw wedi nodi newid mewn ffyrdd o fyw a phobl yn magu mwy o bwysau yn ffactorau allweddol y tu ôl i'r gyfradd sy'n codi. Gyda diabetes ar gynnydd yng Nghymru, mae Llywodraeth y Cynulliad yn wynebu heriau sylweddol. Ychydig wythnosau'n ôl, yr oeddwn wrth fy modd o allu canmol y rôl y mae llawer o fudiadau yng Nghymru'n ei chwarae wrth ddatblygu triniaethau canser. Heddiw, yr wyf yr un mor falch o allu tynnu sylw at y rôl y mae llawer o sefydliadau yng Nghymru'n ei chwarae wrth ddatblygu triniaethau datblygedig ar gyfer diabetes. Yn ddiweddar, buddsoddodd y Sefydliad Ymchwil Diabetes Plant £300,000 mewn gwaith ymchwil i ddiabetes math 1 ym Mhrifysgol Caerdydd. Mae Athrofa Gwyddor Bywyd Prifysgol Abertawe hefyd yn gysylltiedig â gwaith ymchwil pwysig i ddiabetes math 2, ac ymunaf â'm cydweithwyr i groesawu'r cymorth ariannol y mae'r gwaith wedi'i gael gan Lywodraeth y

## Cynulliad.

The increasing prevalence of diabetes, particularly type 2 diabetes, brings significant challenges, and a review of local health board provision of services is crucial. As the national service framework recognises, if diabetes is poorly controlled, complications can occur. Diabetics must be encouraged to monitor their condition. That will help to ensure that they are less likely to suffer serious health problems in later life, such as those affecting the heart, eyes, limbs and, as my colleague has just mentioned, the brain. Only 2 per cent of diabetics currently participate in the free educational courses provided, and, as the Assembly Government has admitted, this must be given greater priority. Of all the diabetics in Wales, 42,000 are not achieving their recommended blood glucose levels, increasing the chance of them suffering from serious health problems in the future. Therefore, every effort must be made to promote education and to make it as accessible as possible. That could improve the lives of thousands of diabetics and, in the long term, could yield significant savings for the health service in Wales.

Experts have estimated that diabetes accounts for 10 per cent of NHS costs, amounting to around £0.5 billion each year. Dai Williams of Diabetes UK Cymru argues that a fortune could be saved in Wales by investing a small amount of money on structured education; therefore further promotion of existing educational courses is the key. Additionally, many people will suffer from diabetes for up to 10 years without knowing it. This is astonishing, and this has obvious consequences for their health. It is essential that the Welsh Assembly Government does all that it can to raise awareness and fully promote the need to get early symptoms assessed. Too many people dismiss signs of symptoms, and efforts must be made to change this. We cannot sustain this.

Mae'r ffaith i ddiabetes ddod yn fwy cyffredin, yn enwedig diabetes math 2, yn cyflwyno heriau sylweddol, ac mae'n hollbwysig cynnal adolygiad o ddarpariaeth y byrddau iechyd lleol. Fel y mae'r fframwaith gwasanaeth cenedlaethol yn cydnabod, os na reolir diabetes yn ddigon da, gall cymhlethdodau ddigwydd. Rhaid annog pobl sydd â diabetes i fonitro'u cyflwr. Bydd hynny'n helpu i sicrhau eu bod yn llai tebygol o ddioddef problemau iechyd difrifol yn nes ymlaen mewn bywyd, megis problemau'n effeithio ar y galon, y llygaid, y coesau a'r breichiau, a'r ymennydd, fel y mae fy nghydweithiwr newydd sôn. Ar hyn o bryd, dim ond 2 y cant o bobl â diabetes sy'n cymryd rhan yn y cyrsiau addysgol rhad ac am ddim a ddarperir, ac fel y mae Llywodraeth y Cynulliad wedi cyfaddef, rhaid rhoi mwy o flaenoriaeth i hyn. O'r holl bobl sydd â diabetes yng Nghymru, nid yw 42,000 ohonynt yn cyrraedd y lefelau glwcos yn y gwaed a argymhellir ar eu cyfer, sy'n cynyddu'r perygl y byddant yn dioddef problemau iechyd difrifol yn y dyfodol. Felly, rhaid gwneud pob ymdrech i hybu addysg a'i gwneud mor hygyrch â phosibl. Gallai hynny wella bywyd miloedd o bobl sydd â diabetes, ac yn y tymor hir, gallai gynhyrchu arbedion sylweddol i'r gwasanaeth iechyd yng Nghymru.

Mae arbenigwyr wedi amcangyfrif bod diabetes yn cyfrif am 10 y cant o gostau'r GIG, sy'n dod i oddeutu £0.5 biliwn bob blwyddyn. Mae Dai Williams o Diabetes UK Cymru yn dadlau y gellid arbed ffortiwn yng Nghymru drwy fuddsoddi swm bach o arian mewn addysg strwythuredig; felly, yr hyn sy'n allweddol yw hyrwyddo'r cyrsiau addysgol sydd ar gael eisoes. Yn ogystal, bydd llawer o bobl yn dioddef o ddiabetes am hyd at 10 mlynedd heb yn wybod iddynt. Mae hynny'n syfrdanol, ac mae iddo ganlyniadau amlwg i'w hiechyd. Mae'n hanfodol bod Llywodraeth y Cynulliad yn gwneud popeth yn ei gallu i godi ymwybyddiaeth a hyrwyddo'n llawn yr angen i asesu symptomau cynnar. Mae gormod o bobl yn diystyru arwyddion o symptomau, a rhaid gwneud ymdrechion i newid hynny. Ni allwn gynnal hyn.

I also want to focus on my friend Angela's point on the need to introduce the SCI-DC software system. Health professionals in Scotland have highlighted the significant benefits of the software. I am sure that that software can also help Welsh people. The system allows health institutions to audit the care that they provide. Additionally, results suggest that since its implementation in Scotland, there has been a significant decrease in the number of amputations and the diabetes-related eye complication, retinopathy. A report has found that the lifetime costs of dealing with eye problems can cost up to £237,000 per person, so the public health and financial benefits are clear. I am aware that the cross-party group on diabetes has called on the Department for Health and Social Services to enable it to explore the viability of rolling out the system in Wales and such an assessment is crucial. It is clear that diabetes is a growing problem and it must be tackled now.

**Peter Black:** I also thank the Welsh Conservatives for bringing forward this debate. This is an important debate and it is clear from listening to the contributions that have been made so far that, for the second time today, we are debating an important health subject where the need for communication and consistency of treatment across the whole of Wales is one that is being highlighted as being in need of attention. The reference in the motion to the Scottish information system, SCI-DC—I am not quite sure how you pronounce it either—is important because the framework that it underpins ensures that you get effective information, that you are able to identify important milestones and have the information at your disposal to manage that properly. I would, however, caution against the sort of scenario that Angela Burns was painting on how computer systems, if taken further, can effectively solve all of our problems. Information systems and computer systems in particular are dependent on the information that is inputted. They are there to supplement human decisions and the human

Yr wyf hefyd am ganolbwyntio ar bwynt fy nghyfaill, Angela, ynghylch yr angen i gyflwyno system feddalwedd SCI-DC. Mae gweithwyr iechyd proffesiynol yn yr Alban wedi tynnu sylw at fanteision sylweddol y feddalwedd hon. Yr wyf yn siŵr y gall y feddalwedd honno helpu pobl Cymru hefyd. Mae'r system yn caniatáu i sefydliadau iechyd archwilio'r gofal y maent yn ei ddarparu. Yn ogystal, ers i'r system gael ei gweithredu yn yr Alban mae canlyniadau'n awgrymu bod lleihad sylweddol wedi bod yn nifer y llawdriniaethau i dorri rhan o'r corff i ffwrdd a nifer yr achosion o retinopathi, sef y cymhlethdod â'r llygaid sy'n gysylltiedig â diabetes. Mae adroddiad wedi darganfod y gall costau ymdrin â phroblemau â'r llygaid ar hyd oes unigolyn gostio hyd at £237,000 y pen, felly mae'r manteision o safbwynt iechyd y cyhoedd a'r manteision ariannol yn amlwg. Yr wyf yn ymwybodol i'r grŵp trawsbleidiol ar ddiabetes alw ar Yr Adran Iechyd a Gwasanaethau Cymdeithasol i'w alluogi i archwilio dichonolrwydd cyflwyno'r system yng Nghymru, ac mae cynnal asesiad o'r fath yn hollbwysig. Mae'n amlwg bod diabetes yn broblem sydd ar gynnydd, a rhaid mynd i'r afael ag ef yn awr.

**Peter Black:** Yr wyf innau'n diolch i'r Ceidwadwyr Cymreig am gyflwyno'r ddadl hon. Mae'n ddadl bwysig, ac mae'n amlwg, o wrando ar y cyfraniadau a wnaed hyd yn hyn, ein bod am yr ail waith heddiw yn trafod pwnc pwysig o safbwynt iechyd, lle pwysleisir yr angen i roi sylw i gyfathrebu a sicrhau triniaeth gyson ar draws Cymru gyfan. Mae'r cyfeiriad yn y cynnig at system wybodaeth yr Alban, SCI-DC—nid wyf innau ychwaith yn siŵr sut i'w ynganu—yn bwysig, oherwydd mae'r fframwaith sy'n sail i'r system yn sicrhau bod gennych wybodaeth effeithiol, eich bod yn gallu adnabod cerrig milltir pwysig a bod gwybodaeth ar gael ichi allu rheoli hynny'n iawn. Fodd bynnag, byddwn yn rhybuddio rhag y math o sefyllfa a ddarluniwyd gan Angela Burns o ran sut y gall systemau cyfrifiadurol, os cânt eu cymryd ymhellach, ddatrys ein holl broblemau, i bob pwrpas. Mae systemau gwybodaeth, a systemau cyfrifiadurol yn enwedig, yn ddibynnol ar y wybodaeth a roddir i mewn iddynt. Fe'u bwriadwyd i ychwanegu at benderfyniadau dyn a'r modd y mae dyn yn datrys problemau penodol, yn



management of particular problems, rather than taking over and doing it for them. It is important that we understand that. On the young man who Angela described, who tragically lost his life, my understanding was that the authorities understood the problem, they just did not tackle it. I do not know whether a computer system would have dealt with that particular instance.

**Angela Burns:** I absolutely agree. A computer system is only as good as what goes into it and those who read it. The point that I was making was that they were only aware of the situation because they had been phoned by an Assembly Member and told about it, but there was no liaison with them from the health professionals. It might have helped had they been more aware.

**Peter Black:** That is a good point. The issue is that, given the number of computer systems in use by local authorities and health authorities around Wales, the chances of any two of them talking to each other successfully are fairly remote. I would not hold out any hope on that point either.

I want to make a point about insulin pump therapy, which helps you to achieve better blood sugar control, reducing the risk of developing diabetic complications such as blindness. Research has shown that achieving consistently safe blood-sugar levels can lower the risk of serious diabetic complications by as much as 75 per cent, which improves health and reduces the drain of treating complications on the national health service. Around 5 per cent of the entire health service budget is spent on treating type 1 diabetes, and yet receiving an insulin pump is still a postcode lottery, with only 4 per cent of the UK using pumps.

5.50 p.m.

**Peter Black:** I am not sure what the figures are for Wales. If we compare that to the figure of 20 per cent in Europe and 35 per cent in the United States, we can see that we are clearly lagging behind on that. That

hytrach na chymryd drosodd a gwneud y gwaith yn ein lle. Mae'n bwysig inni ddeall hynny. O ran y dyn ifanc a ddisgrifiwyd gan Angela, a fu farw'n drasig iawn, yr oeddwn i ar ddeall bod yr awdurdodau'n deall y broblem, ond eu bod heb fynd i'r afael â hi. Wn i ddim a fyddai system gyfrifiadurol wedi ymdrin â'r enghraifft benodol honno.

**Angela Burns:** Cytunaf yn llwyr. Ni all system gyfrifiadurol fod yn well na'r hyn a gaiff ei roi ynddi a'r bobl sy'n ei darllen. Y pwynt yr oeddwn yn ei wneud oedd mai'r unig reswm y daeth yr awdurdodau i wybod am y sefyllfa oedd oherwydd i Aelod o'r Cynulliad eu ffonio a dweud wrthynt amdani, ond ni chafwyd dim trafodaethau rhyngddynt hwy a'r gweithwyr iechyd proffesiynol. Efallai y byddai wedi helpu pe baent wedi bod yn fwy ymwybodol.

**Peter Black:** Mae hwnnw'n bwynt da. Y broblem yw bod awdurdodau lleol ac awdurdodau iechyd ledled Cymru'n defnyddio cynifer o systemau cyfrifiadurol fel mai prin yw'r gobaith y bydd unrhyw ddwy system yn siarad â'i gilydd yn llwyddiannus. Ni fyddwn yn rhy obeithiol ynghylch hynny ychwaith.

Yr wyf am wneud pwynt am therapi pwmp inswlin, sy'n eich helpu i reoli'r siwgr yn eich gwaed yn well, gan leihau'r perygl o ddatblygu cymhlethdodau diabetig megis dallineb. Mae ymchwil wedi dangos y gall sicrhau lefelau diogel o siwgr yn y gwaed yn gyson leihau'r perygl o brofi cymhlethdodau difrifol gyda diabetes cymaint â 75 y cant, sy'n gwella iechyd ac yn lleihau'r gost i'r gwasanaeth iechyd gwladol o drin cymhlethdodau. Caiff oddeutu 5 y cant o gyllideb gyfan y gwasanaeth iechyd gwladol ei wario ar drin diabetes math 1, ac eto mae cael pwmp inswlin yn dal i ddibynnu ar loteri cod post, gyda dim ond 4 y cant o'r DU yn defnyddio pwmp.

**Peter Black:** Nid wyf yn siŵr beth yw'r ffigurau ar gyfer Cymru. Os byddwn yn cymharu hynny â'r ffigur o 20 y cant yn Ewrop a 35 y cant yn y Deyrnas Unedig, gallwn weld ei bod yn amlwg ein bod ni ar ei

means that patients in Wales and the rest of the UK are missing out on the most advanced and newest forms of treatment. Everyone in Wales with type 1 diabetes would benefit from using an insulin pump and should have access to one. I would be grateful if the Minister could look at that as part of her response to the debate. Clearly, someone's suitability for an insulin pump should be determined by clinical need and patient choice, and not on the basis of a postcode lottery or the ability to self-fund treatment. If the NHS was able to make this provision, it would save itself money further down the line. That sort of long-term investment is what the Welsh Government is all about nowadays, ensuring that we get the best value for money in our health service.

Many good points have already been made, but to finish my contribution to the debate, I wish to refer briefly to the amendments tabled. My preference is to support the original motion as drafted, particularly with regard to point 3. It seems to me that calling on the Welsh Government to conduct a review of local health board provision of diabetes services is much clearer than asking it to have a clear view. You have to have a review to find out whether it has a clear view anyway. Such a review is long overdue and would benefit us tremendously. I regret very much that we are trying to water down the motion in this way. I do not think that following the original motion would be particularly difficult or expensive, and I do not think that it would be particularly damaging to the Government to accept that. Equally, with point 4, we prefer the word 'implement' to the word 'explore'. The Scottish system is well tried and tested, and it is worth taking it on board straight away.

**Paul Davies:** I am pleased to have the opportunity to contribute to this important debate today. First, I wish to commend the hard work of all the staff and volunteers at Diabetes Cymru and the efforts of the cross-party group on diabetes, chaired ably by Jeff Cuthbert. The group is doing a fantastic job of raising awareness of diabetes and diabetes services in Wales. I know that it has already been said today, but in order to raise awareness it is worth repeating the fact that

hól hi. Mae hynny'n golygu bod cleifion yng Nghymru a gweddill y DU yn colli allan ar y triniaethau mwyaf datblygedig a newydd. Byddai pawb yng Nghymru sydd â diabetes math 1 yn elwa o ddefnyddio pwmp inswlin, a dylent gael mynediad i un. Byddwn yn ddiolchgar pe gallai'r Gweinidog ystyried hynny fel rhan o'i hymateb i'r ddadl. Yn amlwg, dylid penderfynu a yw rhywun yn addas i gael pwmp inswlin ar sail angen clinigol a dewis y claf, ac nid ar sail loteri cod post neu allu cleifion i dalu am eu triniaeth eu hunain. Pe bai'r GIG yn gallu gwneud y ddarpariaeth hon, byddai'n arbed arian iddo'i hun yn y pen draw. Dyna'r math o fuddsoddiad tymor hir y dylai Llywodraeth Cymru fod yn ei wneud y dyddiau hyn, gan sicrhau ein bod yn cael y gwerth gorau am arian yn ein gwasanaeth iechyd.

Mae nifer o bwyntiau da eisoes wedi'u gwneud, ond i orffen fy nghyfraniad i'r ddadl, hoffwn gyfeirio'n fyr at y gwelliannau a gynigwyd. Yr wyf yn ffafrio cefnogi'r cynnig gwreiddiol fel y cafodd ei ddrafftio, yn enwedig o safbwynt pwynt 3. Ymddengys imi fod galw ar Lywodraeth Cymru i gynnal adolygiad o ddarpariaeth byrddau iechyd lleol o wasanaethau diabetes yn llawer gwell na gofyn iddi gael dealltwriaeth glir. Rhaid cynnal adolygiad i ddarganfod a oes ganddi ddealltwriaeth glir beth bynnag. Mae'n hen bryd cynnal adolygiad o'r fath, a byddem yn elwa'n fawr ohono. Yr wyf yn gresynu'n fawr ein bod yn ceisio gwanhau'r cynnig fel hyn. Ni chredaf y byddai dilyn y cynnig gwreiddiol yn arbennig o anodd na chostus, ac ni chredaf y byddai'n arbennig o niweidiol i'r Llywodraeth dderbyn hynny. Yn yr un modd, gyda phwynt 4, mae'n well gennym y gair 'gweithredu' na'r gair 'archwilio'. Mae'r system a geir yn yr Alban wedi'i phrofi, ac mae'n werth ei mabwysiadu ar unwaith.

**Paul Davies:** Yr wyf yn falch o gael y cyfle i gyfrannu at y ddadl bwysig hon heddiw. Yn gyntaf, hoffwn gymeradwyo'r gwaith caled a wneir gan yr holl staff a'r gwirfoddolwyr yn Diabetes Cymru, ac ymdrechion y grŵp trawsbleidiol ar ddiabetes, a gaiff ei gadeirio'n fedrus gan Jeff Cuthbert. Mae'r grŵp yn gwneud gwaith ardderchog yn codi ymwybyddiaeth o ddiabetes a gwasanaethau diabetes yng Nghymru. Gwn i hyn gael ei ddweud eisoes heddiw, ond er mwyn codi

more than 146,000 people in Wales have been diagnosed with the condition. It is clear that it is on the increase in Wales. As we have heard today, Diabetes Cymru estimates that a staggering 50,000 people have the condition, but have not yet been diagnosed. As we all know, untreated diabetes can have serious health consequences, including blindness, immobility and the need for amputations, and can lead to chronic diseases such as heart disease. As a result, it is essential that all of us, including the Welsh Assembly Government, do everything in our power to raise awareness of diabetes across the country. It is important that we see the administering of efficient and swift services and condition management to those suffering from diabetes.

I had the privilege of launching and taking part in a walk for Diabetes Cymru in my constituency recently. The event was well attended by a range of people, young and old. We all have a responsibility to raise awareness and bring this very important issue to the forefront of people's minds. What has struck me is the figure that Andrew R.T. Davies mentioned earlier, namely that it is predicted that, by 2025, the number of people diagnosed with diabetes in Wales will have increased to around 225,000. A large part of this is attributed to unhealthy lifestyles and unsavoury habits. Now, more than ever, it is important to stress the importance of living and eating healthily and exercising more. We must also do more to encourage people to give up bad habits such as smoking, which is a huge risk factor in relation to developing diabetes. During these difficult financial times, we should be doing more to encourage people to get active.

I understand from recent figures that diabetes costs the Welsh economy £480 million a year. By investing in education, I am sure that we can start to chip away at this cost. The Welsh Assembly Government must therefore work with key stakeholders to educate people and raise awareness of the condition. This education must be much more focused at a local health board level, as well.

ymwybyddiaeth, mae'n werth ailadrodd y ffaith i dros 146,000 o bobl yng Nghymru gael diagnosis o'r cyflwr. Mae'n amlwg ei fod ar gynnydd yng Nghymru. Fel yr ydym wedi clywed heddiw, mae Diabetes Cymru yn amcangyfrif bod y cyflwr ar 50,000 o bobl, sy'n nifer syfrdanol, ond nad ydynt eto wedi cael diagnosis. Fel y gwyr pob un ohonom, os na chaiff ei drin gall diabetes gael effeithiau difrifol ar iechyd, gan gynnwys dallineb, anallu i symud a'r angen i dorri rhan o'r corff i ffwrdd, a gall arwain at glefydau cronig megis clefyd y galon. O ganlyniad, mae'n hanfodol i bob un ohonom, gan gynnwys Llywodraeth y Cynulliad, wneud popeth yn ein gallu i godi ymwybyddiaeth o ddiabetes ar draws y wlad. Mae'n bwysig ein bod yn gweld gwasanaethau effeithlon a chyflym yn cael eu darparu i'r sawl sy'n dioddef o ddiabetes, ynghyd â dulliau o reoli'r cyflwr.

Cefais y ffrainc o lansio a chymryd rhan mewn taith gerdded i Diabetes Cymru yn fy etholaeth yn ddiweddar. Daeth llawer o bobl i'r digwyddiad, yn hen ac yn ifanc. Mae gan bob un ohonom gyfrifoldeb i godi ymwybyddiaeth a sicrhau bod y mater pwysig iawn hwn yn flaenllaw ym meddyliau pobl. Yr hyn sydd wedi fy nharo yw'r ffigur y soniodd Andrew R.T. Davies amdano yn gynharach, sef yr amcangyfrifir y bydd nifer y bobl sydd wedi cael diagnosis o ddiabetes yng Nghymru erbyn 2025 wedi codi i oddeutu 225,000. Ffyrdd afiach o fyw ac arferion annymunol sydd i gyfrif am lawer o hynny. Yn awr, yn fwy nag erioed, mae'n bwysig pwysleisio mor bwysig yw byw a bwyta'n iach a gwneud rhagor o ymarfer corff. Rhaid inni hefyd wneud rhagor i annog pobl i roi'r gorau i arferion gwael, megis ysmegu, sy'n ffactor risg enfawr o ran datblygu diabetes. Yn ystod yr adegau anodd hyn yn ariannol, dylem fod yn gwneud rhagor i annog pobl i fynd ati i gadw'n heini.

O weld y ffigurau diweddaraf, deallaf fod diabetes yn costio £480 miliwn i economi Cymru bob blwyddyn. Drwy fuddsoddi mewn addysg, yr wyf yn siŵr y gallwn ddechrau lleihau'r gost hon. Felly, rhaid i Lywodraeth y Cynulliad weithio gyda rhanddeiliaid allweddol er mwyn addysgu pobl a chodi ymwybyddiaeth o'r cyflwr. Rhaid cael llawer mwy o ffocws ar yr addysg

By working locally, we can ensure that the correct and appropriate facilities are in place for more people to attend diabetes courses. Prioritising education will prove to be worth while in tackling this condition. I hope that the Welsh Assembly Government will conduct a review of local health board provision of diabetes services, and that it works in partnership with them and looks for more innovative ways to work on a local level with diabetes sufferers in Wales.

I accept and commend the Welsh Assembly Government for funding research into type 2 diabetes last year to the tune of £60,000, which I hope will lead to new treatments. I accept that obtaining new funding is very difficult in the current financial climate, but perhaps the Minister will be kind enough in her response to tell us whether there will be other research funding available in the near future. This is essential because I understand that Diabetes UK has stated that more research to investigate new technologies, such as non-invasive blood glucose monitoring and insulin delivery, is particularly important.

As I mentioned earlier, unfortunately, diabetes is on the increase in Wales and this brings forward substantial public health challenges. The Welsh Assembly Government now needs to re-assess the management and co-ordination of diabetes services. Research from Scotland identifies that the SCI—DC system is of huge benefit to diabetes services there. It is essential that Wales explores the viability of implementing a similar system.

Finally, I reiterate my earlier point that some pleasing progress has been made towards tackling diabetes and the stigma associated with the condition. I hope that Members will support today's motion so that we can work together to further improve services for diabetes sufferers across Wales.

**David Lloyd:** Mae'n bleser cael cyfrannu at

hon ar lefel byrddau iechyd lleol hefyd.

Drwy weithio'n lleol, gallwn sicrhau bod y cyfleusterau cywir a phriodol ar gael er mwyn i ragor o bobl fynychu cyrsiau diabetes. Bydd blaenoriaethu addysg yn fuddiol wrth fynd i'r afael â'r cyflwr hwn. Gobeithiaf y bydd Llywodraeth y Cynulliad yn cynnal adolygiad o ddarpariaeth byrddau iechyd lleol o wasanaethau diabetes, a gobeithiaf y bydd yn gweithio mewn partneriaeth â'r byrddau ac yn chwilio am ffyrdd mwy arloesol o weithio'n lleol gyda'r sawl sy'n dioddef o ddiabetes yng Nghymru.

Derbyniaf fod Llywodraeth y Cynulliad wedi rhoi oddeutu £60,000 i ariannu gwaith ymchwil i ddiabetes math 2 y llynedd, ac yr wyf yn cymeradwyo hynny ac yn gobeithio y bydd yn arwain at driniaethau newydd. Derbyniaf fod cael cyllid newydd yn anodd iawn yn yr hinsawdd ariannol sydd ohoni, ond efallai y byddai'r Gweinidog yn ddigon caredig i ddweud wrthym yn ei hymateb a fydd cyllid arall ar gael ar gyfer gwaith ymchwil yn y dyfodol agos. Mae hynny'n hanfodol, oherwydd deallaf i Diabetes UK ddatgan bod gwneud rhagor o waith ymchwil i dechnolegau newydd, megis monitro'r glwcos yn y gwaed a darparu inswlin heb ddefnyddio nodwyddau, yn hynod o bwysig.

Fel y soniais yn gynharach, yn anffodus mae diabetes ar gynydd yng Nghymru, ac mae hynny'n cyflwyno heriau sylweddol i iechyd y cyhoedd. Mae angen i Lywodraeth y Cynulliad ailasesu'r modd y caiff gwasanaethau diabetes eu rheoli a'u cydlynu yn awr. Mae gwaith ymchwil o'r Alban wedi nodi bod y system SCI-DC o fudd sylweddol i wasanaethau diabetes yn y fan honno. Mae'n hanfodol bod Cymru'n archwilio ymarferoldeb gweithredu system debyg.

Yn olaf, yr wyf yn ailadrodd y pwynt a wneuthum yn gynharach, sef bod rhywfaint o gynydd cadarnhaol wedi'i wneud o ran mynd i'r afael â diabetes a'r stigma sy'n gysylltiedig â'r cyflwr. Gobeithiaf y bydd yr Aelodau'n cefnogi cynnig heddiw, fel y gallwn weithio gyda'n gilydd i wella gwasanaethau ymhellach i'r sawl sy'n dioddef o ddiabetes ar draws Cymru.

**David Lloyd:** It is a pleasure to contribute to

y ddadl hon fel aelod o'r grŵp trawsbleidiol ar ddiabetes. Cyn i ddau feddyg o'r enw Dr Banting a Dr Best ddarganfod inswlin ym 1923, byddai pobl yn marw yn ifanc iawn o'r clefyd siwgr. Mae pethau wedi newid yn syfrdanol ers y dyddiau hynny.

Yr ydym wedi clywed y ffigurau erchyll a chynyddol. Y pwyslais yr oeddwn am ei roi ar fy nghyfraniad byr y prynhawn yma yw rôl yr unigolyn sydd â chlefyd siwgr wrth ofalu am ei glefyd ei hunan. Mae'n ddigon teg, yn naturiol, defnyddio'r gwasanaethau sydd ar gael, megis mynychu clinig y meddyg teulu, sy'n darparu, fel arfer, safon arbennig o ofal yn ein cymunedau. Cynhelir mwyafrif y clinigau sy'n gofalu am y clefyd siwgr heddiw gan y meddyg teulu. Dim ond yr achosion mwyaf bregus a chymhleth sy'n mynd yn ôl ac ymlaen i ysbytai y dyddiau hyn. Y meddyg teulu sy'n gofalu am ein cleifion sydd â'r clefyd siwgr.

Mae'r clefyd siwgr hefyd yn newid. Ers llawer dydd, byddem yn galw'r math ag inswlin yn '*juvenile onset*', a'r math y byddai'r henoed yn ei gael yn '*maturity onset*'. Gyda'r graddfeydd cynyddol o ordewdra a gorfwyta, yr ydym yn awr yn darganfod bod yr elfen hen ffasiwn o '*maturity onset*', a'r math hwnnw o ddiabetes, yn digwydd ymysg ein plant a'n pobl ifanc. Felly, bu'n rhaid newid yr enwau i 'math 1' a 'math 2'.

Felly, mae'r nifer sy'n dioddef yn cynyddu a cheir her. Yr ydym oll wedi clywed am sgîl-ffeithiau echrydus y clefyd hwn, ac yn ymwybodol ohonynt. Gan fod y siwgr yn cylchredeg yn y gwaed, mae'n ymgasglu mewn mannau annaturiol, megis yn waliau ein rhydweiliau, ac yn achosi problemau gyda dallineb wrth ymgasglu yn ein llygaid. Wrth i'r siwgr ymgasglu yn waliau ein rhydweiliau, gall achosi strôc, trawiadau ar y galon a madredd, sy'n peri i rywun golli troed neu goes. Mae sgîl-ffeithiau y siwgr yn ymgasglu yn rhydweiliau bychain yr arennau yn achosi arennau ffaeledig, dialysis a'r gofyn cynyddol am drawsblannu arennau.

6.00 p.m.

Felly, ceir her sylweddol ym maes iechyd

this debate as a member of the cross-party group on diabetes. Before two doctors called Dr Banting and Dr Best discovered insulin in 1923, people would die very young from diabetes. Things have changed dramatically since those days.

We have heard the tragic figures, which are increasing. In my short contribution this afternoon, I want to emphasise the role of the individual with diabetes in caring for his or her diabetes. It is fair enough, naturally, to use the services that are available, such as attending a general practitioner's clinic, which provides, usually, a high standard of care in our communities. Most clinics for diabetes are held by the GP. It is only the most vulnerable and complex cases that go back and forth to hospitals these days. It is the GP who cares for patients with diabetes.

Diabetes is also changing. We would previously call insulin dependent diabetes '*juvenile onset*', and the type suffered by the elderly would be called '*maturity onset*'. With rising rates of obesity and overeating, we are now discovering that the old-fashioned element of '*maturity onset*', and that kind of diabetes, occurs among our children and young people. Therefore, it was necessary to change the names to 'type 1' and 'type 2'.

Therefore, the number of sufferers is increasing and there is a challenge. We have all heard of the dreadful side effects of this disease and are aware of them. As the sugar circulates in the blood, it accumulates in unnatural places, such as the walls of our arteries, and causes problems such as blindness as it accumulates in our eyes. As the sugar accumulates in the walls of our arteries, it can cause strokes, heart attacks and gangrene, which can cause someone to lose a foot or leg. The side-effects of sugar accumulating in the small renal arteries cause kidney failure, dialysis, and is causing an increase in the demand for kidney transplantation.

Therefore, there is a significant challenge in

drwy'r holl sgîl-ffeithiau a achosir gan lefel uchel siwgr yn y gwaed. Nid clefyd bach di-nod yw clefyd y siwgr. Y brif neges yw bod yn rhaid i'r sawl sy'n dioddef o glefyd y siwgr ei gymryd o ddifrif. Yr oeddwn yn falch o glywed y clefyd yn cael ei gymryd o ddifrif yng nghyfraniad Jeff Cuthbert, sy'n gadeirydd y grŵp ambleidiol ar ddiabetes ac sy'n dioddef o glefyd y siwgr. Dyna'r brif neges: nid clefyd neu sgîl-ffaith di-nod yw diabetes ac, fel y dywedodd Jeff, nid oes y fath beth â '*mild diabetes*'. Mae pob math o ddiabetes yn gallu achosi sgîl-ffeithiau echrhydus fel dallineb, trawiad ar y galon, strôc, arenau ffaeledig ac yn y blaen. Nid oes y fath beth â '*mild diabetes*'.

Mae'n rhaid cadw rheolaeth gadarn ar lefel y siwgr yn y gwaed. Yn y bôn, cyfrifoldeb yr unigolyn yw hynny. Deiet iach, cymedrol, heb siwgr yw'r math o ddeiet y dylem i gyd fod yn ei fwyta. Nid deiet ar gyfer y sawl sy'n dioddef o glefyd y siwgr yw hwnnw'n unig; dylem i gyd fod yn bwyta'r math hwnnw o ddeiet. Dylem hefyd sicrhau bod ein pwysau gwaed yn iawn a'n bod yn mynd am brofion llygad yn rheolaidd. Hefyd, ar lefel genedlaethol, dylid sicrhau ein bod yn gallu gweithredu amcanion fframwaith genedlaethol ar gyfer y clefyd siwgr.

Cafwyd llawer o sôn am y system gyfrifiadurol yn yr Alban, sef y SCI-DC, sydd wedi galluogi pethau i gamu ymlaen yno. Yr oeddwn yn falch o nodi, o ddarllen y papurau a gawsom yn y grŵp ambleidiol yr wythnos hon, bod y Gweinidog yn edrych ar y system honno. Gobeithiaf y byddwn yn gweld y system honno yn gweithredu yma hefyd. Byrdwn fy neges y prynhawn yma yw mai cyfrifoldeb yr unigolyn yw rheoli lefel siwgr y gwaed, a dylid sicrhau bod unigolion sydd â'r clefyd siwgr yn cymryd eu clefyd o ddifrif.

**Mark Isherwood:** Last June, I and other Assembly Members attended Diabetes UK's 75th birthday party in the Senedd. Established in 1934 by science fiction author H.G. Wells, it is the largest diabetes organisation in the UK, working for people with diabetes, funding research, campaigning and helping people to live with the condition. Its mission is to improve the lives of people with diabetes and to work towards a future

the health field through all the side effects caused by high blood-sugar levels. Diabetes is not a minor, insignificant disease. The main message is that those who suffer from diabetes should take it seriously. I was pleased to hear the disease being taken seriously in the contribution made by Jeff Cuthbert, who chairs the all-party group on diabetes and who has diabetes. This is the main message: diabetes is not an insignificant disease or side effect and, as Jeff mentioned, there is no such thing as mild diabetes. Each type of diabetes could cause terrible side effects such as blindness, heart attack, stroke, kidney failure and so on. There is no such thing as mild diabetes.

One must keep tight control of blood-sugar levels. In essence, that is the responsibility of the individual. A healthy, moderate, sugar-free diet is the type of diet that we should all be eating. That type of diet is not just suitable for those suffering from diabetes; we should all be eating that kind of diet. We should also ensure that our blood pressure is okay and that we receive regular eye tests. Also, at a national level, we should ensure that we can implement the objectives of the national framework for diabetes.

There has been much talk about the computer system in Scotland, the SCI-DC, which has enabled things to move forward there. I was pleased to note, from reading the papers that we had in the all-party group this week, that the Minister is looking at that system. I hope that we will see that system operating here as well. The thrust of my message this afternoon is that it is the responsibility of the individual to control his or her blood-sugar levels, and that we need to ensure that individuals with diabetes take their disease seriously.

**Mark Isherwood:** Fis Mehefin diwethaf, mynychais i ac Aelodau eraill o'r Cynulliad barti pen-blwydd Diabetes UK yn 75 oed yn y Senedd. Fe'i sefydlwyd yn 1934 gan yr awdur ffuglen wyddonol H.G. Wells, a'r sefydliad hwn yw'r sefydliad diabetes mwyaf yn y DU, sy'n gweithio ar ran pobl sydd â diabetes, yn ariannu gwaith ymchwil, yn ymgyrchu ac yn helpu pobl i fyw gyda'r cyflwr. Ei nod yw gwella bywydau pobl sydd

without it. Diabetes, as we have heard, is a serious metabolic condition, whereby there is too much sugar in the blood because the body cannot use it properly. If it is not properly treated and managed, it can lead to heart disease, stroke, kidney failure, blindness and nerve damage, leading to amputation. However, if people are supported to manage it well, they can live long and healthy lives with the condition. We have also heard that 146,000 people in Wales have been diagnosed with diabetes, which is forecast to rise to 225,000 by 2025. Some 50,000 people in Wales who have diabetes do not realise that they have the condition, and over 350,000 people have a pre-diabetes condition.

Last August, I was a guest at Diabetes UK Cymru's Measure Up roadshow at the Anglesey show. Nearly 2,700 people have been diagnosed with type 2 diabetes in Anglesey alone, and another 500 may have the condition but do not yet know it. More than 30,000 people have been diagnosed with diabetes in north Wales, and a further 6,000 have the condition but do not yet know it. More than 1,500 people were diagnosed with the condition in north Wales last year alone.

Last November, other Assembly Members and I attended the World Diabetes Day event in the Assembly, which was hosted by Diabetes UK Cymru and the diabetes peer support programme. It aimed to raise awareness about the condition and to highlight the need to do everything that we can to stop the ticking time bomb of type 2 diabetes. Type 2 symptoms tend to develop gradually, and mainly in people who are over 40. In the UK, about three in every 100 of those who are aged over 40, and about 10 in 100 of those aged over 65, have type 2 diabetes. It is more common in people who are overweight or obese, and it tends to run in families. It is more common in south-Asian and African-Caribbean people, and it often develops before the age of 40 in those groups. As we have heard, it can lie undetected for 10 years or more, meaning that, by the time of diagnosis, half already have complications.

â diabetes a gweithio i sicrhau dyfodol heb ddiabetes. Fel y clywsom, mae diabetes yn gyflwr metabolig difrifol, lle ceir gormod o siwgr yn y gwaed oherwydd na all y corff ei ddefnyddio'n iawn. Os na chaiff ei drin a'i reoli'n gywir, gall arwain at glefyd y galon, strôc, methiant yr arenau, dallineb a niwed i'r nerfau, gan arwain at gollu rhan o'r corff. Fodd bynnag, os caiff pobl eu cynorthwyo i reoli'r cyflwr yn iawn, gallant fyw bywyd hir ac iach gyda'r cyflwr. Yr ydym hefyd wedi clywed bod 146,000 o bobl yng Nghymru wedi cael diagnosis o ddiabetes, a bod disgwyl i'r ffigur hwnnw godi i 225,000 erbyn 2025. Nid yw oddeutu 50,000 o bobl yng Nghymru sydd â diabetes yn sylweddoli bod y cyflwr arnynt, ac mae gan dros 350,000 o bobl gyflwr cyn-ddiabetes.

Fis Awst diwethaf, yr oeddwn yn westai ar sioe deithiol *Measure Up* Diabetes UK Cymru yn Sioe Môn. Mae bron i 2,700 o bobl wedi cael diagnosis o ddiabetes math 2 ar Ynys Môn yn unig, ac mae'n bosibl bod gan 500 arall y cyflwr heb yn wybod iddynt. Mae dros 30,000 o bobl wedi cael diagnosis o ddiabetes yn y gogledd, ac mae gan 6,000 arall y cyflwr heb yn wybod iddynt. Cafodd dros 1,500 o bobl ddiagnosis o'r cyflwr yn y gogledd y llynedd yn unig.

Fis Tachwedd diwethaf, mynychodd Aelodau eraill o'r Cynulliad a finnau'r digwyddiad Diwrnod Diabetes y Byd yn y Cynulliad, a gynhaliwyd gan Diabetes UK Cymru a'r rhaglen cymorth gan gyfoedion i gleifion diabetes. Ei fwriad oedd codi ymwybyddiaeth o'r cyflwr a thynnu sylw at yr angen i wneud popeth yn ein gallu i atal problem diabetes math 2 rhag ffrwydro. Mae symptomau diabetes math 2 yn tueddu i ddatblygu'n raddol, ac yn bennaf ymysg pobl sydd dros 40 oed. Yn y DU, mae gan oddeutu tri o bob 100 o'r rheini sydd dros 40 oed ddiabetes math 2, ac mae gan oddeutu 10 o bob 100 o'r rheini sydd dros 65 oed ddiabetes math 2. Mae'n fwy cyffredin ymhlith pobl sydd dros bwysau neu'n ordew, ac mae'n tueddu i redeg yn y teulu. Mae'n fwy cyffredin mewn pobl o dras de-Asiaidd ac Affricanaidd-Caribiaidd, ac mae'n aml yn datblygu cyn i bobl yn y grwpiau hynny droi'n 40 oed. Fel y clywsom, gall fodoli heb gael diagnosis am 10 mlynedd neu ragor, sy'n golygu y bydd hanner y dioddefwyr eisoes wedi cael

Last week, other Members and I attended the Diabetes UK Cymru event in the Assembly to mark Diabetes Week, which sought to spread the word about common diabetes myths, such as the myth that type 2 diabetes is mild diabetes, and that people with diabetes cannot play sport and cannot drive. With more people diagnosed with the condition every day in Wales, it is essential that we raise awareness of these misconceptions and of diabetes itself, hence the timeliness of my party's motion today.

Despite a unanimous vote in the Assembly in 2004 in favour of regular targeted screening of at-risk groups, there are still concerns that diabetes screening can be patchy and inconsistent. Awareness campaigns and a programme for early detection should be a Welsh Government priority. For too many, there is a late diagnosis because people think that the symptoms of tiredness, thirst and going to the toilet a lot more are caused by stress or age.

One in three diabetics in Wales is failing to control their blood-glucose levels. The Welsh Government must therefore support people to self-manage their condition. The Welsh Government should implement a SCI-DC software system, as in Scotland, allowing patients to see their diabetes records, among other things, online. Scottish health professionals report impressive results and it is regrettable that the Welsh Government seeks to amend the motion before us today in order to merely explore rather than implement such a system for Wales. Yet again, it seems that the people of Wales lose out, when what is a reality in other parts of the UK is seen as a novel proposition in Wales.

Diabetes is one of the biggest health challenges facing us today. We must note the increase in rates of diabetes in Wales, raise awareness of the life-threatening complications that it can produce and review local health board provision of diabetes

cymhlethdodau erbyn iddynt gael diagnosis.

Yr wythnos diwethaf, mynychodd Aelodau eraill a finau'r digwyddiad gan Diabetes UK Cymru yn y Cynulliad i nodi Wythnos Diabetes. Nod y digwyddiad oedd ceisio lledaenu'r neges am y camsyniadau cyffredin ynghylch diabetes, megis y myth mai math ysgafn o ddiabetes yw diabetes math 2, a'r myth nad yw pobl â diabetes yn gallu gwneud chwaraeon a gyrru. Gyda mwy o bobl yn cael diagnosis o'r cyflwr bob dydd yng Nghymru, mae'n hanfodol inni godi ymwybyddiaeth o'r camsyniadau ynghylch diabetes, a dyna pam mae cynnig fy mhlaid heddiw mor amserol.

Er gwaethaf pleidlais unfrydol yn y Cynulliad yn 2004 o blaid sgrinio rheolaidd wedi'i dargedu at grwpiau mewn perygl, ceir pryderon o hyd bod gweithdrefnau sgrinio am ddiabetes yn gallu bod yn anghyson. Dylai ymgyrchoedd codi ymwybyddiaeth a rhaglen ar gyfer canfod diabetes yn gynnar fod yn flaenoriaeth i Lywodraeth Cymru. Caiff gormod o bobl ddiagnosis yn hwyr oherwydd eu bod yn meddwl mai straen neu oedran sydd i gyfrif am symptomau megis blinder, syched a mynd i'r tŷ bach yn amlach.

Mae un o bob tri pherson sydd â diabetes yng Nghymru yn methu â rheoli lefelau'r glwcos yn eu gwaed. Felly, rhaid i Lywodraeth Cymru gynorthwyo pobl i reoli'r cyflwr eu hunain. Dylai Llywodraeth Cymru weithredu system feddalwedd SCI-DC, fel sy'n digwydd yn yr Alban, gan ganiatáu i gleifion weld eu cofnodion diabetes, ymysg pethau eraill, ar-lein. Mae gweithwyr iechyd proffesiynol yn yr Alban wedi gweld canlyniadau trawiadol, ac mae'n anffodus bod Llywodraeth Cymru'n ceisio diwygio'r cynnig sydd ger ein bron heddiw er mwyn archwilio system o'r fath yn unig, yn hytrach na'i gweithredu yng Nghymru. Unwaith yn rhagor, ymddengys fod pobl Cymru ar eu colled, pan fydd rhywbeth sy'n realiti mewn rhannau eraill o'r DU yn ymddangos fel cynnig newydd sbon yng Nghymru.

Diabetes yw un o'r heriau mwyaf i iechyd sy'n ein hwynebu heddiw. Rhaid inni nodi'r cynnydd mewn cyfraddau diabetes yng Nghymru, codi ymwybyddiaeth o'r cymhlethdodau y gall eu hachosi, sy'n peryglu bywyd, ac adolygu darpariaeth y



services across the whole of our nation.

**Irene James:** I too welcome this debate on an issue that touches so many lives across Wales, with 3.5 per cent of the population suffering from it. As has already been said, around 50,000 people are living with undiagnosed diabetes. I recently had the opportunity to meet the Moseley family from Oakdale in my constituency, whose 10-year-old son has diabetes. It was heart-warming to hear how their son refuses to allow diabetes to interfere with his life, but I also heard about the difficulties faced by parents who have a child who suffers from diabetes. Mrs Moseley stressed how helpful she found speaking to other parents of children with diabetes.

Diabetes is on the increase in Wales and in the rest of the world, largely as a result of our lifestyles. Action has been taken by implementing a range of measures aimed at preventing and detecting diabetes. I know that this Government also takes helping people to make necessary lifestyle changes very seriously. This can be seen through initiatives such as Health Challenge Wales. The Labour-led Welsh Assembly Government is committed to giving people with diabetes, or at risk of developing diabetes, prompt access to high-quality services. We have also seen the publication of the all-Wales diabetes consensus guidelines.

I will conclude my remarks by mentioning the situation for young diabetics in schools. I am aware that facilities for children to administer insulin can be varied, ranging from school to school. Some children even have to use the school toilets instead of a dedicated room. It is important that we follow best practice on this and I would be interested to hear the Minister's comments on how we can ensure that schools treat this issue as sensitively as possible, to ensure that all young people receive the support that they need.

**The Minister for Health and Social Services (Edwina Hart):** In the main, we

byrddau iechyd lleol o wasanaethau diabetes ar draws y wlad i gyd.

**Irene James:** Yr wyf i hefyd yn croesawu'r ddadl hon ar fater sy'n effeithio ar fywydau cynifer o bobl ar draws Cymru, gyda 3.5 y cant o'r boblogaeth yn dioddef o'r cyflwr. Fel y dywedwyd eisoes, mae oddeutu 50,000 o bobl yn byw â diabetes heb gael diagnosis ohono. Yn ddiweddar, cefais y cyfle i gyfarfod â'r teulu Moseley o Oakdale yn fy etholaeth, sydd â mab 10 oed â diabetes. Yr oedd yn galonogol clywed sut mae eu mab yn gwrthod gadael i ddiabetes ymyrryd â'i fywyd, ond clywais hefyd am yr anawsterau sy'n wynebu nifer o rieni sydd â phlentyn sy'n dioddef o ddiabetes. Pwysleisiodd Mrs Moseley pa mor ddefnyddiol oedd siarad â rhieni eraill sydd â phlant sy'n dioddef o ddiabetes.

Mae nifer y bobl sydd â diabetes yng Nghymru ac yng ngweddill y byd ar gynnydd, a'n ffyrdd o fyw sydd bennaf gyfrifol am hynny. Mae camau wedi'u cymryd drwy weithredu ystod o fesurau sy'n ceisio atal a chanfod diabetes. Gwn fod y Llywodraeth hon hefyd o ddifrif ynghylch helpu pobl i wneud newidiadau angenrheidiol i'w ffordd o fyw. Gellir gweld hyn drwy fentrau megis Her Iechyd Cymru. Mae Llywodraeth y Cynulliad a arweinir gan y Blaid Lafur yn ymrwymo i roi mynediad prydlon i wasanaethau o safon i bobl sydd â diabetes, neu bobl sydd mewn perygl o ddatblygu diabetes. Yr ydym hefyd wedi gweld canllawiau consensws Cymru gyfan ar ddiabetes yn cael eu cyhoeddi.

Yr wyf am orffen fy sylwadau drwy sôn am y sefyllfa mewn ysgolion i bobl ifanc sydd â diabetes. Gwn fod cyfleusterau i blant roi inswlin i'w hunain yn gallu bod yn amrywiol, gan amrywio o un ysgol i'r llall. Mae'n rhaid i rai plant ddefnyddio toiledau'r ysgol hyd yn oed, yn hytrach nag ystafell benodol. Mae'n bwysig inni ddilyn arfer gorau yn hyn o beth, a byddai gennyf ddiddordeb mewn clywed sylwadau'r Gweinidog ynghylch sut y gallwn sicrhau bod ysgolion yn trin y mater hwn mor sensitif â phosibl, i sicrhau bod pob unigolyn ifanc yn cael y cymorth y mae ei angen arno.

**Y Gweinidog dros Iechyd a Gwasanaethau Cymdeithasol (Edwina Hart):** At ei gilydd,

have had excellent contributions on diabetes issues based on our experiences as Assembly Members and on the casework that comes to us. Mark Isherwood's contribution was rather churlish, as usual, not acknowledging the improvements that have been made, but I will concentrate in the main on the positive comments that were made, and I hope to be able to address those that were quite critical about the future delivery of the service.

I am delighted that Jeff Cuthbert and Dr Dai Lloyd have established the cross-party group because that is important for our discussion on diabetes. I was taken with Jeff's contribution, who spoke as someone who has diabetes, about the lifestyle changes that he has had to make to manage the disease. Of course, Dr Dai Lloyd, as a result of his clinical background, was also able to illustrate the fact that it is a serious illness. People will tell you casually that they have type 2 diabetes, but it is a serious illness. The impact of the disease on the individual and on the service is immense.

6.10 p.m.

Irene James commented on the issue of children and Andrew R.T. opened on that issue. We talk a lot about what we do in the health service, but I have to say that the national service framework for diabetes in Wales covers issues to do with children, particularly standards 5 and 6, and there have been some good achievements with that, with changes in consultant working hours and the development of evening adolescent clinics. Protocols are in place to manage childhood diabetes in line with the consensus guidelines and regulatory monitoring, and there are joint clinics between paediatrics and adult services to manage the transfer of care, which I think is an important issue. Also, all children newly diagnosed with diabetes receive individualised training programmes and have access 24 hours a day, seven days a week to a telephone advice service from health professionals in the diabetes team.

yr ydym wedi cael cyfraniadau ardderchog ynghylch materion yn ymwneud â diabetes yn seiliedig ar ein profiadau fel Aelodau'r Cynulliad ac ar y gwaith achos a ddaw i'n sylw. Yn ôl yr arfer, yr oedd cyfraniad Mark Isherwood braidd yn sarrug, gan nad oedd yn cydnabod y gwelliannau sydd wedi'u gwneud, ond canolbwyntiaf yn bennaf ar y sylwadau cadarnhaol a wnaed, gan obeithio y gallaf fynd i'r afael â'r sylwadau a oedd o bwys o ran y modd y caiff y gwasanaeth ei ddarparu yn y dyfodol.

Yr wyf wrth fy modd i Jeff Cuthbert a Dr Dai Lloyd sefydlu'r grŵp trawsbleidiol, oherwydd mae'r grŵp yn bwysig ar gyfer ein trafodaeth ar ddiabetes. Gwnaeth cyfraniad Jeff argraff arnaf, gan iddo siarad fel rhywun sydd â diabetes am y newidiadau y bu'n rhaid iddo'u gwneud i'w ffordd o fyw er mwyn rheoli'r clefyd. Wrth gwrs, yr oedd Dr Dai Lloyd, o ganlyniad i'w gefndir meddygol, hefyd yn gallu egluro ei fod yn salwch difrifol. Bydd pobl yn dweud wrthyf yn ddidaro bod ganddynt ddiabetes math 2, ond mae'n salwch difrifol. Mae'r effaith y mae'r clefyd yn ei chael ar yr unigolyn ac ar y gwasanaeth yn aruthrol.

Cafwyd sylw gan Irene James am blant, a dechreuodd Andrew R.T. ei gyfraniad drwy sôn am y mater hwnnw. Yr ydym yn sôn llawer am yr hyn yr ydym yn ei wneud yn y gwasanaeth iechyd, ond rhaid imi ddweud bod y fframwaith gwasanaeth cenedlaethol ar gyfer diabetes yng Nghymru yn ymdrin â materion yn ymwneud â phlant, yn enwedig safonau 5 a 6, a chafwyd rhai cyflawniadau da yn y cyswllt hwnnw, gyda'r newid mewn oriau gweithio ymgynghorwyr a datblygu clinigau gyda'r hwyr i bobl ifanc. Mae protocolau mewn grym i reoli diabetes ymhlith plant yn unol â'r canllawiau consensws a gwaith monitro rheoliadol, a cheir clinigau ar y cyd rhwng y gwasanaeth pediatreg a gwasanaethau oedolion i reoli gwaith trosglwyddo gofal, sy'n fater pwysig yn fy marn i. At hynny, mae pob plentyn sydd newydd gael diagnosis o ddiabetes yn cael rhaglen hyfforddi unigol, a chânt fynediad i wasanaeth cyngor dros y ffôn gan weithwyr iechyd proffesiynol yn y tîm diabetes 24 awr y dydd, saith niwrnod yr

wythnos.

However, like Irene, I think that there are areas for development and improvement, and the Minister for Children, Education and Lifelong Learning will have heard her comments about schools. Both he and I have been taking a great deal of interest in how we deal with the issue of children's health problems in school. I am sure that I can return to that matter at a later date. Other areas for development include increased paediatric nurse input. We also probably need additional paediatric diabetic specialist nurse hours across the piece. Those are the areas for development that I would like to look at with regard to children.

Fodd bynnag, yr wyf innau, fel Irene, o'r farn bod meysydd i'w datblygu a'u gwella, a bydd y Gweinidog dros Blant, Addysg a Dysgu Gydol Oes wedi clywed ei sylwadau am ysgolion. Mae'r Gweinidog a finau wedi bod yn cymryd diddordeb mawr yn y modd yr ydym yn ymdrin â phroblemau iechyd plant mewn ysgolion. Yr wyf yn siŵr y gallaf ddychwelyd at y mater hwnnw rywbryd eto. Mae'r meysydd eraill i'w datblygu'n cynnwys mwy o fewnbwn gan nyrsys pediatrig. Mae hefyd yn debyg bod angen inni sicrhau, yn gyffredinol, oriau ychwanegol gan nyrsys pediatrig sy'n arbenigo ym maes diabetes. Dyna'r meysydd i'w datblygu yr hoffwn eu hystyried o safbwynt plant.

Diabetes undoubtedly has a significant impact on people's lives, and it is also a serious factor, as Dr Lloyd indicated, in heart attacks, strokes, renal problems, and nerve damage. I therefore agree with the Conservatives that diabetes presents an important challenge for the NHS. The motion has, in the main, been accepted by the Government, because we recognise the demands that diabetes and its associated risks place on NHS resources. That is true of many chronic conditions, and we have to recognise that managing chronic conditions better will assist many more patients who have diabetes and other chronic conditions.

Nid oes amheuaeth nad yw diabetes yn cael effaith sylweddol ar fywyd pobl, ac mae hefyd yn ffactor difrifol, fel yr eglurodd Dr Lloyd, mewn achosion o drawiad ar y galon, strôc, problemau â'r arennau a niwed i'r nerfau. Felly, cytunaf â'r Ceidwadwyr fod diabetes yn cyflwyno her bwysig i'r GIG. At ei gilydd, mae'r Llywodraeth wedi derbyn y cynnig am ein bod yn cydnabod y pwysau y mae diabetes, a'r risgiau sy'n gysylltiedig ag ef, yn eu rhoi ar adnoddau'r GIG. Mae hynny'n wir am nifer o anhwylderau cronig, a rhaid inni gydnabod y bydd rheoli anhwylderau cronig yn well yn cynorthwyo llawer mwy o gleifion sydd â diabetes ac anhwylderau cronig eraill.

**Andrew R.T. Davies:** While managing the conditions is important, part of the bedrock of treating various conditions is the national service frameworks that have been put in place so that people know what their obligations are. However good such frameworks are on paper, do you accept that, regrettably, in many areas, they are not being delivered, and comprehensive work is needed to speed up the national service frameworks so that we can improve standards?

**Andrew R.T. Davies:** Er bod rheoli'r anhwylderau'n bwysig, rhan o'r hyn sy'n sylfaen i drin amrywiol anhwylderau yw'r fframweithiau gwasanaeth cenedlaethol sydd wedi'u rhoi ar waith er mwyn i bobl wybod beth yw eu rhwymedigaethau. Waeth pa mor dda yw fframweithiau o'r fath ar bapur, a dderbyniwch nad ydynt, yn anffodus, yn cael eu gweithredu mewn llawer o ardaloedd, ac mae angen gwneud gwaith sylweddol i gyflymu'r fframweithiau gwasanaeth cenedlaethol, er mwyn inni allu gwella safonau?

**Edwina Hart:** If I can draw breath during my contribution, I will deal with some of these issues.

**Edwina Hart:** Os gallaf dynnu anadl yn ystod fy nghyfraniad, byddaf yn ymdrin â rhai o'r materion hyn.

The Welsh Assembly Government's main strategy, as we have indicated, is the national service framework, which we published in 2003. The NSF's wider public health agenda is primarily concerned with type 2 diabetes, which is influenced by lifestyle factors and accounts for nine in every 10 cases of diabetes. Type 2 diabetes was once known as late-onset diabetes, but it is now more commonly seen in younger people. It is as a result of our lifestyles, as our bodies struggle to cope with the level of glucose in the blood. Our prime means of reversing this trend is to improve people's eating habits by helping them to control their blood-sugar levels, reduce their salt intake and so on. These measures are vital to managing the progression of diabetes types 1 and 2.

To address the diabetes NSF public health agenda in Wales, we have put in a range of strategies. Some notable examples are the 'Creating an Active Wales' action plan, the Change4Life campaign, and the Mind, Exercise, Nutrition...Do it! programme. In primary care, through the quality outcomes framework, we are improving the way that we register people who have been diagnosed with diabetes and improving the management of disease progression risk factors. That is important.

Several contributors were kind enough to refer to research. I agree that it plays a significant role in the search for an ultimate cure for, or treatment of, many of the health-related diseases, including diabetes. The Diabetes Research Network Wales is an all-Wales professional collaboration between higher education institutes that was recently re-commissioned as part of the infrastructure of the National Institute for Social Care and Health Research. That network promotes strengths and potential.

The point was made to me about further

Fel yr ydym wedi dweud, y fframwaith gwasanaeth cenedlaethol, a gyhoeddwyd yn 2003, yw prif strategaeth Llywodraeth y Cynulliad. Mae agenda ehangach y fframwaith gwasanaeth cenedlaethol ar gyfer iechyd y cyhoedd yn ymdrin yn bennaf â diabetes math 2, a gaiff ei ddylanwadu gan ffactorau'n ymwneud â ffordd o fyw, ac sy'n cyfrif am naw o bob 10 achos o ddiabetes. Arferai diabetes math 2 gael ei alw'n ddiabetes sy'n dechrau'n hwyrach mewn bywyd, ond erbyn hyn mae'n fwy cyffredin ymhlith pobl ifanc. Mae'n digwydd o ganlyniad i'n ffordd o fyw, wrth i'n cyrff ei chael hi'n anodd ymdopi â lefel y glwcos yn y gwaed. Y prif ddull sydd gennym o wrthdroi'r duedd hon yw gwella arferion bwyta pobl drwy eu helpu i reoli lefel y siwgr yn eu gwaed, lleihau'r halen y maent yn ei fwyta ac yn y blaen. Mae'r mesurau hyn yn hanfodol i reoli'r modd y mae diabetes math 1 a 2 yn datblygu.

Er mwyn mynd i'r afael ag agenda iechyd y cyhoedd y fframwaith gwasanaeth cenedlaethol ar gyfer diabetes yng Nghymru, yr ydym wedi cyflwyno ystod o strategaethau. Mae rhai enghreifftiau nodedig yn cynnwys y cynllun gweithredu 'Creu Cymru Egniol', yr ymgyrch Newid am Oes, a'r rhaglen MEND, sy'n edrych ar agweddau megis maeth a chadw'n heini. Ym maes gofal sylfaenol, drwy'r fframwaith ansawdd a chanlyniadau, yr ydym yn gwella'r modd y cofrestrir pobl sydd wedi cael diagnosis o ddiabetes, ac yn gwella'r gwaith o reoli'r ffactorau risg o ran y modd y mae'r clefyd yn datblygu dros amser. Mae hynny'n bwysig.

Bu nifer o gyfranwyr yn ddigon caredig i gyfeirio at waith ymchwil. Cytunaf ei fod yn chwarae rôl bwysig wrth chwilio am driniaeth a allai, yn y pen draw, wella llawer o glefydau sy'n gysylltiedig ag iechyd, megis diabetes, neu drin clefydau o'r fath. Mae Rhwydwaith Ymchwil Diabetes Cymru yn enghraifft o gydweithio proffesiynol drwy Gymru gyfan rhwng sefydliadau addysg uwch, a ailgomisiynwyd yn ddiweddar fel rhan o isadeiledd y Sefydliad Cenedlaethol ar gyfer Ymchwil Gofal Cymdeithasol ac Iechyd. Mae'r rhwydwaith hwnnw'n hybu cryfderau a photensial.

Gwnaed y pwynt am gyllid pellach ar gyfer

funding for diabetes research. We have had good news in that some academics have recently been appointed in Cardiff University to start a programme on this. I am mindful of Paul Davies's comments that we need to look at what resources are available for diabetes research in the future. It is important to increase patient involvement in the research process and in the dissemination of knowledge. The amendment that the Government has tabled to point 3 of the motion reflects what is already happening.

In 2008, I required the NHS to review the current diabetes services against the requirements of the NSF and to put robust plans in place to map the journey to full compliance by 2013. These plans reflected the unfolding broader policy agenda for managing chronic conditions. The process has shown a number of areas in which we have made progress with implementing the NSF.

Following the reorganisation of the NHS, I am considering which structures are needed at a local level to manage the ongoing implementation of 'Delivering a Five-Year Service, Workforce and Financial Strategic Framework for NHS Wales', given that managing chronic conditions effectively is a key element. That covers Andrew R.T.'s point, I think. Therefore, I am considering replacing the old local diabetes service advisory group, which reflected the 22 LHB planning structures, with seven LHB diabetes planning and delivery groups to give more focus. These groups will be an integral part of local structures established under our broader policy, and will take responsibility for leading, managing and reporting progress on the NSF. To reflect their statutory accountability for NHS services to their resident populations, the seven LHBs will deliver a formal NSF delivery plan through these new groups. That process will draw on the original actions for 2008 and will be informed by an up-to-date review of current services. That is important as it reflects some of the concerns raised in the Chamber about the availability of services throughout Wales.

gwaith ymchwil ym maes diabetes. Yr ydym wedi cael newyddion da, sef bod rhai academyddion wedi'u penodi'n ddiweddar ym Mhrifysgol Caerdydd i ddechrau rhaglen ar hyn. Yr wyf yn ymwybodol iawn o'r sylwadau a wnaed gan Paul Davies ynghylch yr angen inni ystyried pa adnoddau sydd ar gael i gynnal ymchwil i ddiabetes yn y dyfodol. Mae'n bwysig cynyddu cyfranogiad cleifion yn y broses ymchwil a'r gwaith o ledaenu gwybodaeth. Mae'r gwelliant y mae'r Llywodraeth wedi'i gyflwyno i bwynt 3 y cynnig yn adlewyrchu'r hyn sy'n digwydd eisoes.

Yn 2008, gofynnais i'r GIG adolygu'r gwasanaeth diabetes presennol a'i gymharu â gofynion y fframwaith gwasanaeth cenedlaethol, a rhoi cynlluniau cadarn ar waith i fapio'r gwaith o sicrhau cydymffurfiaeth lawn erbyn 2013. Yr oedd y cynlluniau hyn yn adlewyrchu'r agenda polisi ehangach a oedd yn datblygu ar gyfer rheoli afiechydon cronig. Mae'r broses wedi dangos nifer o feysydd lle'r ydym wedi gwneud cynnydd wrth weithredu'r fframwaith gwasanaeth cenedlaethol.

Yn dilyn ad-drefnu'r GIG, yr wyf yn ystyried pa strwythurau y mae eu hangen yn lleol i reoli'r gwaith parhaus o weithredu'r fframwaith gwasanaeth, gweithlu a chyllid strategol pum mlynedd ar gyfer GIG Cymru, o gofio bod rheoli afiechydon cronig yn effeithiol yn elfen bwysig o hyn. Credaf fod hynny'n ateb pwynt Andrew R.T. Felly, yr wyf yn ystyried cyflwyno saith grŵp cynllunio a darparu gwasanaethau diabetes yn y byrddau iechyd lleol yn lle'r hen grŵp cynghori ar wasanaethau diabetes lleol, a oedd yn adlewyrchu strwythurau cynllunio'r 22 bwrdd iechyd lleol, a hynny er mwyn rhoi mwy o ffocws i'r gwaith. Bydd y grwpiau hyn yn rhan annatod o strwythurau lleol a sefydlir o dan ein polisi ehangach, a byddant yn gyfrifol am arwain y cynnydd a wneir ar y fframwaith gwasanaeth cenedlaethol, ei reoli ac adrodd yn ei gylch. Er mwyn adlewyrchu eu hatebolrwydd statudol am wasanaethau'r GIG i'r bobl sy'n byw yn eu hardal, bydd y saith bwrdd iechyd lleol yn gweithredu cynllun ffurfiol ar gyfer cyflawni'r fframwaith gwasanaeth cenedlaethol drwy'r grwpiau newydd hyn. Bydd y broses honno'n tynnu ar y camau gweithredu gwreiddiol ar

The review would identify which aspects of these services need to improve so that we can see the implementation of the NSF. I will be making my decision shortly, following a few more final discussions with officials.

Turning to the final point of the motion, the Welsh Assembly Government has already established links with the NHS in Scotland to work collaboratively on national information and communications technology systems that could be of mutual value. Wales had adapted and now implemented the Scottish Care Information Gateway system for electronic communication. The Scots have also shown an interest in the Welsh clinical portal. The only reason that I cannot commit to adopting specific systems for conditions such as diabetes is because that we have to be sure that they comply with the Welsh technical design standard. That is why I tabled amendment 1.

Tackling diabetes is an important part of the NHS's work. It is all about dealing with people's lifestyles, which involves an education role, and eventually dealing with its treatment. Therefore, I welcome the opportunity to respond to the Welsh Conservatives' debate, and I have enjoyed the contributions that have been made.

**Andrew R.T. Davies:** I thank everyone who has contributed to the debate. It is always particularly pleasing to hear Jeff say that he agrees with the Welsh Conservatives. That does not happen often, but it is heartening, and I take it in the spirit in which it was intended as part of the debate that we have had. There were about 10 speakers in the debate, and, for those people viewing on [www.senedd.tv](http://www.senedd.tv) or in the public gallery, that would be the equivalent of in excess of 100 MPs contributing to a debate in the House of Commons. That just shows the level of interest and concern among Members about

gyfer 2008, a bydd adolygiad cyfredol o'r gwasanaethau presennol yn sail i'r broses. Mae hynny'n bwysig gan ei fod yn adlewyrchu rhai o'r pryderon a godwyd yn y Siambr am argaeledd gwasanaethau drwy Gymru gyfan. Byddai'r adolygiad yn nodi pa agweddau ar y gwasanaethau hynny y mae angen eu gwella fel y gallwn weld y fframwaith gwasanaeth cenedlaethol yn cael ei weithredu. Byddaf yn penderfynu'n fuan, ar ôl cael trafodaethau mwy terfynol â swyddogion.

Gan droi at y pwynt olaf yn y cynnig, mae Llywodraeth y Cynulliad eisoes wedi sefydlu cysylltiadau gyda'r GIG yn yr Alban i gydweithio ar systemau technoleg gwybodaeth a chyfathrebu cenedlaethol a allai fod o werth i Gymru a'r Alban fel ei gilydd. Yr oedd Cymru wedi addasu system porth gwybodaeth am ofal yr Alban ar gyfer cyfathrebu electronig, ac mae wedi'i gweithredu erbyn hyn. Mae'r Albanwyr hefyd wedi dangos diddordeb ym mhorth clinigol Cymru. Yr unig reswm na allaf ymrwymo i fabwysiadu systemau penodol ar gyfer anhwylderau megis diabetes yw oherwydd bod yn rhaid inni fod yn siŵr eu bod yn cydymffurfio â safon dylunio technegol Cymru. Dyna pam y cyflwynais welliant 1.

Mae mynd i'r afael â diabetes yn rhan bwysig o waith y GIG. Mae a wnelo ag ymdrin â ffordd o fyw pobl, sy'n cynnwys rôl addysgu, ac ymdrin â dulliau o drin y clefyd yn y pen draw. Felly, croesawaf y cyfle i ymateb i ddadl y Ceidwadwyr Cymreig, ac yr wyf wedi mwynhau'r cyfraniadau a wnaed.

**Andrew R.T. Davies:** Hoffwn ddiolch i bawb sydd wedi cyfrannu at y ddadl. Mae bob amser yn rhoi boddhad mawr i glywed Jeff yn dweud ei fod yn cytuno â'r Ceidwadwyr Cymreig. Nid yw hynny'n digwydd yn aml, ond mae'n galonogol, a chymeraf hynny yn yr ysbryd a fwriadwyd fel rhan o'r ddadl yr ydym wedi'i chael. Cyfrannodd oddeutu 10 siaradwr i'r ddadl, ac er gwybodaeth i'r sawl sy'n gwyllo ar [www.senedd.tv](http://www.senedd.tv) neu yn oriel y cyhoedd, byddai hynny'n cyfateb i dros 100 o Aelodau Seneddol yn cyfrannu at ddadl yn Nhŷ'r Cyffredin. Mae hynny'n dangos lefel y

this issue.

I take on board the points that have been made by various Members. Dr Dai Lloyd emphasised, as I did in my opening remark, the seriousness of diabetes. People should not think, 'Thankfully, it is only diabetes' when a diagnosis is made, as there are often severe complications. It can lead to long-term damage to organs if a diagnosis has taken a long time to be made, and people will not have made the necessary lifestyle changes.

The difference between type 1 and type 2 diabetes also needs to be understood, particularly when young children have to face issues of diabetes in the school environment, as Irene James touched on. I thought that that was a pertinent point to introduce to the debate, and I hope that the Government will explore it. It was pleasing to see the Minister for Children, Education and Lifelong Learning here to hear that point being made, because it is embarrassing for a young child to have to deal with a medical condition when his or her peers are making fun of it, simply because they do not understand what that young person has to face. The school has a responsibility to make sure that such young persons can engage in school activity and school life and not feel that they are a special case, which serves only to mystify diabetes even more in some people's minds. Therefore, I welcome the point that Irene made.

As chair of the all-party group on diabetes, Jeff said that many of the points raised in this debate had been raised in the all-party group, which I take on board. He also said that he does not see the point of the part of our motion about holding a survey or audit, because he believes that expense would be incurred if such a survey or audit were to be undertaken. However, he went on to point out that when a survey was undertaken of the local health boards, it discovered that none of them complied with the national service framework. For me, that highlights the need to understand exactly what is going on among the seven new local health boards.

diddordeb a'r pryder sydd gan yr Aelodau ynghylch y mater hwn.

Yr wyf yn derbyn y pwyntiau a wnaed gan y gwahanol Aelodau. Pwysleisiodd Dr Dai Lloyd pa mor ddifrifol yw diabetes, fel y gwneuthum innau yn fy sylw agoriadol. Ni ddylai pobl feddwl, 'Diolch byth, dim ond diabetes yw e' pan gaiff diagnosis ei wneud, oherwydd ceir cymhlethdodau difrifol yn aml. Gall arwain at niwed tymor hir i organau os yw wedi cymryd llawer o amser i wneud diagnosis, ac os na fydd pobl yn gwneud y newidiadau angenrheidiol i'w ffordd o fyw.

Mae angen deall y gwahaniaeth rhwng diabetes math 1 a diabetes math 2 hefyd, yn enwedig pan fydd yn rhaid i blant ifanc wynebu problemau'n ymwneud â diabetes yn yr ysgol, fel y crybwyllodd Irene James. Credais fod hwnnw'n bwynt perthnasol i'w gyflwyno i'r ddadl, a gobeithiaf y bydd y Llywodraeth yn archwilio'r mater. Yr oeddwn yn falch o weld bod y Gweinidog dros Blant, Addysg a Dysgu Gydol Oes yma i glywed y pwynt hwnnw'n cael ei wneud, oherwydd mae'n beth annifyr i blentyn ifanc orfod ymdopi â chyflwr meddygol pan fo'i gyfoedion yn gwneud hwyl am y peth, a hynny am nad ydynt yn deall beth mae'r person ifanc hwnnw'n gorfod ei wynebu. Mae gan yr ysgol gyfrifoldeb i sicrhau y gall pobl ifanc o'r fath gymryd rhan yng ngweithgarwch a bywyd yr ysgol heb deimlo eu bod yn wahanol, gan mai'r cyfan a wna hynny yw gwneud diabetes yn fwy o ddirgelwch fyth ym meddwl rhai pobl. Felly, croesawaf y pwynt a wnaed gan Irene.

Fel cadeirydd y grŵp hollbleidiol ar ddiabetes, dywedodd Jeff fod nifer o'r pwyntiau a godwyd yn y ddadl hon wedi'u codi yn y grŵp hollbleidiol, a derbynias hynny. Dywedodd hefyd nad yw'n gweld diben y rhan o'n cynnig sy'n ymwneud â chynnal arolwg neu archwiliad, gan ei fod o'r farn y byddem yn mynd i gost wrth gynnal arolwg neu archwiliad o'r fath. Fodd bynnag, aeth rhagddo i dynnu sylw at y ffaith bod arolwg a gynhaliwyd o'r byrddau iechyd lleol wedi darganfod nad oedd yr un ohonynt yn cydymffurfio â'r fframwaith gwasanaeth cenedlaethol. I mi, mae hynny'n amlygu'r angen i ddeall beth yn union sy'n digwydd ymysg y saith bwrdd iechyd lleol newydd.

6.20 p.m.

**Jeff Cuthbert:** That is the very point that I was making. We have that background information now, and amendment 1 from the Welsh Assembly Government strengthens that point, by requiring LHBs to be brought up to standard.

**Andrew R.T. Davies:** I take your point, Jeff. I also heard what the Minister had to say, in glowing terms, about the work that the Welsh Assembly Government is undertaking, and I welcome that work. However, during Diabetes Week last week, various organisations reinforced my awareness of the variance that is widespread in Wales, whether it is in respect of screening or a basic understanding of the service. I particularly emphasised the variance between north Wales and south-east Wales, and I hope that the Minister and her officials will look into that, because it is of grave concern.

In his contribution, Peter touched on insulin pumps and how they can facilitate greater freedom and mobility for an individual, by starting regular treatment. As I understand it, there is a two or three-day renewal period. A significant cost is involved, and there is a low uptake of such pumps in the UK, at only 4 per cent, as Peter touched on. However, in the United States of America, it is 40 per cent. However, that should not preclude us from looking into this issue and working with organisations to ensure that we can make those improvements to help people with their lifestyle choices.

From my side of the Chamber, there was clear agreement on the sense of urgency that the motion was trying to convey on the need to improve services and supply information, as Angela Burns touched on when she referred to the experience of her constituents. That is a powerful tool, as discussed in point 4 of our motion, to empower patients to make choices that will improve the outcomes from the treatments that they are undergoing. We

**Jeff Cuthbert:** Dyna'r union bwynt yr oeddwn yn ei wneud. Mae gennym y wybodaeth gefndirol honno yn awr, ac mae gwelliant 1 gan Lywodraeth y Cynulliad yn cryfhau'r pwynt hwnnw, drwy fynnu bod byrddau iechyd lleol yn cyrraedd y safon.

**Andrew R.T. Davies:** Yr wyf yn derbyn eich pwynt, Jeff. Clywais hefyd yr hyn a oedd gan y Gweinidog i'w ddweud wrth ganmol y gwaith y mae Llywodraeth y Cynulliad yn ei wneud, a chroesawaf y gwaith hwnnw. Fodd bynnag, yn ystod Wythnos Diabetes yr wythnos diwethaf, atgyfnerthodd amryw o sefydliadau fy ymwybyddiaeth o'r amrywiadau sy'n gyffredin ar draws Cymru o ran sgrinio neu gael dealltwriaeth sylfaenol o'r gwasanaeth. Pwysleisiais yn benodol yr amrywiaeth rhwng y gogledd a'r de-ddwyrain, a gobeithiaf y bydd y Gweinidog a'i swyddogion yn ystyried hynny, oherwydd mae'n peri pryder difrifol imi.

Yn ei gyfraniad, soniodd Peter ychydig am bympiau inswlin a sut y gallant roi mwy o ryddid i unigolyn a mwy o allu i symud, drwy ddechrau cael triniaeth reolaidd. Fel yr wyf i'n ei deall, ceir cyfnod adnewyddu sy'n para dau neu dri diwrnod. Mae cost sylweddol ynghlwm wrth hyn, ac fel y dywedodd Peter nid oes llawer o bobl yn defnyddio pypiau o'r fath yn y DU; dim ond 4 y cant o bobl sy'n eu defnyddio. Er hynny, mae 40 y cant o bobl sydd â diabetes yn eu defnyddio yn Unol Daleithiau America. Fodd bynnag, ni ddylai hynny ein hatal rhag ymchwilio i'r mater hwn a gweithio gyda sefydliadau i sicrhau y gallwn wneud y gwelliannau hyn i helpu pobl gyda'r dewisiadau y maent yn eu gwneud o ran eu ffordd o fyw.

Cafwyd cytundeb amlwg o'r ochr hon o'r Siambr ynghylch yr ymdeimlad o frys yr oedd y cynnig yn ceisio'i gyfleu o ran yr angen i wella gwasanaethau a chyflenwi gwybodaeth, fel y crybwyllodd Angela Burns pan gyfeiriodd at brofiadau ei hetholwyr. Mae hwnnw'n adnodd pwerus, fel y trafodwyd ym mhwynt 4 ein cynnig, i roi'r grym i'n cleifion wneud dewisiadau a fydd yn gwella canlyniadau'r triniaethau y maent



are seeing that on the ground, as we have seen in Scotland—although I take the Minister's point about IT provision in Wales, the Welsh portal and ensuring that it is compliant with our NHS structures.

Paul Davies, Mark Isherwood and Mohammad Asghar touched on the importance of education and screening. Above all, Mark Isherwood touched on the point that we have had similar motions before Plenary in the past, from as long ago as six years, and yet we are still saying that the standard is patchy and not good enough.

I hope that we can be united in our sentiment, can support the motion, and that the Minister and her officials will act on that support. I urge Members to support the motion.

**The Deputy Presiding Officer:** The proposal is that the motion be agreed without amendment. Is there any objection? I see that there is. Therefore, all voting on this item will be deferred until voting time.

It is now past 5 p.m., so I propose that we move directly to the vote. Are Members all content with that? Does anyone wish the bell to be rung? I see that no-one does.

*Gohiriwyd y pleidleisiau tan y cyfnod pleidleisio.  
Votes deferred until voting time.*

### Cyfnod Pleidleisio Voting Time

*Cynnig NDM4501: O blaid 14, Ymatal 0, Yn erbyn 32.  
Motion NDM4501: For 14, Abstain 0, Against 32.*

Pleidleisiodd yr Aelodau canlynol o blaid:  
The following Members voted for:

Asghar, Mohammad  
Bates, Mick  
Black, Peter  
Burnham, Eleanor  
Burns, Angela  
Davies, Andrew R.T.  
Davies, Paul  
German, Michael  
Isherwood, Mark

yn eu cael. Yr ydym yn gweld hynny'n digwydd ar lawr gwlad, fel yr ydym wedi'i weld yn yr Alban—er fy mod yn derbyn pwynt y Gweinidog ynghylch y ddarpariaeth TG yng Nghymru, porth Cymru a sicrhau bod y system yn cydymffurfio â'r strwythurau sydd gan ein GIG.

Soniodd Paul Davies, Mark Isherwood a Mohammad Asghar ychydig am bwysigrwydd addysg a sgrinio. Yn anad dim, cyfeiriodd Mark Isherwood at y pwynt i gynigion tebyg ddod gerbron y Cyfarfod Llawn yn y gorffennol, gymaint â chwe blynedd yn ôl, ac eto i gyd yr ydym yn dal i ddweud bod y safon yn anghyson a heb fod yn ddigon da.

Gobeithiaf y gallwn fod yn unedig yn ein barn, y gallwn gefnogi'r cynnig, ac y bydd y Gweinidog a'i swyddogion yn gweithredu ar y gefnogaeth honno. Anogaf yr Aelodau i gefnogi'r cynnig.

**Y Dirprwy Lywydd:** Y cynnig yw bod y cynnig yn cael ei dderbyn heb welliant. A oes gwrthwynebiad? Gwelaf fod. Felly, gohiriwn y pleidleisiau ar yr eitem hon tan y cyfnod pleidleisio.

Mae wedi 5 p.m. erbyn hyn, felly, cynigaf ein bod yn symud yn syth i'r cyfnod pleidleisio. A yw'r Aelodau i gyd yn hapus â hynny? A oes unrhyw Aelod yn dymuno i'r gloch gael ei chanu? Gwelaf nad oes.

Pleidleisiodd yr Aelodau canlynol yn erbyn:  
The following Members voted against:

Andrews, Leighton  
Barrett, Lorraine  
Chapman, Christine  
Cuthbert, Jeff  
Davidson, Jane  
Davies, Alun  
Davies, Andrew  
Davies, Jocelyn  
Evans, Nerys

Melding, David  
 Millar, Darren  
 Morgan, Jonathan  
 Ramsay, Nick  
 Williams, Brynle

Franks, Chris  
 Gibbons, Brian  
 Gregory, Janice  
 Griffiths, John  
 Hart, Edwina  
 James, Irene  
 Jones, Alun Ffred  
 Jones, Ann  
 Jones, Carwyn  
 Jones, Gareth  
 Jones, Ieuan Wyn  
 Law, Trish  
 Lewis, Huw  
 Lloyd, David  
 Lloyd, Val  
 Mewies, Sandy  
 Morgan, Rhodri  
 Randerson, Jenny  
 Ryder, Janet  
 Sargeant, Carl  
 Thomas, Gwenda  
 Thomas, Rhodri Glyn  
 Watson, Joyce

*Gwrthodwyd y cynnig.  
 Motion not agreed.*

*Gwelliant 1 i NDM4501: O blaid 31, Ymatal 0, Yn erbyn 15.  
 Amendment 1 to NDM4501: For 31, Abstain 0, Against 15.*

Pleidleisiodd yr Aelodau canlynol o blaid:  
 The following Members voted for:

Andrews, Leighton  
 Barrett, Lorraine  
 Chapman, Christine  
 Cuthbert, Jeff  
 Davidson, Jane  
 Davies, Alun  
 Davies, Andrew  
 Davies, Jocelyn  
 Evans, Nerys  
 Franks, Chris  
 Gibbons, Brian  
 Gregory, Janice  
 Griffiths, John  
 Hart, Edwina  
 James, Irene  
 Jones, Alun Ffred  
 Jones, Ann  
 Jones, Carwyn  
 Jones, Gareth  
 Jones, Ieuan Wyn  
 Law, Trish  
 Lewis, Huw  
 Lloyd, David  
 Lloyd, Val  
 Mewies, Sandy  
 Morgan, Rhodri  
 Ryder, Janet  
 Sargeant, Carl  
 Thomas, Gwenda  
 Thomas, Rhodri Glyn  
 Watson, Joyce

Pleidleisiodd yr Aelodau canlynol yn erbyn:  
 The following Members voted against:

Asghar, Mohammad  
 Bates, Mick  
 Black, Peter  
 Burnham, Eleanor  
 Burns, Angela  
 Davies, Andrew R.T.  
 Davies, Paul  
 German, Michael  
 Isherwood, Mark  
 Melding, David  
 Millar, Darren  
 Morgan, Jonathan  
 Ramsay, Nick  
 Randerson, Jenny  
 Williams, Brynle

*Derbyniwyd y gwelliant.  
Amendment agreed.*

*Gwelliant 2 i NDM4501: O blaid 31, Ymatal 0, Yn erbyn 15.  
Amendment 2 to NDM4501: For 31, Abstain 0, Against 15.*

Pleidleisiodd yr Aelodau canlynol o blaid:  
The following Members voted for:

Andrews, Leighton  
Barrett, Lorraine  
Chapman, Christine  
Cuthbert, Jeff  
Davidson, Jane  
Davies, Alun  
Davies, Andrew  
Davies, Jocelyn  
Evans, Nerys  
Franks, Christopher  
Gibbons, Brian  
Gregory, Janice  
Griffiths, John  
Hart, Edwina  
James, Irene  
Jones, Alun Ffred  
Jones, Ann  
Jones, Carwyn  
Jones, Gareth  
Wyn Jones, Ieuan  
Law, Trish  
Lewis, Huw  
Lloyd, Dai  
Lloyd, Val  
Mewies, Sandy  
Morgan, Rhodri  
Ryder, Janet  
Sargeant, Carl  
Thomas, Gwenda  
Thomas, Rhodri Glyn  
Watson, Joyce

Pleidleisiodd yr Aelodau canlynol yn erbyn:  
The following Members voted against:

Asghar, Mohammad  
Bates, Mick  
Black, Peter  
Burnham, Eleanor  
Burns, Angela  
Davies, Andrew R.T.  
Davies, Paul  
German, Michael  
Isherwood, Mark  
Melding, David  
Millar, Darren  
Morgan, Jonathan  
Ramsay, Nick  
Randerson, Jenny  
Williams, Brynle

*Derbyniwyd y gwelliant.  
Amendment agreed.*

Cynnig NDM4501 fel y'i diwygiwyd: bod

*Cynulliad Cenedlaethol Cymru:*

*1. yn nodi'r cynnydd mewn cyfraddau diabetes yng Nghymru a'r sialensiau i iechyd y cyhoedd o ganlyniad i hynny;*

*2. yn cydnabod swyddogaeth sefydliadau ymchwil yng Nghymru o ran datblygu ymchwil i driniaeth a allai wella diabetes;*

Motion NDM4501 as amended: that

*the National Assembly for Wales:*

*1. notes the increase in rates of diabetes in Wales and the consequential public health challenges;*

*2. recognises the role of Welsh research establishments in developing research into a possible cure for diabetes;*

3. yn galw ar Lywodraeth Cynulliad Cymru i sicrhau bod gan fyrddau iechyd lleol ddealltwriaeth glir o'r hyn y mae ei angen er mwyn cyflawni safonau'r fframwaith gwasanaeth cenedlaethol ar gyfer diabetes erbyn 2013 ynghyd â chynlluniau gweithredu;

3. calls on the Welsh Assembly Government to ensure that local health boards have a clear view on what is needed to achieve the standards in the diabetes national service framework by 2013 and have action plans in place;

4. yn annog Llywodraeth Cynulliad Cymru i archwilio system math SCI-DC, i helpu i sicrhau bod y fframwaith gwasanaeth cenedlaethol ar gyfer diabetes yng Nghymru yn cael ei roi ar waith yn effeithiol.

4. urges the Welsh Assembly Government to explore a SCI-DC type system, to help ensure that the national service framework for diabetes in Wales is effectively delivered.

*Cynnig NDM4501 fel y'i diwygiwyd: O blaid 36, Ymatal 0, Yn erbyn 10.  
Motion NDM4501 as amended: For 36, Abstain 0, Against 10.*

Pleidleisiodd yr Aelodau canlynol o blaid:  
The following Members voted for:

Andrews, Leighton  
Barrett, Lorraine  
Bates, Mick  
Black, Peter  
Burnham, Eleanor  
Chapman, Christine  
Cuthbert, Jeff  
Davidson, Jane  
Davies, Alun  
Davies, Andrew  
Davies, Jocelyn  
Evans, Nerys  
Franks, Chris  
German, Michael  
Gibbons, Brian  
Gregory, Janice  
Griffiths, John  
Hart, Edwina  
James, Irene  
Jones, Alun Ffred  
Jones, Ann  
Jones, Carwyn  
Jones, Gareth  
Jones, Ieuan Wyn  
Law, Trish  
Lewis, Huw  
Lloyd, David  
Lloyd, Val  
Mewies, Sandy  
Morgan, Rhodri  
Randerson, Jenny  
Ryder, Janet  
Sargeant, Carl  
Thomas, Gwenda  
Thomas, Rhodri Glyn  
Watson, Joyce

Pleidleisiodd yr Aelodau canlynol yn erbyn:  
The following Members voted against:

Asghar, Mohammad  
Burns, Angela  
Davies, Andrew R.T.  
Davies, Paul  
Isherwood, Mark  
Melding, David  
Millar, Darren  
Morgan, Jonathan  
Ramsay, Nick  
Williams, Brynle

*Derbyniwyd cynnig NDM4501 fel y'i diwygiwyd.  
Motion NDM4501 as amended agreed.*

## Dadl Fer Short Debate

### Gobaith Hope

**The Deputy Presiding Officer:** Order. I ask Members leaving the Chamber to leave quickly and quietly, please. I call Janet Ryder to speak on the topic that she has chosen.

**Janet Ryder:** Hope—what is hope? Everyone here probably has a different definition. According to Aristotle, it is a waking dream. According to Lin Yutang,

‘Hope is like a road in the country; there was never a road, but when many people walk on it, the road comes into existence.’

Why have I chosen hope as the topic for this short debate? It is because, for the past 11 years, the Assembly has tried in many different ways to bring hope back to our communities. Have we succeeded? Time will be the judge of that. Today, I will take a little time to give a profile of the sport that I love and how I believe it could be, can be, and is being effective in turning communities around. I am sure that it will come as no surprise to you to hear that I am going to talk about rugby league, and I declare an interest as one of the patrons of the Wales Rugby League and a member of the executive board.

For those of us involved in Wales Rugby League, there is a shared vision to improve opportunities for people and to build better communities through the sport of rugby league. To those involved, rugby league is more than just a sport; it is a lifestyle, a community, and a dream that drives people to give themselves wholeheartedly to a game that they love and in which they can achieve. It is in that passion for the game that education and lifestyle improvements are forged.

Few will know that the history of international rugby league in Wales goes as far back as New Year’s Day 1908, when they played the first ever professional New

**Y Dirprwy Lywydd:** Trefn. Gofynnaf i’r Aelodau sy’n ymadael â’r Siambr wneud hynny’n gyflym ac yn dawel. Galwaf ar Janet Ryder i siarad ar y pwnc a ddewiswyd ganddi.

**Janet Ryder:** Gobaith—beth yw gobaith? Mae’n debyg y bydd gan bawb yma ddiffiniad gwahanol. Yn ôl Aristotlys, breuddwyd effro ydyw. Yn ôl Lin Yutang,

Mae gobaith yn debyg i ffordd yn y wlad; nid oedd ffordd yno erioed, ond wrth i lawer o bobl ei throedio, daw’r ffordd i fodolaeth.

Pam yr wyf wedi dewis gobaith yn destun ar gyfer y dadl fer hon? Oherwydd, dros yr 11 mlynedd diwethaf, mae’r Cynulliad wedi ceisio dod â gobaith yn ôl i’n cymunedau mewn amryfal ffyrdd. A ydym wedi llwyddo? Amser a ddengys. Heddiw, yr wyf am dreulio ychydig amser yn disgrifio’r gamp yr wyf mor hoff ohoni, a sut y credaf y gallai, y gall, ac y mae’n effeithiol o ran gweddnewid cymunedau. Yr wyf yn siŵr na fyddwch yn synnu o glywed fy mod yn bwriadu sôn am rygbi’r gynghrair, ac yr wyf yn datgan diddordeb fel un o noddwyr Rygbi Cynghrair Cymru ac aelod o’r bwrdd gweithredol.

Mae gan y rheini ohonom sy’n ymwneud â Rygbi Cynghrair Cymru weledigaeth gyffredin, sef gwella cyfleoedd i bobl a chreu cymunedau gwell drwy rygbi’r gynghrair. I’r rheini sy’n ymwneud â rygbi’r gynghrair, mae’n fwy na math o chwaraeon; mae’n ffordd o fyw, yn gymuned, ac yn freuddwyd sy’n peri i bobl ymroi’n llwyr i gêm y maent yn hoff iawn ohoni ac y gallant gyflawni ynddi. Yn y cariad hwnnw at y gêm y caiff gwelliannau o ran addysg a ffordd o fyw eu creu.

Ychydig a wŷr bod hanes gemau rhyngwladol rygbi’r gynghrair yng Nghymru yn dyddio’n ôl mor bell â Dydd Calan 1908, pan chwaraewyd yn erbyn y tîm rygbi

Zealand rugby side in Aberdare, winning 9-8. That New Zealand side was often named the 'All Golds' by the media rather than the 'All Blacks' as they were earning money for playing rugby. That was the first international match ever hosted under the then-new Northern Rugby Football Union rules, which eventually became the game of rugby league that we know today. At that time, Wales and New Zealand had a lot in common, with rugby union being the national sport in both countries, and both had caused controversy by inviting players to turn professional legitimately and play this new version of the game. The controversy still exists today, as do the challenges that rugby league faces to gain credibility in its own nation, the birthplace of international rugby league.

Rugby league in Wales forged a new path and rewrote history by focusing first and foremost on its people. It is the people who make the sport—literally. You will find that people who are involved in rugby league tend to be easier to connect with, because they do not carry the political pretence that is often involved in other sports. Time and again, I have talked to people in Wrexham, and they all say the same thing, that these new Crusaders are accessible, from the team manager down. They put up no barriers, and they are ordinary people who are dedicated to their sport.

Rugby league in Wales has seen a resurgence in the way it works with people—people first, then sport. After all, if people are better looked after and supported in all that they do, at home and on the field, they will be better equipped to contribute to a better community. In Wales Rugby League, we are therefore focusing on using the love of the game to generate lifestyle changes, ranging from tackling obesity and adverse social behaviour to improving disadvantaged communities. For young people, it is often the dream of becoming a professional player that drives the commitment to change. The same could be said of many sports, of course, but I will highlight some of the work that we do.

proffesiynol cyntaf erioed o Seland Newydd yn Aberdâr, gan ennill 9-8. Byddai'r cyfryngau yn cyfeirio'n aml at y tîm hwnnw o Seland Newydd fel y 'Crysau Aur' yn hytrach na'r 'Crysau Duon' oherwydd bod aelodau'r tîm yn ennill arian am chwarae rygbi. Honno oedd y gêm ryngwladol gyntaf erioed i'w chynnal dan reolau Undeb Rygbi Gogledd Lloegr, a oedd yn newydd ar y pryd, ac a ddatblygodd yn y pen draw yn rygbi'r gynghrair, sef y gêm sy'n gyfarwydd inni heddiw. Bryd hynny, yr oedd gan Gymru a Seland Newydd lawer yn gyffredin, gyda rygbi'r undeb yn gamp genedlaethol yn y ddwy wlad, a'r ddwy wlad wedi achosi helynt drwy wahodd chwaraewyr i droi'n broffesiynol yn gyfreithlon a chwarae'r fersiwn newydd hon o'r gêm. Mae'r helynt hwnnw'n parhau hyd heddiw, fel y mae'r heriau sy'n wynebu rygbi'r gynghrair i ennill hygredd yn ei wlad ei hun, man geni rygbi'r gynghrair ar lefel ryngwladol.

Bu i rygbi'r gynghrair yng Nghymru greu llwybr newydd ac ailysgrifennu hanes, drwy ganolbwyntio'n gyntaf ac yn bennaf ar ei bobl. Y bobl sy'n creu'r gamp—yn llythrennol. Fe welwch fod cyd-dynnu â phobl sy'n ymwneud â rygbi'r gynghrair yn tueddu i fod yn haws, am na welir ynddynt yr ymhoni gwleidyddol sy'n gysylltiedig yn aml â chwaraeon eraill. Dro ar ôl tro, yr wyf wedi siarad â phobl yn Wrecsam, ac maent i gyd yn dweud yr un peth, sef bod y Rhyfelwyr newydd yma'n hawdd mynd atynt, o reolwr y tîm i lawr. Nid ydynt yn codi rhwystrau; pobl gyffredin ydynt sy'n ymroi i'w camp.

Mae rygbi'r gynghrair yng Nghymru wedi gweld adfywiad yn y modd y mae'n gweithio gyda phobl—pobl yn gyntaf, a chwaraeon yn ail. Wedi'r cyfan, os yw pobl yn cael gwell gofal a chefnogaeth ym mhopath a wnânt, gartref ac ar y maes chwarae, byddant mewn sefyllfa well i gyfrannu at gymuned well. Yn Rygbi Cynghrair Cymru, felly, yr ydym yn canolbwyntio ar ddefnyddio cariad at y gamp i newid ffordd pobl o fyw, o fynd i'r afael â gordewdra ac ymddygiad cymdeithasol niweidiol i wella cymunedau difreintiedig. I bobl ifanc, yn aml, yr hyn sy'n gyrru'r ymrwymiad i newid yw'r freuddwyd o fod yn chwaraewr proffesiynol. Gellid dweud yr un peth am lawer o chwaraeon eraill, wrth gwrs,

ond yr wyf am dynnu sylw at rywfaint o'r gwaith yr ydym ni'n ei wneud.

The Wales Rugby League aims to help people to change through four key beliefs: that we have a duty of care that extends far beyond the sports field; that the majority of individuals want to become better people; that rugby league is a vehicle for encouraging change; and we believe in creating more opportunities for more people. How will we provide more opportunities for people to become better people? Rugby league is a sport that has achieved massive growth in the past 12 months. We have seen a 300 per cent growth in participation at the grass-roots level. Given the relatively short timescale and the fact that the governing body was not recognised until four years ago, such early success in such a short period can be attributed to a proactive and inclusive approach that has been driven through schools and clubs throughout Wales.

What do we do, and what has been established in such a short time? There is the junior club conference league. That is an annual national competition that involves 14 clubs and 40 teams. The clubs compete at under-13, under-15, and under-17 level, and the season is played from May to August, with each team completing 13 fixtures in a merit league format. There is a senior club conference league, which is an annual national competition involving 17 clubs and 17 teams, with clubs competing in a two-tiered premier and championship league that features promotion and relegation. The primary school cup is a year 6, mixed-gender, touch rugby league that is run on a tournament format, with 50 teams and more than 1,000 participants.

6.30 p.m.

There is a secondary schools club cup, which involves 14 junior clubs in tournaments for years 7 and 8 and under-13 competitions. The winning schools from the club competition play in both regional and national finals representing that club. The aim of this club is to promote the recruitment of players and

Nod Rygbi Cynghrair Cymru yw helpu pobl i newid drwy bedair cred allweddol: sef bod gennym ddyletswydd gofal sy'n ymestyn ymhell y tu hwnt i'r maes chwarae; bod y rhan fwyaf o unigolion am fod yn bobl well; bod rygbi'r gynghrair yn gyfrwng i annog newid; a'n bod yn credu mewn creu mwy o gyfleoedd i fwy o bobl. Sut y byddwn yn darparu mwy o gyfleoedd i bobl ddod yn well pobl? Mae rygbi'r gynghrair yn gamp sydd wedi tyfu'n aruthrol dros y 12 mis diwethaf. Yr ydym wedi gweld cynnydd o 300 y cant yn nifer y bobl sy'n cymryd rhan yn y gamp ar lawr gwlad. O gofio'r cyfnod cymharol fyr, a'r ffaith mai pedair blynedd yn unig yn ôl y cafodd y corff llywodraethu ei gydnabod, gellir priodoli llwyddiant mor gynnar mewn cyfnod mor fyr i ddull gweithredu rhagweithiol a chynhwysol sydd wedi'i yrru drwy ysgolion a chlybiau ledled Cymru.

Beth yr ydym yn ei wneud, a beth sydd wedi'i gyflawni mewn cyfnod mor fyr? Mae gennym gynghrair clybiau iau, sef cystadleuaeth genedlaethol flynyddol sy'n cynnwys 14 clwb a 40 o dimoedd. Mae'r clybiau'n cystadlu dan 13, dan 15 a than 17 oed, ac mae'r tymor yn rhedeg o fis Mai i fis Awst, gyda phob tîm yn chwarae 13 gêm mewn cynghrair deilyngdod. Ceir cynghrair clybiau hŷn, sef cystadleuaeth genedlaethol flynyddol sy'n cynnwys 17 o glybiau ac 17 o dimoedd, gyda thimoedd yn cystadlu ar ddwy haen, yn yr uwch-gynghrair a'r bencampwriaeth, ac yn cael eu dyrchafu ac yn disgyn o'r naill gynghrair i'r llall. Ceir cwpan ysgolion cynradd, sef cystadleuaeth rygbi cyffwrdd i fechgyn a merched ym mlwyddyn 6. Caiff y gystadleuaeth ei chynnal ar ffurf twrnamaint, gyda 50 o dimoedd a thros 1,000 o blant yn cymryd rhan.

Ceir cwpan clwb ysgolion uwchradd, sy'n cynnwys 14 o glybiau iau mewn twrnameintiau i flynyddoedd 7 ac 8 a chystadlaethau i rai dan 13 oed. Bydd yr ysgolion sy'n ennill cystadleuaeth y clwb yn chwarae mewn rowndiau terfynol rhanbarthol a chenedlaethol gan gynrychioli'r clwb

volunteers for local amateur clubs. We have the Carnegie championship schools, in which, in the secondary division, boys from years 7 to 11 and girls from years 7 to 9 compete. There is also a college division for boys in years 12 and 13. That sees 65 schools taking part, with over 1,300 participants. There is also the rugby league 5x60. For me, though, one of the most exciting developments is street rugby league, the aim of which is to target anti-social behaviour. It is run with the help of local authorities, the police, Communities First groups and StreetGames. That is for boys and girls aged 12 to 18. For those who are perhaps not as active as they were, we will be piloting league tag or league touch—a weekly competition for corporate or business people and less active people aged 25 and over. It is played after work hours on week nights.

As I said, many sports have that background, and many sports work actively in communities. Sport offers a way to engage people of all ages, and that, surely, is the basis for community regeneration. The home ground of the South Wales Scorpions RLFC is in the heart of the Neath Port Talbot area. Unfortunately, in common with many areas, there is a distinct need in that area to raise attainment levels in the schools in core subjects at all key stages, as well as to raise levels of physical activity and to increase healthy living practices. Wales Rugby League and the South Wales Scorpions RLFC, in partnership, have the philosophy that the educational attainment and social development of the children and young people in the area is not the sole responsibility of the schools involved in their tuition. It falls upon every family, business organisation and agency in the area to ensure that children in Neath Port Talbot are offered every opportunity to succeed. Its overriding ethos is mirrored in the Government strategy for children's services, the principles of 'Every Child Matters' and the legislation on children.

hwnnw. Nod y clwb yw hybu gwaith recriwtio chwaraewyr a gwirfoddolwyr i glybiau amatur lleol. Mae gennym bencampwriaeth Carnegie i ysgolion, lle mae bechgyn o flynyddoedd 7 i 11 a merched o flynyddoedd 7 i 9 yn cystadlu yn yr adran i ysgolion uwchradd. Ceir adran hefyd i golegau, ar gyfer bechgyn sydd ym mlynnyddoedd 12 a 13. Mae 65 o ysgolion a thros 1,300 o ddisgyblion yn cymryd rhan yn y bencampwriaeth honno. Yn ogystal, ceir rygbi'r gynghrair 5x60. Yn bersonol, fodd bynnag, credaf mai un o'r datblygiadau mwyaf cyffrous yw rygbi'r gynghrair y stryd, sy'n ceisio targedu ymddygiad gwrthgymdeithasol. Caiff ei redeg gyda chymorth awdurdodau lleol, yr heddlu, grwpiau Cymunedau yn Gyntaf, a Street Games. Mae'r ffurf hon ar y gêm ar gyfer bechgyn a merched 12 i 18 oed. I'r rheini sy'n llai heini nag y buont efallai, byddwn yn treialu fersiwn tag neu gyffwrdd o rygbi'r gynghrair—sef cystadleuaeth wythnosol ar gyfer corfforaethau neu bobl fusnes, a phobl lai heini sy'n 25 oed neu'n hŷn. Caiff ei chwarae yn ystod yr wythnos ar ôl oriau gwaith.

Fel y dywedais, mae gan lawer o chwaraeon gefndir o'r fath, ac mae llawer o chwaraeon yn weithgar mewn cymunedau. Mae chwaraeon yn cynnig ffordd o ymgysylltu â phobl o bob oed, a rhaid bod hynny'n sail ar gyfer adfywio cymunedau. Mae cartref clwb rygbi'r gynghrair Sgorpionau De Cymru yng nghanol ardal Castell-nedd Port Talbot. Yn anffodus, ceir angen pendant yn yr ardal honno, fel mewn llawer o ardaloedd eraill, i godi lefelau cyrhaeddiad mewn ysgolion yn y pynciau craidd ym mhob cyfnod allweddol, yn ogystal â chodi lefelau gweithgarwch corfforol a chynyddu arferion byw'n iach. Mae Rygbi Cynghrair Cymru a chlwb rygbi'r gynghrair Sgorpionau De Cymru yn rhannu'r athroniaeth nad yr ysgolion lle cânt eu gwersi yw'r unig fannau sy'n gyfrifol am gyrrhaeddiad addysgol a datblygiad cymdeithasol plant a phobl ifanc yn yr ardal. Mae sicrhau bod plant yng Nghastell-nedd Port Talbot yn cael pob cyfle i lwyddo yn gyfrifoldeb ar bob teulu, sefydliad busnes ac asiantaeth yn yr ardal. Caiff yr ethos hwnnw, sydd o'r pwys mwyaf, ei adlewyrchu yn strategaeth y Llywodraeth ar gyfer gwasanaethau plant, sef 'Mae Pob Plentyn yn



Bwysig?, a'r ddeddfwriaeth ynghylch plant.

In partnership, Wales Rugby League and the South Wales Scorpions RLFC will ensure that children and young people can access the opportunities that we are able to offer. Wales Rugby League is committed to working with local families, schools and organisations to provide quality learning experiences, which can make certain that children and young people have the chance to enjoy and achieve, some for the first time, and, in that way, become able to attain economic stability in later life. There is a six-lesson programme delivered at year 6 to pupils in primary schools, using rugby league as the underlying theme. Three lessons are devoted to literacy and developing literacy skills, and three to education about nutrition, healthy living principles and increasing physical activity.

Gan weithio mewn partneriaeth, bydd Rygbi Cynghrair Cymru a chlwb rygbi'r gynghrair Sgorpionau De Cymru yn sicrhau bod plant a phobl ifanc yn gallu cael mynediad i'r cyfleoedd y gallwn eu cynnig. Mae Rygbi Cynghrair Cymru wedi ymrwymo i weithio gyda theuluoedd, ysgolion a sefydliadau lleol i ddarparu profiadau dysgu o safon, a all sicrhau bod plant a phobl ifanc yn cael cyfle i fwynhau a chyflawni, am y tro cyntaf yn achos rhai ohonynt, a sicrhau eu bod drwy hynny'n gallu cael sefydlogrwydd economaidd yn ddiweddarach yn eu bywyd. Ceir rhaglen chwe gwrs a gyflwynir i ddisgyblion blwyddyn 6 mewn ysgolion cynradd, sy'n defnyddio rygbi'r gynghrair fel thema sylfaenol. Mae tair gwrs yn canolbwyntio ar lythrennedd a datblygu sgiliau llythrennedd, ac mae tair yn canolbwyntio ar addysg am faeth, egwyddorion byw'n iach a chynyddu gweithgarwch corfforol.

Rugby league in the north of England has always been heavily involved in community activities, believing that professional players have a great deal to give back to the communities that support them. That involvement can be in anything from after-school clubs, based around the football club, to breakfast clubs. In Wales, in the Neath Port Talbot area, we run the League for All programme, which targets pupils who do not attend mainstream education, engaging them in a six-week rugby league coaching course aimed at improving their health, wellbeing and social skills and at team building. We are aiming to run an apprenticeship programme through further education for 16 to 18-year-olds supported by a high-performance programme in rugby league, including role modelling, life skills, mentoring and team work. We hope to roll that out soon.

Mae rygbi'r gynghrair yng ngogledd Lloegr bob amser wedi chwarae rhan fawr mewn gweithgareddau cymunedol, wrth gredu bod gan chwaraewyr proffesiynol lawer iawn i'w roi'n ôl i'r cymunedau sy'n eu cefnogi. Gall y modd y maent yn gwneud hynny gynnwys unrhyw beth o glybiau ar ôl ysgol, sy'n gysylltiedig â'r clwb rygbi, i glybiau brechwast. Yng Nghymru, yn ardal Castell-nedd Port Talbot, yr ydym yn rhedeg y rhaglen Cynghrair i Bawb, sy'n targedu disgyblion nad ydynt yn mynd i ysgolion prif ffrwd. Mae'r rhaglen yn eu cael i gymryd rhan mewn cwrs hyfforddi rygbi'r gynghrair sy'n para chwe wythnos, ac sy'n ceisio gwella'u hiechyd, eu lles a'u sgiliau cymdeithasol ac sy'n ceisio adeiladu tîm. Yr ydym yn gobeithio cynnal rhaglen brentisiaethau drwy addysg bellach ar gyfer pobl ifanc 16 i 18 oed, a gefnogir gan raglen perfformiad uchel ym maes rygbi'r gynghrair, a fydd yn cynnwys modelau rôl, sgiliau bywyd, gwaith mentora a gwaith tîm. Yr ydym yn gobeithio cyflwyno hynny cyn bo hir.

Rugby league, of course, is not only played in south Wales, and since the Crusaders Rugby League moved to Wrexham, it has sparked new growth in north Wales. The club's move

Wrth gwrs, nid yn y de yn unig y caiff rygbi'r gynghrair ei chwarae, ac ers i glwb rygbi'r gynghrair y Croesgadwyr symud i Wrecsam, mae wedi sbarduno twf newydd yn y

there has generated great community interest, so much so that a five-club competition was launched, in front of an ecstatic crowd, before the Crusaders thumped the Bradford Bulls 44 to 20. The ecstasy might have been over the thumping of the Bradford Bulls, but, nevertheless, there was a great crowd there and it thoroughly supported the competition. That was two weeks ago. Over the summer we hope to see street rugby develop in Wrexham, and as the Super League team goes from success to success, as it is doing, more and more people will become excited about this great game.

Wales Rugby League is in the process of enhancing the rugby league development structures and processes in Wales to produce a development pathway that serves all levels of the game, from community and schools levels, to the club, Super League and international level. The Wales Rugby League is developing all pathway and development programmes to focus specifically on adding value to the next generation of players and coaches to represent Wales—from scholarship level through to semi-professional level at South Wales Scorpions RLFC, the Super League with the Crusaders in Wrexham, and at senior international level. The Wales Rugby League is implementing an individually focused, holistic approach to player development, and giving a commitment that serves both Welsh players and staff needs across all aspects of the game, including game sense, skill acquisition, long-term athletic development and personal development via pastoral care.

Although we have been here since 1908, we are, in reality, a young and growing sport in Wales, a sport that is totally committed to developing a culture of working in partnership to deliver an improved and integrated performance pathway programme across Wales Rugby League, to allow any child or adult to develop and progress as further abilities indicate. Our commitment to supporting communities is reflected in the major sponsor of our national teams—the Co-operative Group in Wales. We believe, along with many other sports, that sport is a vastly

gogledd. Mae'r ffaith bod y clwb wedi symud i'r ardal wedi creu llawer o ddi-ddordeb yn y gymuned, yn gymaint felly nes i gystadleuaeth pum clwb gael ei lansio, o flaen torf a oedd yn llawn cyffro, cyn i'r Rhyfelwyr roi cweir o 44 i 20 i'r Bradford Bulls. Mae'n bosibl mai'r cweir a roddwyd i'r Bradford Bulls a oedd yn gyfrifol am y cyffro, ond er hynny, yr oedd torf wych yno a gefnogodd y gystadleuaeth yn frwd. Yr oedd hynny bythefnos yn ôl. Dros yr haf, yr ydym yn gobeithio gweld rygbi'r stryd yn datblygu yn Wrecsam, ac wrth i dîm yr Uwch-gynghrair fynd o nerth i nerth, fel y mae'n gwneud, bydd mwy a mwy o bobl yn dechrau teimlo'n gyffrous am y gêm wych hon.

Mae Rygbi Cynghrair Cymru wrthi'n gwella strwythurau a phrosesau datblygu rygbi'r gynghrair yng Nghymru i gynhyrchu llwybr datblygu sy'n gwasanaethu pob lefel o'r gêm, o lefel y gymuned ac ysgolion, i'r clwb, yr Uwch-gynghrair a lefel ryngwladol. Mae Rygbi Cynghrair Cymru yn datblygu pob rhaglen ddatblygu a llwybr i ganolbwyntio'n benodol ar ychwanegu gwerth ar gyfer y genhedlaeth nesaf o chwaraewyr a hyfforddwyr a fydd yn cynrychioli Cymru—o lefel ysgoloriaeth i'r lefel led-broffesiynol yng nghlwb rygbi'r gynghrair Sgorpionau De Cymru, yr Uwch-gynghrair gyda'r Rhyfelwyr yn Wrecsam, a'r lefel hŷn, ryngwladol. Mae Rygbi Cynghrair Cymru yn gweithredu dull o ddatblygu chwaraewyr, sy'n canolbwyntio ar bob agwedd ar yr unigolyn ac sy'n rhoi ymrwymiad sy'n diwallu anghenion chwaraewyr Cymru a staff ar draws pob agwedd ar y gêm, gan gynnwys agweddau'n ymwneud â synnwyr gêm, gwaith caffael sgiliau, datblygiad athletaidd hirdymor, a datblygiad personol drwy ofal bugeiliol.

Er inni fod yma er 1908, yr ydym, mewn gwirionedd, yn gamp ifanc sy'n tyfu yng Nghymru. Yr ydym yn gamp sydd wedi ymrwymo'n llwyr i ddatblygu diwylliant o weithio mewn partneriaeth i greu rhaglen well ac integredig ar gyfer llwybrau perfformio ar draws Rygbi Cynghrair Cymru, i ganiatáu i unrhyw blentyn neu oedolyn ddatblygu a symud ymlaen yn ôl ei allu. Mae ein hymrwymiad i gefnogi cymunedau wedi'i adlewyrchu yn y prif noddwr ar gyfer ein timoedd cenedlaethol—sef grŵp y Co-operative yng Nghymru. Credwn, ynghyd â

underused resource for regenerating not just individuals, but communities. It engages people of all ages who may well not have engaged with anything in a meaningful way before, and, by doing so, puts hope back into lives. As Aristotle said, 'hope is a waking dream'. For many, I hope that that dream will be of playing rugby league. As Lin Yutang said, as more people walk the road, it will become a reality. I know that the Wales Rugby League is intent on making that dream a reality.

**The Deputy Presiding Officer:** I have no other speakers, so I call on the Minister for Heritage to reply to the debate.

**The Minister for Heritage (Alun Ffred Jones):** I thank Janet for bringing this subject to our attention and to the attention of the Assembly. Her enthusiasm for the sport, of which we are aware, was on display once again. I do not have a quotation from Aristotle and I am not quite sure what Aristotle would have made of rugby league, but I am sure that he would have appreciated the finer points of the game.

The title of your short debate is 'Hope', and you illustrated very well how rugby league authorities and the game in general engage with communities and individuals. I was interested in your emphasis on the game's authorities' aim to build better communities and to develop individuals. Sport certainly has the power to do that.

The growth of rugby league in Wales over the past few years has been impressive in the short term, and I understand that Sport Wales is working with Wales Rugby League in an effort to develop the sport in Wales and to develop its governance structure, which is an important part of any governing body. Wales Rugby League is growing quickly and I am pleased that the Wales team has recently been announced as an automatic qualifier for the 2013 world cup, to be held in the UK. This will help to raise the profile of the sport in Wales and I know that there are active discussions between rugby league authorities here in Wales and the major events unit on

nifer o chwaraeon eraill, fod chwaraeon yn adnodd y gellid defnyddio llawer mwy ohono i adfywio cymunedau yn ogystal ag unigolion. Mae'n ymgysylltu â phobl o bob oed nad ydynt, hwyrach, wedi ymgysylltu â dim byd mewn ffordd ystyrllon o'r blaen, a thrwy hynny, mae'n rhoi gobaith yn ôl i fywydau. Fel y dywedodd Aristotlys, breuddwyd effro yw gobaith. I lawer o bobl, gobeithiaf mai chwarae rygbi'r gynghrair fydd y freuddwyd honno. Fel y dywedodd Lin Yutang, wrth i fwy o bobl droedio'r ffordd, bydd yn dod yn realiti. Gwn fod Rygbi Cynghrair Cymru yn benderfynol o droi'r freuddwyd honno'n realiti.

**Y Dirprwy Lywydd:** Nid oes gennyf ddim siaradwyr eraill, felly, galwaf ar y Gweinidog dros Dreftadaeth i ymateb i'r ddadl.

**Y Gweinidog dros Dreftadaeth (Alun Ffred Jones):** Yr wyf yn diolch i Janet am ddod â'r pwn hwn i'n sylw ni ac i sylw'r Cynulliad. Yr oedd ei brwdfrydedd dros y gamp, y gwyddom amdano, yn amlwg unwaith eto. Nid oes gennyf ddyfyniad gan Aristotlys, ac ni wn beth fyddai barn Aristotlys am rygbi'r gynghrair, ond yr wyf yn siŵr y byddai wedi gwerthfawrogi'r agweddau mwyaf cywrair ar y gêm.

Teitl eich dadl fer yw 'Gobaith', a bu ichi ddangos yn dda iawn sut mae awdurdodau rygbi'r gynghrair, a'r gêm yn gyffredinol, yn ymgysylltu â chymunedau ac unigolion. Yr oedd gennyf ddiddordeb yn eich pwyslais ar fwiad awdurdodau'r gêm i adeiladu gwell cymunedau a datblygu unigolion. Yn sicr, mae gan chwaraeon y grym i wneud hynny.

Mae twf rygbi'r gynghrair yng Nghymru dros yr ychydig flynyddoedd diwethaf wedi bod yn drawiadol yn y tymor byr, a deallaf fod Chwaraeon Cymru yn gweithio gyda Rygbi Cynghrair Cymru mewn ymgais i ddatblygu'r gamp yng Nghymru a datblygu'i strwythur llywodraethu, sy'n rhan bwysig o unrhyw gorff llywodraethu. Mae Rygbi Cynghrair Cymru yn tyfu'n gyflym, ac yr wyf yn falch o'r cyhoeddiad a gafwyd yn ddiweddar, sef y bydd tîm Cymru yn cymhwyso'n awtomatig ar gyfer cystadleuaeth cwpan y byd yn 2013, sydd i'w chynnal yn y DU. Bydd hynny'n helpu i godi proffil y gamp yng Nghymru, a gwn fod trafodaethau'n mynd rhagddynt

the prospects for holding the world cup partially in Wales. Any funding and support that Sport Wales provides to the recognised governing bodies of sport is based on a plan that is agreed between both parties. I know that a constructive dialogue is ongoing.

rhwng awdurdodau rygbi'r gynghrair yma yng Nghymru a'r uned digwyddiadau mawr ynghylch y posibilrwydd o gynnal rhan o'r gystadleuaeth yng Nghymru. Mae unrhyw gyllid a chymorth a roddir gan Chwaraeon Cymru i gyrff llywodraethu cydnabyddedig unrhyw gamp yn seiliedig ar gynllun y cytunir arno rhwng y naill ochr a'r llall. Gwn fod trafodaethau adeiladol yn mynd rhagddynt.

You emphasised in your speech that social inclusion was an important part of the thinking of the rugby league authorities in Wales and this is an important element for adults and for young people. It can promote community identity and cohesion and local provision of sport and leisure can be a major factor in encouraging certain social groups to participate. You also mentioned community regeneration, with reference to the Neath Port Talbot area, and I agree that sport can be a catalyst for both urban and rural revival. The provision of sports facilities can act as a catalyst in the regeneration of an area. There is no doubt that sport can have a powerful impact on social inclusion, and that is increasingly recognised by everyone who is involved in regeneration and inclusion.

Yn eich araith, bu ichi bwysleisio bod cynhwysiant cymdeithasol yn rhan bwysig o feddylfryd awdurdodau rygbi'r gynghrair yng Nghymru, ac mae hynny'n elfen bwysig ar gyfer oedolion a phobl ifanc. Gall hybu hunaniaeth a chydlyniant cymunedol, a gall darpariaeth leol o ran chwaraeon a gweithgareddau hamdden fod yn ffactor pwysig i annog rhai grwpiau cymdeithasol i gymryd rhan. Soniasoch hefyd am adfywio cymunedol, gan gyfeirio at ardal Castell-nedd Port Talbot, a chytunaf y gall chwaraeon fod yn sbardun ar gyfer adfywio trefol a gwledig. Gall darparu cyfleusterau chwaraeon fod yn sbardun ar gyfer adfywio ardal. Nid oes amheuaeth na all chwaraeon gael effaith bwerus ar gynhwysiant cymdeithasol, a chaiff hynny ei gydnabod yn gynyddol gan bawb sy'n ymwneud ag adfywio a chynhwysiant.

6.40 p.m.

Again, you emphasised the potential to improve the quality of life of individuals and communities through the power of sport, and you illustrated that well in your description of the activities of the rugby league authorities here in Wales. Another aspect of this is volunteering, which is a powerful force in any community. From what you have explained to me and from my meetings with some rugby league officials here in Wales, I know that that is an important element in the authorities' thinking.

Eto, bu ichi bwysleisio'r potensial i wella ansawdd bywyd unigolion a chymunedau drwy rym chwaraeon, a bu ichi ddangos hynny'n dda yn eich disgrifiad o weithgareddau awdurdodau rygbi'r gynghrair yma yng Nghymru. Agweddd arall ar hynny yw gwirfoddoli, sy'n rym pwerus mewn unrhyw gymuned. O'r hyn yr ydych wedi'i egluro i mi, ac o'm cyfarfodydd â rhai o swyddogion rygbi'r gynghrair yma yng Nghymru, gwn fod hynny'n elfen bwysig ym marn yr awdurdodau.

You mentioned street rugby league, and, although I am not familiar with its finer points, involving groups that perhaps do not usually engage in sport is an important element in the Government's thinking. That is why we have placed so much emphasis on the 5x60 programme, which is helping to change the face of the provision of sport for young people across Wales. An important

Cyfeiriasoch at rygbi'r gynghrair y stryd, ac er nad wyf yn gyfarwydd iawn â manylion y ffurf honno ar y gêm, mae cynnwys grwpiau nad ydynt, o bosibl, yn cymryd rhan mewn chwaraeon fel rheol yn elfen bwysig ym marn y Llywodraeth. Dyna pam yr ydym wedi rhoi cymaint o bwyslais ar y rhaglen 5x60, sy'n helpu i weddnewid y ddarpariaeth o ran chwaraeon i bobl ifanc ledled Cymru.

element of that programme in secondary schools is providing links in an area between the schools and local voluntary clubs. The 5x60 officers are creating links with volunteers and coaches in the local community to deliver the programme and to help to meet demand. I was in Newbridge recently to launch the revised free swimming scheme, and it was heartening to see the work that is going on there. I have seen such work in other parts of Wales, where the 5x60 officers are active in schools as well as in the community, trying to involve local clubs in different sports. It is heartening to see that happening all over Wales through the 5x60 programme. For example, in Llangefni, pupils are getting involved in a badminton festival, and, in Conwy, secondary school pupils are getting involved in climbing, canoeing and abseiling. All those things can improve the life chances as well as the aspirations of young people. In Pembrokeshire, a 5x60 officer has arranged for a dance tutor to lead classes, which has led to community dance classes being held in a local leisure centre involving the same tutor. Therefore, there are plenty of examples of good practice. I applaud the efforts that have been made by the rugby league authorities in Wales, and I applaud the heartening displays by the professional team in Wrexham, which I hope will engender hope and activity on the ground in that area among young people and those who have not, up to now, engaged in sporting activities.

Elfen bwysig o'r rhaglen honno mewn ysgolion uwchradd yw darparu cysylltiadau rhwng yr ysgolion a chlybiau gwirfoddol lleol mewn ardal. Mae'r swyddogion 5x60 yn creu cysylltiadau â gwirfoddolwyr a hyfforddwyr yn y gymuned leol i ddarparu'r rhaglen a helpu i ateb y galw. Yr oeddwn yn Nhrecelyn yn ddiweddar i lansio'r cynllun nofio am ddim diwygiedig, ac yr oedd yn galonogol gweld y gwaith sy'n digwydd yno. Yr wyf wedi gweld gwaith tebyg mewn rhannau eraill o Gymru, lle mae'r swyddogion 5x60 yn weithgar mewn ysgolion yn ogystal â'r gymuned, yn ceisio cynnwys clybiau lleol mewn gwahanol chwaraeon. Mae'n galonogol gweld hynny'n digwydd ledled Cymru drwy'r rhaglen 5x60. Er enghraifft, yn Llangefni, mae disgyblion yn cymryd rhan mewn gŵyl badminton, ac yng Nghonwy, mae disgyblion ysgolion uwchradd yn cymryd rhan mewn gweithgareddau dringo, canŵio ac abseilio. Gall yr holl bethau hynny wella cyfleoedd pobl ifanc mewn bywyd, yn ogystal â gwella'u dyheadau. Yn sir Benfro, mae swyddog 5x60 wedi trefnu i diwtor dawns arwain dosbarthiadau, sydd wedi arwain at gynnal gwersi dawnsio cymunedol yn y ganolfan hamdden leol dan arweiniad yr un tiwtor. Felly, ceir digon o enghreifftiau o arfer da. Yr wyf yn cymeradwyo'r ymdrechion a wnaed gan awdurdodau rygbi'r gynghrair yng Nghymru, a chymeradwyaf y perfformiadau calonogol gan y tîm proffesiynol yn Wrecsam, a fydd, gobeithio, yn ennyn gobaith a gweithgarwch ar lawr gwlad yn yr ardal honno ymhlith pobl ifanc a'r rheini nad ydynt, hyd yma, wedi cymryd rhan mewn gweithgareddau chwaraeon.

**The Deputy Presiding Officer:** That brings today's proceedings to a close.

**Y Dirprwy Lywydd:** Dyna ddiwedd ein trafodion am heddiw.

*Daeth y cyfarfod i ben am 6.43 p.m.  
The meeting ended at 6.43 p.m.*

#### **Aelodau a'u Pleidiau Members and their Parties**

Andrews, Leighton (Llafur – Labour)  
 Asghar, Mohammad (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Barrett, Lorraine (Llafur – Labour)  
 Bates, Mick (Democrat Rhyddfrydol Annibynnol – Independent Liberal Democrat)  
 Black, Peter (Democratiaid Rhyddfrydol Cymru – Welsh Liberal Democrats)  
 Bourne, Nick (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Burnham, Eleanor (Democratiaid Rhyddfrydol Cymru – Welsh Liberal Democrats)  
 Burns, Angela (Ceidwadwyr Cymreig – Welsh Conservatives)

Butler, Rosemary (Llafur – Labour)  
 Cairns, Alun (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Chapman, Christine (Llafur – Labour)  
 Cuthbert, Jeff (Llafur – Labour)  
 Davidson, Jane (Llafur – Labour)  
 Davies, Alun (Llafur – Labour)  
 Davies, Andrew (Llafur – Labour)  
 Davies, Andrew R.T. (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Davies, Jocelyn (Plaid Cymru – The Party of Wales)  
 Davies, Paul (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Elis-Thomas, Dafydd (Plaid Cymru – The Party of Wales)  
 Evans, Nerys (Plaid Cymru – The Party of Wales)  
 Franks, Chris (Plaid Cymru – The Party of Wales)  
 German, Michael (Democratiaid Rhyddfrydol Cymru – Welsh Liberal Democrats)  
 Graham, William (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Gregory, Janice (Llafur – Labour)  
 Griffiths, John (Llafur – Labour)  
 Griffiths, Lesley (Llafur – Labour)  
 Gibbons, Brian (Llafur – Labour)  
 Hart, Edwina (Llafur – Labour)  
 Hutt, Jane (Llafur – Labour)  
 Isherwood, Mark (Ceidwadwyr Cymreig – Welsh Conservatives)  
 James, Irene (Llafur – Labour)  
 Jenkins, Bethan (Plaid Cymru – The Party of Wales)  
 Jones, Alun Ffred (Plaid Cymru – The Party of Wales)  
 Jones, Ann (Llafur – Labour)  
 Jones, Carwyn (Llafur – Labour)  
 Jones, Elin (Plaid Cymru – The Party of Wales)  
 Jones, Gareth (Plaid Cymru – The Party of Wales)  
 Jones, Helen Mary (Plaid Cymru – The Party of Wales)  
 Jones, Ieuan Wyn (Plaid Cymru – The Party of Wales)  
 Law, Trish (Annibynnol – Independent)  
 Lewis, Huw (Llafur – Labour)  
 Lloyd, David (Plaid Cymru – The Party of Wales)  
 Lloyd, Val (Llafur – Labour)  
 Melding, David (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Mewies, Sandy (Llafur – Labour)  
 Millar, Darren (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Morgan, Jonathan (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Morgan, Rhodri (Llafur – Labour)  
 Neagle, Lynne (Llafur – Labour)  
 Ramsay, Nick (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Randerson, Jenny (Democratiaid Rhyddfrydol Cymru – Welsh Liberal Democrats)  
 Ryder, Janet (Plaid Cymru – The Party of Wales)  
 Sargeant, Carl (Llafur – Labour)  
 Sinclair, Karen (Llafur – Labour)  
 Thomas, Gwenda (Llafur – Labour)  
 Thomas, Rhodri Glyn (Plaid Cymru – The Party of Wales)  
 Watson, Joyce (Llafur – Labour)  
 Williams, Brynle (Ceidwadwyr Cymreig – Welsh Conservatives)  
 Williams, Kirsty (Democratiaid Rhyddfrydol Cymru – Welsh Liberal Democrats)  
 Wood, Leanne (Plaid Cymru – The Party of Wales)