

Y Pwyllgor Cyfrifon Cyhoeddus

Lleoliad:

Ystafell Bwyllgora 4 – Ty Hywel

Dyddiad:

Dydd Mawrth, 18 Chwefror 2014

Amser:

09:00

Cynulliad
Cenedlaethol
Cymru

National
Assembly for
Wales



I gael rhagor o wybodaeth, cysylltwch â:

Fay Buckle

Clerc y Pwyllgor

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Agenda

1 Cyflwyniad, ymddiheuriadau a dirprwyon (09:00)

2 Papurau i'w nodi (09:00)

Bwrdd Draenio Mewnol Gwastadeddau Cil-y-Coed a Gwynllŵg: Llythyr gan Gweinidog Cyfoeth Naturiol a Bwyd (5 Chwefror 2014) (Tudalen 1)

3 Cynnig o dan Reol Sefydlog 17.42 i benderfynu gwahardd y cyhoedd o'r cyfarfod ar gyfer y canlynol: (09:05)

Eitemau 4, 5, 6, 7 & 8

4 Rheoli Grantiau yng Nghymru: Adroddiad Blynyddol Llywodraeth

Cymru 2013 (09:05–09:20) (Tudalennau 2 – 49)

PAC(4)-06-14 (papur 1)

5 Trefniadau Cyflenwi ar gyfer Absenoldeb Athrawon: Trafod tystiolaeth bellach (09:20 – 09:50) (Tudalennau 50 – 66)

PAC(4)-06-14 (papur 2)

PAC(4)-06-14 (papur 3)

6 Cyllid Iechyd 2012–13 a Thu Hwnt: Trafod tystiolaeth bellach (09:50–10:15) (Tudalennau 67 – 72)

PAC(4)-06-14 (papur 4)

7 Gofal heb ei drefnu (10:15–10:40) (Tudalennau 73 – 78)

PAC(4)-06-14 (papur 5)

8 Cwrdd â'r Heriau Ariannol sy'n Wynebu Llywodraeth: Sesiwn friffio gan Swyddfa Archwilio Cymru (10:40–11:00)

Alun Davies AC / AM
Y Gweinidog Cyfoeth Naturiol a Bwyd
Minister for Natural Resources and Food



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref
Ein cyf/Our ref AD-/00159/14

Darren Millar AC
AC Gorllewin Clwyd
Cadeirydd – Pwyllgor Cyfrifon
Cyhoeddus
Ty Hywel
Bae Caerdydd
Caerdydd
CF99 1NA

S

Chwefror 2014

Bwrdd Draenio Mewnol Caldicot a Lefelau Gwynllwg

Diolch am eich llythyr ar 21 Ionawr yn gofyn i ni esbonio'r trefniadau archwilio ariannol yn y dyfodol ar gyfer Byrddau Draenio Mewnol sy'n rhychwantu ffiniau.

Rydym wedi ystyried opsiynau eraill ond ni allwn feddwl am ffordd ymarferol ymlaen heblaw trwy ddeddfwriaeth. Ar gyfer cyrff sy'n rhychwantu ffiniau, byddai angen caniatâd Llywodraeth y DU arnom yn hyn o beth.

I ateb y cwestiwn penodol y mae'r Pwyllgor yn ei ofyn, mae'r Byrddau'n cael eu hariannu trwy lefiâu a thaliadau a godir yn lleol. Nid yw Llywodraeth Cymru'n darparu unrhyw arian canolog na grant ar eu cyfer.

Alun Davies AC / AM
Y Gweinidog Cyfoeth Naturiol a Bwyd
Minister for Natural Resources and Food

Yn rhinwedd paragraff(au) ix o Reol Sefydlog 17.42

Mae cyfyngiadau ar y ddogfen hon

Eitem 5

Owen Evans
Cyfarwyddwr Cyffredinol • Director General

Yr Adran Addysg a Sgiliau
Department for Education and Skills



Llywodraeth Cymru
Welsh Government

Mr Darren Millar AC
Cadeirydd
Y Pwyllgor Cyfrifon Cyhoeddus
Cynulliad Cenedlaethol Cymru

7 Chwefror 2014

Annwyl Mr Millar

Diolch am eich gwahoddiad i gyfarfod y Pwyllgor ar 14 Ionawr i gyflwyno ein tystiolaeth ar ganfyddiadau'r Archwilydd Cyffredinol yn ei adroddiad ar Drefniadau Cyflenwi ar gyfer Absenoldeb Athrawon.

Yn ystod y cyfarfod gofynnoch chi i ni ddarparu gwybodaeth ategol ychwanegol, a gyflwynir isod mewn perthynas â'r pum mater allweddol.

1. Y nifer o athrawon cyflenwi sydd wedi'u cofrestru a'u rhestru ar restrau awdurdodau lleol ac asiantaethau.

- Nid yw'r data hwn wedi'i gasglu ac felly ni allwn ddarparu'r wybodaeth a geisiwyd. Fodd bynnag fel y dywedwyd yn ein tystiolaeth i'r Pwyllgor, rydym ni'n gweithio gyda Chyngor Addysgu Cyffredinol Cymru (CyngACC) i wneud cyswllt uniongyrchol ag athrawon cyflenwi. Byddwn yn gofyn iddyn nhw gytuno i ganiatáu i'w manylion cyswllt gael eu defnyddio i ddarparu gwybodaeth a chyngor perthnasol iddyn nhw. Byddwn ni hefyd yn defnyddio'r broses hon (yn amodol ar gytundeb yr athrawon cyflenwi) i gasglu data'n nodi gyda phwy maen nhw wedi'u cofrestru. Ein bwriad yw cwblhau'r broses hon erbyn mis Mehefin 2014.

2. Y nifer o ddiwrnodau o absenoldeb salwch a gymerir gan athrawon a gweld a oes patrwm o achosion.

- Rhan o'n tystiolaeth ni oedd yr wybodaeth ddiweddaraf sydd ar gael ym mwletin Ystadegau Cymru ar "Athrawon mewn gwasanaeth, swyddi gwag ac absenoldeb drwy salwch" (Ionawr 2013) oedd yn nodi mai'r nifer o ddiwrnodau salwch a gymerwyd gan athrawon yn ystod 2012 oedd 187,377 oedd dros 25,000 yn llai nag yn 2011. Rwyf yn atodi copi o'r bwletin hwn er gwybodaeth yn atodiad 1. (Nid yw'r ddogfen hon ar gael yn y Gymraeg).
- O ran patrwm yr achosion, yn ôl adroddiad Swyddfa Archwilio Cymru "Nid yw ysgolion nac awdurdodau lleol yn monitro'n ddigonol rhesymau dros absenoldeb athrawon fel mater o drefn, ac felly nid ydynt bob amser yn deall y rhesymau pam mae angen staff cyflenwi" (Tudalen 18, paragraff 1.13). Rydym ni felly'n methu â



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chadarnhau a oes patrwm o achosion mewn perthynas ag absenoldeb salwch athrawon. Fodd bynnag byddwn ni'n codi'r mater hwn yn ein trafodaethau gyda CLILC gan ofyn iddyn nhw gydweithio gydag awdurdodau lleol i sefydlu system gyson ar gyfer casglu'r data hwn a fyddai'n caniatáu dadansoddiad manylach o'r holl absenoldebau.

- Fel y dywedwyd yn ystod gwrandawriad y pwyllgor, byddwn ni'n datblygu canllawiau i ysgolion ac awdurdodau lleol a fydd yn eu cynorthwyo i fynd i'r afael â materion sy'n ymwneud ag absenoldeb athrawon. Yn benodol bydd y canllawiau'n darparu gwybodaeth ynglŷn â sut y dylid monitro a rheoli presenoldeb ac absenoldeb athrawon yn effeithiol. Disgwylir y caiff y canllawiau hyn eu cyhoeddi ym mis Medi 2014. Byddwn ni hefyd yn gofyn i Estyn ymgymryd ag astudiaeth thematig yn ystod 2016/17 i fesur llwyddiant o ran mabwysiadu'r canllawiau.

3. Y nifer o athrawon newydd gyflawni sy'n ymgymryd â chyfnod ymsefydlu drwy'r llwybr cyflenwi

- Ar 30 Ionawr 2014, roedd cyfanswm o 543 o athrawon cyflenwi'n wedi cofrestru gyda CyngACC fel rhai sy'n ymgymryd â'u cyfnod ymsefydlu statudol.

4. Y nifer o athrawon cyflenwi sy'n ymgymryd â Gradd Meistr mewn Ymarfer Addysgol

- Ar 30 Ionawr 2014, roedd cyfanswm o 13 o athrawon cyflenwi'n wedi cofrestru ar gyfer y Radd Meistr mewn Ymarfer Addysgol - 12 o athrawon yng Nghohort 2 ac 1 athro yng Nghohort 1. Mae ymgymryd â'r Radd yn ddewisol ac mae'r holl ddarpar fyfyrwyr yn ddarostyngedig i'r un meini prawf cymhwysedd. Mae gwybodaeth ynghylch ymgymryd â'r Radd Meistr ar gael i'r holl athrawon newydd gyflawni drwy wefannau Llywodraeth Cymru a CyngACC.

5. Nodyn ynghylch effeithiolrwydd y cynllun mentora allanol ac a yw buddsoddi yn y cynllun yn darparu gwerth da am arian

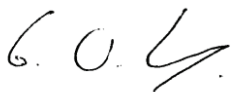
- Cyflwynwyd rôl y mentor allanol i ddarparu cymorth cyson o ansawdd uchel i'r holl athrawon newydd gyflawni (ANG) yng Nghymru gan ymarferwyr profiadol drwy gydol eu cyfnod ymsefydlu statudol a thrwy dair blynedd y Radd Meistr mewn Ymarfer Addysgol (i'r ANGau hynny sy'n dewis ymgymryd â'r Radd).
- Sail resymegol rôl y mentor allanol yw ei bod yn caniatáu cyfle i fentoriaid weithio ar draws amrywiaeth o ysgolion, gan rannu ymarfer gorau a gweithio ar y cyd â'u cohort o ANGau a gyda mentoriaid eraill, yn rhanbarthol ac yn genedlaethol. Ceir manteision diriaethol hefyd i ysgolion y mentoriaid gan eu bod yn gallu defnyddio eu hadnoddau mentora yn eu hysgol eu hunain a dod â'r arferion da maen nhw wedi'u gweld mewn ysgolion eraill yn ôl i'w rhannu. Mae hwn yn fwiadol yn ddull cylchol o weithredu sy'n sicrhau bod rôl y mentor yn fuddiol i'r sawl sy'n cael ei fentora a hefyd i ysgol y mentor ac mae'n rhan o'r drefn ehagnach o gymorth rhwng ysgolion sy'n cael ei datblygu gan Lywodraeth Cymru.
- Mae mentoriaid allanol yn gweithio rhan amser gydag ANGau. Bydd yr amser y bydd pob mentor yn ei neilltuo i'r rôl yn dibynnu ar y nifer o ANGau y mae'n eu cynorthwyo, ac a yw'r ANGau yn ymgymryd ag ymsefydlu yn unig neu gyfuniad o'r Radd Meistr ac ymsefydlu. Mae'r cyllid wedi'i gyfrifo drwy dybio os yw mentor yn cynorthwyo rhwng 18 a 24 o ANGau y flwyddyn (sy'n cyfateb i dri diwrnod yr

wythnos) yna bydd ysgol y mentor yn derbyn digon o gyllid i'w galluogi i gyflogi ANG llawn amser i gyflenwi ar gyfer absenoldeb y mentor. Mae hyn yn amlwg yn caniatáu hyblygrwydd i ysgolion benderfynu sut i ddefnyddio gweddill amser y mentor yn yr ysgol. Yn ymarferol, gyda'r cynllun yn dal i fod ar gam cynnar yn ei ddatblygiad, mae'r mwyafrif o fentoriaid yn cynorthwyo nifer llai o ANGau.

- Mae'r drefn o ryddhau rhan amser ynghyd â natur y rhaglenni ymsefydlu a Gradd Meistr yn golygu bod y mentoriaid i raddau helaeth yn gyfrifol am eu hamserlenni eu hunain felly mae modd iddyn nhw gynllunio eu hamser i ffwrdd o'r ysgol o flaen llaw a sicrhau eu bod yn gallu cyflawni eu rôl fel mentor a hefyd parhau i fod ag ymrwymiad llawn i'w rôl yn yr ysgol. Mae hyn yn golygu bod yr ysgol yn gallu cynllunio trefniadau effeithiol i gyflenwi ar gyfer eu habsenoldeb sy'n sicrhau cysondeb dysgu i'r dysgwyr sy'n cael eu heffeithio.
- Mae'r rhaglen Gradd Meistr mewn Ymarfer Addysgol wedi bod yn rhedeg ers 16 mis. Dechreuodd yr ail gohort o ANGau a mentoriaid y rhaglen ym mis Ionawr 2014 gyda chynnydd yn y niferoedd o'i gymharu â'r cohort cyntaf.
- Mae'n ddyddiau cymharol gynnar ar y rhaglen o hyd felly, ond mae adborth cychwynnol oddi wrth y mwyafrif o fyfyrwyr a mentoriaid yn dangos eu bod yn awyddus i barhau gyda'r rhaglen am y tair blynedd lawn. Os oes myfyrwyr wedi gadael y cwrs neu fentoriaid wedi ymddiswyddo, ar y cyfan rhesymau personol neu newidiadau mewn cyflogaeth sy'n gyfrifol yn hytrach na phenderfyniad bwriadol i dynnu'n ôl o'r rhaglen.
- Mae dadansoddiad cychwynnol, anffurfiol yn dangos bod y Cwrs Meistr yn darparu gwerth am arian, gyda'r adborth mwyafrif cadarnhaol yn ymwneud â rôl y mentor allanol. Mae myfyrwyr y Cwrs Meistr a'u penaethiaid yn ystyried bod y cymorth sy'n seiliedig ar ymarfer a gaiff ei ddarparu gan y mentor allanol yn elfen unigryw o raglen Meistr.
- Disgwylir i werthusiad allanol ffurfiol adrodd yn ystod gwanwyn 2015. Bydd y gwerthusiad hwn yn cynorthwyo i bennu a ddylid estyn contract y Radd Meistr mewn Ymarfer Addysgol. Gwerth am arian felly fydd un o'r meini prawf gwerthuso craidd a gaiff eu hystyried. Yn y tymor hirach, bydd gofyn i Estyn hefyd ymgymryd ag astudiaeth thematig fydd yn canolbwyntio ar effaith y Radd Meistr ar godi safonau addysgu a gwella canlyniadau dysgwyr.

Gobeithio y bydd yr wybodaeth ychwanegol sydd wedi'i darparu'n mynd i'r afael â'r cwestiynau a godwyd gennych chi. Os oes angen unrhyw fanylion pellach, cysylltwch â mi ac fe wna fy ngorau i ddelio â'ch cais.

Yn gywir



Owen Evans

Teachers in service, vacancies and sickness absence, January 2013

This Statistical First Release presents data on the number of teachers in service, vacancies for full-time permanent teachers in maintained schools in Wales as at January 2013, and sickness absence during 2012. The information is taken from the STATS3 survey of local authorities (LAs) and is analysed by type of school, type of teacher, vacancies by subject and summary information relating to sickness absence.

Key points

Teachers in service (Section 1)

- There were 27,310 full-time equivalent (FTE) teachers in service with LAs, an increase of 333 since January 2012 (*Chart 1, Table 1*).
- There were 26,139 FTE qualified teachers employed at maintained nursery, primary and secondary schools in Wales, an increase of 394 since January 2012 (*Chart 2, Table 2*).
- There were 666 FTE qualified teachers at maintained special schools, a decrease of 26 since January 2012 (*Table 3*).
- The number of FTE qualified teachers providing education other than at school decreased from 327 to 277 between January 2012 and January 2013 (*Table 1*).

Teacher vacancies (Section 2)

- The total number of teacher vacancies in nursery, primary and secondary schools was lower in January 2013 (86) compared with January 2012 (93) (*Tables 4 and 5*).
The total nursery, primary and secondary vacancy rate is 0.3 per cent.
- There were no nursery school vacancies. The number of vacancies for teachers in primary schools was 47, a decrease of 9 compared with January 2012 (*Table 5*).
The vacancy rate in the nursery/primary sector is 0.4 per cent.
- There were 39 vacancies in secondary schools in January 2013, an increase of 4 from January 2012 (*Table 4*).
The vacancy rate in the secondary sector is 0.3 per cent.

Teacher sickness absence during 2012 (Section 3)

- 60 per cent of teachers took sickness absence during 2012, compared with 59 per cent during 2011 (*Table 7*).
- The average annual number of sick-days per teacher taking sickness absence was 11 days (*Table 7*).
- The total number of sick-days taken by teachers during 2012 was 187,377 – over 25,000 days less than during 2011 (*Table 7*).

Statistician: Stephen Hughes
Next update: June 2014 (provisional)

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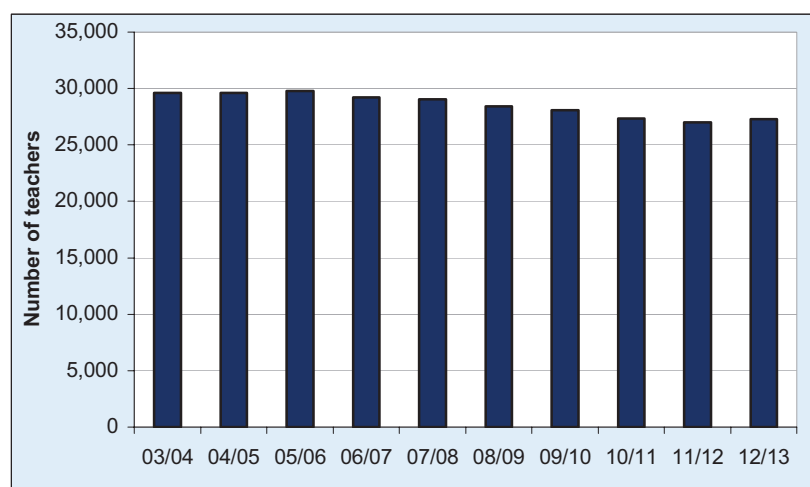
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Section 1: Teachers in Service

The teachers in service data is collected every January by LAs in Wales, and only includes qualified teachers.

Chart 1: Teachers in service with LAs



- 2012/13 has seen the first increase in teacher numbers since 2005/06.
- In the last ten years the largest number of teachers was in 2005/06 with 29,783.

Table 1: Teachers in service with LAs (a)

	2008/09	2009/10	2010/11	2011/12	2012/13 (b)
<i>FTE</i>					
Qualified teachers at:					
LA maintained schools (c):					
Nursery	75	74	73	57	55
Primary	13,090	13,072	12,758	12,736	12,944
Secondary	12,988	12,782	12,526	12,327	12,525
Total	26,153	25,928	25,357	25,120	25,524
Miscellaneous/divided service (d):					
Primary	417	426	343	324	322
Secondary	371	386	310	301	293
Total	788	811	653	625	615
Total	26,941	26,740	26,010	25,745	26,139
LA maintained special schools (c)	738	703	684	692	666
Other qualified teachers providing education other than at school (e)	430	371	361	327	277
Other teachers (f)	85	87	100	66	45
Adult Education Centres (g)	222	184	176	148	183
All teaching staff	28,417	28,084	27,332	26,977	27,310
of which on secondment for one term or more	28	26	26	22	21

(a) At January each year.

(b) Two local authorities were unable to provide supply teacher data.

(c) Includes:

- full-time teachers in regular service including those on secondment;
- full-time equivalent (FTE) of part time teachers in regular service;
- full-time teachers in occasional service including agency staff;

(d) Including peripatetic teachers and advisory teachers.

(e) Under the provisions of the Education Act 1944, Section 56 and the Education Act 1981, Section 3. Includes qualified teachers in pupil referral units.

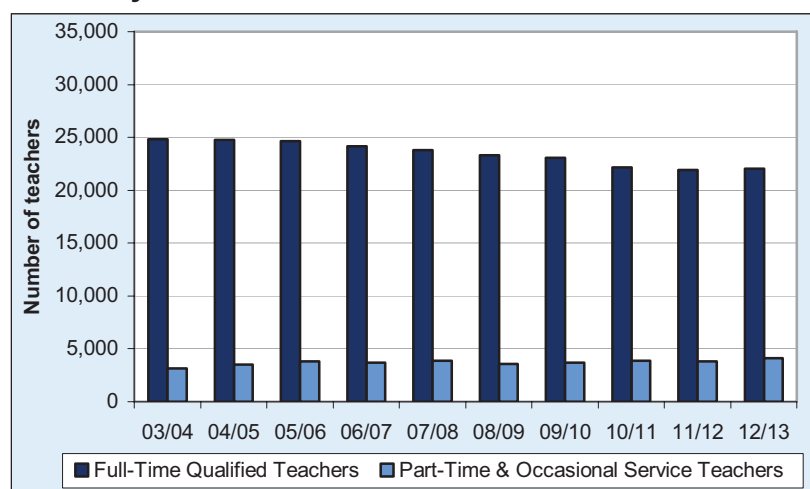
(f) Includes:

- any other full-time teachers in regular service including those on secondment;
- any other FTE of part time teachers in regular service;

(g) Includes:

- full-time teaching staff in regular service including those on secondment;
- FTE of part-time teaching in regular service;
- FTE of hourly paid part time teaching staff;
- FTE of all staff not paid on teaching staff scales but who spend all or part of their time teaching.

Chart 2: Number of full-time, part-time and occasional service teachers at maintained nursery, primary and secondary schools



- The number of full-time qualified teachers has fallen over the last ten years from 24,828 to 22,024.
- The number of part-time and occasional service staff has increased in the last ten years from 3,121 to 4,115.

Table 2: Teachers in service at maintained nursery, primary or secondary schools (a)

	<i>FTE</i>				
	2008/09	2009/10	2010/11	2011/12	2012/13 (b)
Qualified teachers in full-time regular service:					
LA maintained:					
Nursery schools	63	59	60	50	45
Primary schools	10,981	10,993	10,477	10,536	10,649
Secondary schools	11,756	11,446	11,152	10,894	10,948
Miscellaneous/divided service					
Primary	261	276	221	214	188
Secondary	280	288	236	222	194
Total	541	564	457	436	382
Total (c)	23,341	23,062	22,146	21,916	22,024
Part-time (FTE) & Teachers in occasional service: (including supply teachers):					
LA maintained:					
Nursery schools	12	15	13	7	10
Primary schools	2,110	2,079	2,281	2,200	2,295
Secondary schools	1,232	1,337	1,374	1,433	1,577
Miscellaneous/divided service					
Primary	156	149	121	110	134
Secondary	91	98	75	79	99
Total	247	248	196	189	233
Total (c)	3,600	3,678	3,864	3,829	4,115
All teaching staff (FTE):					
LA maintained:					
Nursery schools	75	74	73	57	55
Primary schools	13,090	13,072	12,758	12,736	12,944
Secondary schools	12,988	12,782	12,526	12,327	12,525
Miscellaneous/divided service					
Primary	417	426	343	324	322
Secondary	371	386	310	301	293
Total	788	811	653	625	615
Total (c)	26,941	26,740	26,010	25,745	26,139

(a) At January each year.

(b) Two local authorities were unable to provide supply teacher data.

(c) Includes those on secondment.

Table 3: Teachers in service with LAs at maintained special schools (a)

	FTE				
	2008/09	2009/10	2010/11	2011/12	2012/13
Qualified teachers in full-time regular service:	636	613	596	591	572
Part-time (FTE) & Teachers in occasional service: (including supply)	82	90	88	101	94
All teaching staff (FTE)	738	703	684	692	666

(a) At January each year.

Includes:

- full-time teachers in regular service including those on secondment;
- fte of part-time teachers in regular service;
- full-time teachers in occasional service;

- The last seven years has seen the number of teachers in maintained special schools fluctuate between 611 and 738.
- The 666 teachers in maintained special schools in 2012/13 is the lowest number since 2005/06.

Section 2: Teacher Vacancies

Teacher vacancies include advertised vacancies on 15 January 2013 for full-time permanent appointments or full-time appointments for at least one term's duration.

Further data for individual subjects and attainment levels can be found in Tables 4 to 6.

Key Points

Teacher vacancies in maintained secondary schools (Table 4)

- In 2012/13, the total number of vacancies in secondary schools has increased since last year, and stood at 39 in January 2013.

Teacher vacancies in maintained primary and nursery schools (Table 5)

- In 2012/13, total vacancies in primary and nursery schools fell to 47, down 11 from the previous year.
- All the vacancies in 2012/13 are in primary schools, none in nursery.

Table 4: Teacher vacancies in maintained secondary schools, by subject (a)

	2008/09	2009/10	2010/11	2011/12	2012/13
Mathematics	6	1	1	7	5
Computer Studies/ Information Technology	0	0	1	1	1
Chemistry	3	1	0	1	0
Physics	3	0	0	0	1
Biology	0	1	1	1	1
Other Science (b)	7	1	1	4	1
French	2	1	0	1	0
German	0	0	0	0	0
French/German	0	1	1	0	0
Spanish	0	0	0	0	0
Other languages	0	1	1	0	1
Welsh	6	6	0	1	1
English	4	0	1	4	5
Drama	1	2	1	0	1
History	0	0	0	1	1
Social Studies	0	0	0	0	1
Geography	1	0	1	1	1
Religious Education	2	0	1	2	1
Design and Technology (c)	2	1	1	1	2
Commerce/Business	0	0	1	0	1
Art/Light Craft	0	0	1	0	0
Music	5	2	1	0	0
P.E.	2	3	2	0	0
Special Educational Needs	2	2	1	1	1
Careers	0	0	0	0	0
Other main subjects	0	0	1	1	2
Combined subjects	0	1	0	0	2
Total	46	24	18	27	29
Headteacher vacancies	3	6	7	5	3
Deputy headteacher vacancies	5	3	4	3	7
Total vacancies	54	33	29	35	39
<i>Vacancy rate</i>	<i>0.4</i>	<i>0.3</i>	<i>0.2</i>	<i>0.3</i>	<i>0.3</i>

(a) At January each year.

(b) Including Key Stage 3 and Key Stage 4 Science.

(c) Includes Home Economics/Needlework.

Table 5: Teacher vacancies in maintained nursery and primary schools (a)

	2008/09	2009/10	2010/11	2011/12	2012/13
Nursery schools:					
Headteacher	0	0	0	1	0
Deputy headteacher	0	0	0	0	0
Other	0	1	0	1	0
Primary schools:					
Headteacher	6	16	16	15	11
Deputy headteacher	12	6	13	12	12
Other	25	22	32	29	24
Totals:					
Headteacher	6	16	16	16	11
Deputy headteacher	12	6	13	12	12
Other	25	23	32	30	24
Total vacancies	43	45	61	58	47
<i>Vacancy rate</i>	<i>0.3</i>	<i>0.3</i>	<i>0.5</i>	<i>0.4</i>	<i>0.4</i>

(a) At January each year.

Table 6: Teacher vacancies in maintained special schools (a)

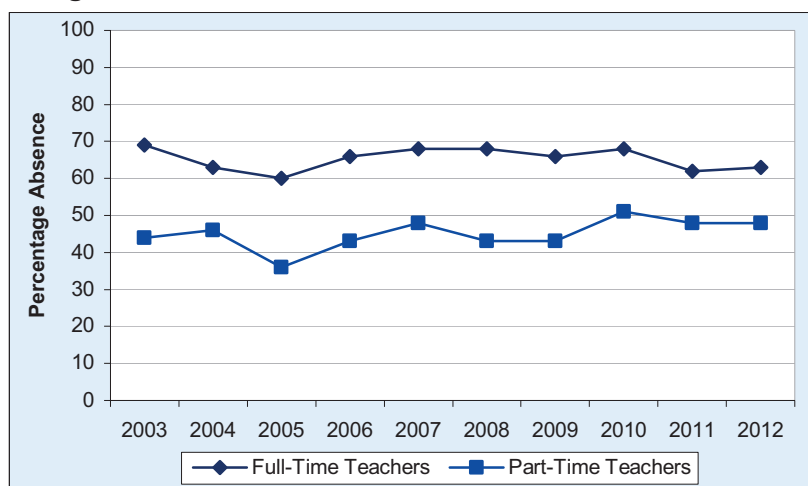
	2008/09	2009/10	2010/11	2011/12	2012/13
Special schools:					
Headteacher	1	0	0	1	0
Deputy headteacher	0	0	0	0	0
Other	4	2	2	1	1
Total	5	2	2	2	1

(a) At January each year.

Section 3: Teacher Sickness Absence

Sickness absence includes that recorded for full-time and part-time teachers, with permanent contracts or contracts of over 1 month (at maintained schools from 1 January to 31 December).

Chart 3: Percentages of full-time and part-time teachers taking sickness absence



- Over the last ten years the percentage of full-time teachers taking a period of sick leave has varied between 60 and 69 per cent.
- Over the last five years the percentage of all teachers taking sickness absence has varied between 59 and 64 per cent.

Table 7: Sickness absence of teachers in maintained schools: 1 January to 31 December (a)

	2008 (c)	2009	2010	2011	2012
Teachers taking a period of sickness absence (b):					
Total teachers:					
Number	18,777	18,230	18,409	16,949	17,204
Percentage	64%	62%	64%	59%	60%
Full-time teachers:					
Number	16,573	15,932	15,647	14,229	14,343
Percentage	68%	66%	68%	62%	63%
Part-time teachers:					
Number	2,204	2,298	2,762	2,720	2,861
Percentage	43%	43%	51%	48%	48%
Average number of days lost due to sickness:					
per teacher taking a period of sick leave	14	13	12	13	11
per teacher (all teachers)	9	8	8	7	7
Average number of days lost due to sickness:					
per full-time teacher taking a period of sick leave	13	13	11	13	11
per teacher (all full-time teachers)	9	8	8	8	7
Average number of days lost due to sickness:					
per part-time teacher taking a period of sick leave	14	15	14	12	11
per teacher (all part-time teachers)	6	6	7	6	5
Sickness absences by duration (in days):					
Full-time teachers:					
5 days or less	68,348	62,140	58,363	50,083	52,020
6 to 20 days	47,965	43,953	29,067	36,635	28,719
more than 20 days	106,694	95,946	91,075	94,032	75,447
Total days sickness absence taken by full-time teachers	223,007	202,038	178,505	180,750	156,186
Part-time teachers:					
5 days or less	8,530	8,186	10,058	8,498	8,731
6 to 20 days	6,388	7,833	6,537	8,409	5,772
more than 20 days	15,984	18,116	23,251	15,660	16,688
Total days sickness absence taken by part-time teachers	30,902	34,136	39,846	32,567	31,191
Total days sickness absence	253,909	236,174	218,350	213,317	187,377

(a) Sickness absence (including unpaid absence) of teachers with permanent contracts or contracts of more than 1 month.

(b) Headcount, not full-time equivalents.

(c) For 2008 one LA was unable to provide part-time absence data.

Key Quality Information

Caution should be used when looking at data on teacher vacancies, as they are only a snapshot of the year, and are taken as at a single day in January each year.

Source of data

STATS3 data collection from LAs

The STATS3 return is completed every January by each LA in Wales and records the number of teachers in service, and vacant posts. The return covers all maintained establishments as well as peripatetic teachers, advisory and miscellaneous teachers and teachers with service divided between schools and those on secondment.

Definitions

Coverage: Data relating to Middle Schools for the 2013 exercise was recorded with Secondary establishments.

Two LAs were unable to provide supply teacher data. In 2010 the two authorities had a combined figure of around 100 supply teachers.

Teachers: The following teachers, employed by LAs, are included in the STATS3 data collection:

- Head teachers and other teachers regardless of whether they had classroom duties on the survey date.
- Teachers on full-time or part-time regular engagements, of one month or more, including those provided by an agency.
- Permanent and temporary supply teachers.
- Teachers on engagements of less than one month (occasional service - including 'claims based' and agency staff) if they were employed for the whole of the survey date.
- Teachers on leave, sick leave or maternity leave who are still being paid by the authority/school. Teachers, whether full-time or part-time, seconded for service *with the authority from outside the authority's area*.
- Full-time teachers in receipt of full salary whilst full-time on training courses of one term or more.
- Teachers in receipt of full salary whilst on a training course of less than one term.
- Teachers seconded by the authority on full pay.

The following are excluded from the STATS3 data collection:

- Teachers seconded for teaching service in a maintained school or establishment outside the authority's area.
- Unqualified teachers employed in nursery schools and classes under Section 4(1)(a) of Schedule 4 of the Education (Teachers) Regulations 1982.
- Nursery assistants.
- Foreign language assistants.
- Students on teaching practice.
- Teachers employed by colleges in the FE sector.

Teacher vacancies: includes advertised vacancies on 15 January 2013 for full-time permanent appointments or full-time appointments for at least one term's duration.

Sickness absence: includes sickness absence recorded for full-time and part-time qualified and unqualified teachers, with permanent contracts or contracts of over 1 month.

Symbols: The following symbols have been used throughout the publication:

- .. not available
- . not applicable

Rounding: In tables where figures have been rounded to the nearest final digit there may be an apparent discrepancy between the sum of the constituent items and the total as shown.

Other countries' releases

Attached is the latest available release for England (includes data on teachers, vacancies and sickness absence), published on 30 April 2013:

[School Workforce in England: November 2012](#)

Scotland publishes some data on teachers as part of a larger publication on schools. Their latest release was published on 11 December 2012:

[Summary Statistics for Schools in Scotland, No.3 2012 Edition](#)

Related data for Wales

The Welsh Government also releases data **from a different source** (the Pupil Level Annual School Census – PLASC) in the form of a Statistical First Release:

[School Census Results, 2012](#) published on 11 July 2012 (2013 data will be published on 11 July 2013)

Since the above release is from a different source, figures may not match, and therefore caution should be taken when making comparisons.

Who are the key users of this data?

These statistics are used within and outside the Welsh Government. Some of the key users are:

- Ministers and the Members Research Service in the National Assembly for Wales;
- The Department for Education in England;
- Other government departments;
- Local authorities;
- Schools;
- Estyn, Her Majesty's Inspectorate of Education and Training in Wales;
- Wales Audit Office;
- The Department for Education and Skills in the Welsh Government;
- Other areas of the Welsh Government;
- The research community;
- Students, academics and universities;
- Individual citizens and private companies.

Comments on the coverage or presentation of this release are welcomed. Contact details are on the front page.

Data on teachers is also available from the School Census and General Teaching Council for Wales.

We would welcome any feedback on these statistics.



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Cynulliad Cenedlaethol Cymru
Bae Caerdydd
Caerdydd CF99 1NA

Dyddiad: 11 Chwefror 2014
Ein cyf: HVT/2076/fgb
Tudalen: 1 o 4

Annwyl Darren

TREFNIADAU CYFLENWI AR GYFER ABSENOLDEB ATHRAWON: YMCHWILIAD Y PWYLLGOR CYFRIFON CYHOEDDUS

Yn dilyn sesiwn ymchwilio'r Pwyllgor ar 21 Ionawr 2013 gyda Chyfarwyddwr Cyffredinol Addysg a Sgiliau Llywodraeth Cymru, dywedais y byddwn yn darparu rhagor o wybodaeth am dri mater a drafodwyd yn ystod y sesiwn:

- p'un a yw'r Ddeddf Diogelu Data yn atal data ar absenoldeb oherwydd salwch mewn ysgolion bach rhag cael eu cyhoeddi;
- annigonolrwydd y cyngor adnoddau dynol y mae ysgolion yn ei gael gan awdurdodau lleol, sy'n golygu bod angen i'r consortia addysg sefydlu eu gwasanaeth cyngor adnoddau dynol eu hunain;
- yr amser arwain cyn y gallai Estyn addasu ei fframwaith arolygu.

(1) P'un a yw'r Ddeddf Diogelu Data yn atal data ar absenoldeb oherwydd salwch mewn ysgolion bach rhag cael eu cyhoeddi

Os caiff data ar absenoldeb oherwydd salwch mewn ysgolion bach eu cyhoeddi, gellid datgelu gwybodaeth am iechyd corfforol neu iechyd meddwl athrawon unigol adnabyddadwy. Am ei bod yn weddol hawdd cael gafael ar wybodaeth am staff ysgol fel arfer, os mai dim ond nifer fach o athrawon sydd mewn ysgol, gall hyd yn oed gwybodaeth gyfunol ddatgelu gwybodaeth am gyflwr iechyd athrawon unigol. Heb ofyniad cyfreithiol penodol i gyhoeddi'r wybodaeth, fel dyletswydd statudol benodol (ac nid dyma'r achos hyd y gwyddom ni), neu gydsyniad, byddai datgeliad o'r fath yn torri'r Ddeddf Diogelu Data.

Mae'n anos dadgyfuno gwybodaeth, drwy ddefnyddio gwybodaeth arall sydd ar gael yn hawdd, wrth i nifer yr athrawon gynyddu. O ganlyniad, mae'r risg o ddatgelu gwybodaeth y gellir ei chysylltu ag athrawon unigol yn lleihau mewn ysgolion mwy o faint. Felly, mae

cyhoeddi data cyfunol ar gyfer ysgolion mawr, clystyrau o ysgolion neu ar lefel awdurdod lleol yn llai tebygol o ddatgelu gwybodaeth am iechyd athrawon unigol adnabyddadwy.

(2) Annigonolrwydd y cyngor adnoddau dynol y mae ysgolion yn ei gael gan awdurdodau lleol, sy'n golygu bod angen i'r consortia addysg sefydlu eu gwasanaeth cyngor adnoddau dynol eu hunain

Roedd y pryderon a nodwyd yn fy adroddiad am y gwasanaethau adnoddau dynol a ddarperir gan awdurdodau yn ymwneud â'r canlynol:

- rheoli absenoldeb oherwydd salwch;
- gwybodaeth sefydlu ar ddarperir ar gyfer athrawon cyflenwi;
- trefniadau i gynnal archwiliadau cyn cyflogi (gan gynnwys y Gwasanaeth Datgelu a Gwahardd);
- sut y caiff Rheoliadau Gweithwyr Asiantaeth 2010 eu cymhwyso mewn ysgolion;
- statws cyflogaeth rhai aelodau o staff cyflenwi;
- ffrindiau neu berthnasau aelodau o staff a gyflogir heb ddilyn y gweithdrefnau dethol cywir.

Dros y blynyddoedd diwethaf, mae awdurdodau lleol wedi tueddu i beidio â darparu cynghorwyr adnoddau dynol adrannol arbenigol (ar gyfer addysg, gwasanaethau cymdeithasol ac ati) gan ddarparu gwasanaeth adnoddau dynol mwy cyffredinol yn lle hynny. Mae rhai awdurdodau yn cyflogi rheolwyr busnes adnoddau dynol pwrpasol ar gyfer ysgolion ond, mewn rhai awdurdodau eraill, mae'n llai tebygol y bydd gan ysgolion swyddog adnoddau dynol enwebedig ac efallai bod yn rhaid iddynt ddefnyddio 'desg gymorth' yn lle hynny.

Ar hyn o bryd, mae'r rhan fwyaf o ysgolion yn prynu cymorth adnoddau dynol gan eu hawdurdod lleol drwy Gytundeb Lefel Gwasanaeth. Mae'r cytundeb yn nodi natur a swm y cymorth adnoddau dynol a ddarperir ond, mewn rhai achosion, efallai nad yw'n ddigonol i ddarparu'r cymorth sydd ei angen.

Er na nodwyd unrhyw bryderon penodol ynglŷn â'r gwasanaethau adnoddau dynol cyffredinol a ddarperir gan awdurdodau lleol i ysgolion, dywedodd sawl pennaeth nad oeddent wedi cael cymorth digonol i ddelio â salwch hirdymor a phresenoldeb gwael. Fodd bynnag, cafwyd sylwadau ffafriol gan rai penaethiaid eraill ar y cymorth roeddent wedi'i gael gan adnoddau dynol a gwnaethom nodi rhai enghreifftiau da o gydweithio effeithiol rhwng gwasanaethau adnoddau dynol awdurdodau lleol ac ysgolion, er enghraifft, yng Nghasnewydd.

Codwyd pryderon am ddigonolrwydd cymorth adnoddau dynol i ysgolion yn adroddiad Robert Hill hefyd, sef *Darparu Gwasanaethau Addysg yng Nghymru yn y Dyfodol*¹.

¹ <http://wales.gov.uk/docs/dcells/consultation/130618-delivery-of-education-report-cy.pdf>

Argymhellodd yr adroddiad y dylai fod gan y consortia addysg swyddogaeth adnoddau dynol graidd a fyddai'n arbenigo mewn materion yn ymwneud â chysylltiadau â chyflogeion mewn ysgolion, ac y dylai fod gan glystyrau o ysgolion gynghorwyr adnoddau dynol i gefnogi a goruchwyllo gweithrediad y system arfarnu perfformiad athrawon. Byddai'r cynghorwyr hyn yn helpu penaethiaid a llywodraethwyr i ddelio â chwynion a materion yn ymwneud â disgyblu a gallu. Yn hytrach nag argymhell gwasanaeth adnoddau dynol arbenigol, credwn fod yr argymhelliad hwn yn cydnabod bod angen i ysgolion gael mwy o gyngor ar adnoddau dynol yn gyffredinol er mwyn gweithredu'r system arfarnu gymharol newydd, a fydd yn ehangu i gynnwys staff eraill mewn ysgolion gydag amser.

(3) Yr amser arwain cyn y gallai Estyn addasu ei fframwaith arolygu

Nid yw'r fframwaith arolygu presennol ar gyfer ysgolion yn datgan na roddir ystyriaeth i drefniadau cyflenwi ond nid yw'n cyfeirio'n benodol atynt. Felly, er mwyn sicrhau bod trefniadau cyflenwi ac absenoldeb staff yn cael eu hystyried yn fwy penodol, ni fyddai angen i Estyn newid ei fframwaith arolygu; dim ond diwygio'r arweiniad.

Ar hyn o bryd, gall materion o ran absenoldeb a threfniadau cyflenwi ddod i'r amlwg yn ystod sawl elfen o arolygiad. Yn benodol, o ran 'rheoli staff ac adnoddau', mae'r arweiniad ar arolygu ysgolion uwchradd yn datgan:

Dylai arolygwyr farnu pa mor effeithlon ac effeithiol y mae arweinwyr a rheolwyr yn cynllunio ac yn cynnal strategaethau i reoli staff ac adnoddau. Gallai arolygwyr ystyried a oes unrhyw nodweddion rheoli clir sy'n cyfrannu at reoli adnoddau yn effeithlon neu'n amharu arno.

Dylent ystyried pa mor dda y mae arweinwyr a rheolwyr:

- *yn sicrhau bod yr ysgol wedi'i staffio'n briodol i addysgu'r cwricwlwm yn effeithiol;*
- *yn defnyddio staff addysgu a chymorth i wneud y defnydd gorau o'u hamser, eu harbenigedd a'u profiad;*
- *yn nodi ac yn diwallu anghenion datblygu pob un o'r staff addysgu a chymorth trwy systemau gwerthuso a rheoli perfformiad;*
- *yn gwneud defnydd effeithiol o amser cynllunio, paratoi ac asesu athrawon;*
- *yn defnyddio strategaethau a phrosesau priodol i fodloni gofynion statudol y Cytundeb Cenedlaethol ar 'Godi Safonau a Mynd i'r Afael â Baich Gwaith' (Ionawr 2003);*
- *yn rheoli ac yn defnyddio cynorthwywyr addysgu a staff nad ydynt yn addysgu;*
- *yn darparu'r safonau gorau posibl o adeiladau o fewn cyllideb yr ysgol;*
- *yn sicrhau bod gan ddisgyblion ddigon o adnoddau dysgu priodol.*

Mae Estyn a Llywodraeth Cymru wedi cytuno'n fras y bydd Estyn yn cynnal adolygiad thematig, yn 2015-16 o bosibl, o b'un a yw'r trefniadau cyflenwi ar gyfer absenoldeb athrawon wedi gwella yn erbyn y meincnod a nodwyd yn adroddiad Estyn ar 'Effaith Absenoldeb Athrawon', a gyhoeddwyd ar yr un diwrnod â'm hadroddiad. Er nad yw Estyn yn bwriadu newid ei fframwaith arolygu ysgolion, os bydd yr adroddiad thematig dilynol yn dangos bod problemau'n parhau, byddai Estyn yn cynnwys absenoldeb athrawon yn y fframwaith arolygu awdurdodau lleol newydd. Nid yw absenoldeb athrawon yn rhan o gylch gwaith y consortia rhanbarthol.

Gobeithio y bydd y wybodaeth ychwanegol hon yn ddefnyddiol i'r Pwyllgor wrth iddo barhau â'i ymchwiliad.

Yn gywir



HUW VAUGHAN THOMAS
ARCHWILYDD CYFFREDINOL CYMRU

Yr Adran Iechyd a Gwasanaethau Cymdeithasol
Cyfarwyddwr Cyffredinol • Prif Weithredwr, GIG Cymru

Department for Health and Social Services
Director General • Chief Executive, NHS Wales



Llywodraeth Cymru
Welsh Government

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Our Ref: DS/KH
06 February 2014

Dear Darren

PAC meeting on Health Finances – 5th November

The committee requested some further information subsequent to my attendance at the above meeting. We have been asked to base this on the Month 9 (end of December) position in relation to NHS financial reporting. I am pleased to respond.

1. The impact of the additional funding allocation

The budget allocation was announced on 15th October. The extra allocation provided further funding of £150.03m. However it should be noted that the extra funding included £16.43m to cover the anticipated costs of new Immunisation programmes, Kalydeco drug funding (for the treatment of patients with cystic fibrosis and the G551D mutation in the CFTR gene) and Voluntary Early Retirement (VER) packages. These were costs which were not included in the Health Boards reported positions at that time and therefore not reflected in their forecasts. The positive impact on the Health Board forecasts would therefore have been £133.60m.

We have indeed seen a generally commensurate reduction in year end forecast in the period since the allocation was confirmed to NHS bodies. It is however important to note that the position is complex and Health Boards have made and will continue to make adjustments to their forecast based on a wide range of factors which affect their ongoing expenditure and savings programmes.

2. Prospects to the year end

As you would expect, Welsh Government is working very closely with all NHS organisations to ensure an acceptable year end position. This involves interactions with Chairs, Chief

Executives and Directors of Finance. I have also established a National Finance Group to ensure we are identifying and constantly adopting best practice and pursuing all national opportunities to improve the financial outturn this year.


We have also taken action to review expenditure in the various programme budgets held centrally within Welsh Government. With particular regard to NHS organisations, our expectation is that some will deliver a small surplus. Others are taking action to drive forward toward a breakeven position. There are a small number of Boards with more significant risks. We are working particularly closely with these organisations to ensure appropriate responsive action is taken.

In overall terms we see the month 10 position as being particularly critical and we would be pleased to provide the Committee with a further update on 17 February when that information is available.

In conclusion I trust this letter conveys the complexity of the position. We are taking action and, I believe, making important progress in enabling an appropriate financial outcome for Health in 2013/14

Finally I must apologise for the delay in sending this letter. The position is fast changing and we were keen to offer the most up to date analysis.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissling'. The signature is written in a cursive style with a large initial 'D' and a long, sweeping tail.

David Sissling



Mr Darren Millar AM
Chair
Public Accounts Committee
National Assembly for Wales
Cardiff Bay
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Our Ref: DS/KH
06 February 2014

Dear Darren

Follow up information – 5th November PAC meeting on Health Finances

I am writing in response to the request from the Committee for additional information on the postponement of elective activity during the winter period.

Elective postponements

The table below shows the number of short notice postponements at an all Wales level since April 2012. These postponements follow decisions based on clinical priorities and the requirement to use capacity to meet the needs of the most urgent or ill patients.

	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
2012/13	255	272	262	297	157	109	234	264	300	1123	583	902
2013/14	1219	312	195	415	235	341	262	390	245			

The information for December 2013 is currently un-validated. Validated December data will be available on 7 February and is expected to confirm a lower number of postponements in December 2013 in comparison with the same period of 2012.

As you know, Health Boards and Trusts strengthened their planning processes for this winter. This work started some months ago and paid attention to a wide range of areas including:

- Capacity – with up to 490 additional beds (or equivalents) in the plans

- Enhanced staffing and working arrangements
- Reducing delays in discharge - with enhanced partnership working between the NHS and Social Services Departments
- Improved monitoring and intervention arrangements.

Implementation of the plans has been carried out in an efficient manner. They appear to have a beneficial impact with improvement in many key indicators, including the level of postponements of elective activity when comparisons are made to last year. As you would expect, the Welsh Government is working closely with all NHS organisations and monitoring progress on a daily/weekly basis.

Yours sincerely

A handwritten signature in black ink that reads "David Sissling". The signature is written in a cursive style with a large initial 'D' and a long, sweeping tail on the 'g'.

David Sissling



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Our Ref: DS/MS/KH

12 February 2014

Dear Darren

PAC meeting on Health Finances – 5th November

I refer to my letter of 6th February regarding the above. I am now in a position to provide the Committee with some further information.

I set out below the figures for month 09 together with the latest draft figures for month 10. (Please note the month 10 figures are due to be formally confirmed by Boards and Trusts on 14th February so they are provided on a draft basis at present)

Organisation	Forecast Surplus/Deficit Month 09	Draft Position Month 10
	£000's	£000's
Abertawe Bro Morgannwg	-6,000	-3,000
Anuerin Bevan	-5,601	-5,100
Betsi Cadwaladr	-13,000	-7,500
Cardiff & Vale	-16,320	-19,320
Cwm Taf	-5,200	-4,500
Hywel Dda	-17,109	-18,109
Powys	-19,494	-19,410
Public Health Wales	0	0
Velindre	0	0
Welsh Ambulance	0	0
NHS Wales	-82,724	-76,939

The table above demonstrates an improvement in the forecast position. We are expecting further positive movement in the period between month 10 and the year end. Welsh Government will continue to work closely with Boards to ensure this occurs.

In the context of the level of risk we have been managing the centrally held budgets on a very robust basis. We have as a consequence created some additional resources that can be used to further help meet the pressures in the NHS. The Committee will now also be aware of the plans to allocate an additional £50m to the Health and Social Services MEG through the supplementary budget.

Taking account of all the developments and actions outlined above there is increasing confidence in the delivery of a balanced year end position.

Finally I must, again, apologise to the Committee for the delay in providing this information.

I trust the further information provided is of assistance.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissling'. The signature is written in a cursive style with a large initial 'D' and a long, sweeping underline.

David Sissling

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Our Ref: DS/KH
11 February 2014

Dear Darren

Public Accounts Committee – Unscheduled Care

Thank you for your letter of 21 January in which the committee requested some further information. I am happy to respond.

1) An update on the recent changes made to GP contracts and the impact on access to unscheduled care

Agreement has been reached with GPC Wales on changes to the GMS Contract for 2014/15.

The contract places greater reliance on the professionalism of GPs to use their clinical judgement through the removal of 300 Quality and Outcome Framework (QOF) points. These changes reduce unnecessary patient testing, reduce the frequency of patient recall and enable GPs to spend more time caring for the most vulnerable patients with complex care needs, in particular, the frail elderly. This will help to avoid unnecessary hospital admissions for this group.

The delivery of local health care will be improved through the introduction of a new Local Service Development domain. GP practices will be required to improve the coordination of care, enhance the integration of health and social care and develop collaborative working with local communities and networks.

The Local Service Development domain also requires GP practices to participate in three national care pathways:

- Minimising the harms of poly pharmacy
- Improving end of life care
- Understanding Cancer care pathways

Of the three pathways, 'Minimising the harms to poly pharmacy' has a direct link to unscheduled care. It is estimated up to 6.5% of hospital admissions relate to this issue. GPs will be required to undertake an in depth medication review for all patients aged 85 years and over receiving 6 or more medications. This work will inform the development of the strategy for medication reviews.

'Understanding cancer care pathways' will engage GPs in understanding patient experience. The pathway aims to identify practical steps to improve early diagnosis and timely management. By analysing each new case of lung and gastrointestinal cancer, GPs will identify themes (for example, late presentation, delayed access to diagnostics, late referral) in patient experience which in turn will highlight areas to focus activity. Whilst not directly impacting unscheduled care, improvements in early diagnosis and timely management of this condition will support more patients with cancer through Primary and planned care.

A further element of the Local Service Development domain requires GPs to undertake a review of the provision of services within their practice and agree shared local objectives with the GP cluster. This review of services will build on the Quality and Outcome Framework in relation to the analysis of referrals, accident and emergency attendances, emergency admissions to hospitals and patient risk profiling.

2) Details of the action being taken by Welsh Government to promote immunisation outside of epidemics

The Welsh Government works with Public Health Wales and Health Boards to identify barriers to uptake of vaccinations, to improve the delivery of vaccination programmes and support Health Boards in their efforts to improve vaccination rates.

Vaccination programmes are monitored by the Wales Immunisation Group which comprises representatives from Welsh Government, Public Health Wales, Directors of Public Health, Health Board Immunisation Co-ordinators and primary care. The Group meets quarterly.

The NHS Delivery Framework includes as Tier 1 measures:

- 95% of children are fully immunised by the age of four years;
- 75% of people in at risk groups are vaccinated against seasonal flu, along with 50% of NHS staff with direct patient contact.

All health boards have submitted plans to the Chief Medical Officer for meeting the Tier 1 requirements. Routine monitoring is conducted through the NHS Delivery Framework processes and appropriate escalation mechanisms are activated as required.

This year, Public Health Wales (PHW) has accepted a 'systems leadership' role for the seasonal flu campaign and is working with health boards to support and deliver agreed activities to drive up the seasonal flu vaccination rates. Responsibility for flu communication activity in Wales has also been delegated to PHW. This has seen the introduction of the Flu Fighters campaign aimed at promoting uptake among front line NHS staff.

Welsh Government policy circular (2005)81 requires the follow up of children who have missed one or more doses of MMR at entry to primary school, secondary school and when the teenage booster vaccine is offered. This provides at least three further routine opportunities for children who have missed a routine dose of MMR to be offered a 'catch up' vaccination.

The Chief Medical Officer and Public Health Wales recommend that health professionals use every type of encounter with adolescents or young adults as an opportunity to check full immunisation status.

The Chief Medical Officer has asked Health Board Chief Executives to check the MMR status of their staff and instigate wider checks on staff immunisation against all infectious diseases as provided for in the UK. Public Health Wales is supporting health boards by producing good-practice guidance for new and existing staff.

The "Child Health Immunisation Process Standards - CHIPS" was produced by Public Health Wales in 2011 and provides national minimum standards for childhood immunisation and data. This supports improved information handling and accuracy in recording immunisations within existing systems.

A range of materials is available to the public and health professionals to help promote awareness of immunisations.

3) An outline of the work being undertaken by Welsh Government to educate the public on the alternative options available for treatment as opposed to attending A&E

The Choose Well campaign is a long term initiative to educate the public on how to access the right level of care to meet their needs when they have an illness or injury. The Campaign is supported by a free smartphone app and highlights the range of Health Services available. The app explains what each NHS service does and when they should be used. The app also features contact information, opening hours and directions to health services.

In addition to Choose Well, the Keep Well This Winter campaign run by Age Cymru is promoted by NHS Direct Wales. The campaign is specifically directed at keeping older people healthy at home. Both the Choose Well Wales campaign and NHS Direct Wales emphasise the importance of using alternatives to hospital visits where appropriate.

The Welsh Government established the Choose Pharmacy service in pathfinder sites in Cwm Taf and Betsi Cadwaladr Health Boards in October 2013. Choose Pharmacy will involve approved pharmacists offering confidential NHS consultations and where appropriate, providing treatment to patients who would otherwise present at other NHS services.

4) Details of any work being undertaken to move towards greater co-location of GP out of hours services and A&E departments and whether consideration has been given to ensuring consistency of provision across Wales (with the exception of Powys)

Local health boards have developed a number of service models for GP out of hours services designed to meet their local population needs.

Abertawe Bro Morgannwg University Health Board (ABMU) has a co-located GP Out of Hours (OoH) service with either an A&E Department or Minor Injuries Unit (MIU) in all four of their main hospitals.

Aneurin Bevan Health Board (AB) has three GP OoH services, two of which are co-located with an A&E Department or MIU (Nevill Hall Hospital and Ysbyty Ystrad Fawr). The third OoH Service is not co-located at the Royal Gwent Hospital but is proximal – being located at the nearby St Woolos Hospital.

In Betsi Cadwaladr University Health Board (BCUHB) two of three sites (Bangor and Wrexham) have GP OoH and A&E co-located. The Glan Clwyd site has units separated across the entrance road to the main hospital (approximately 100 metres distance). However, unlike Bangor and Wrexham, Glan Clwyd has GP presence knitted into the team within A&E at peak times. There is also co-location of GP OoH services with the Llandudno MIU.

Cardiff and Vale University Health Board (CVUHB) has one of their three OoH services co-located with A&E at the University Hospital of Wales.

Cwm Taf Health Board (CTHB) has four operational OoH services (two at community hospitals and two at the District General Hospitals). The OoH service at Prince Charles Hospital is co-located with the MIU section of A&E. The OoH service at Royal Glamorgan Hospital is located in the Diabetic centre which is a short walk from the A&E Department.

Hywel Dda Health Board (HDHB) has co-located OoH services within the Local Emergency Department at Prince Philip Hospital.

The above indicates the significant extent to which GP Out of Hours services are co-located. There are however variations in the detailed models of care. Welsh Government officials are reviewing relevant information including the evidence of positive impact. We will

direct the outcomes of this work to the Unscheduled Care Programme Steering Board to ensure appropriate consistency.

5) Details of any work being undertaken by Welsh Government to share good practice between Health Boards on managing Unscheduled Care

The Welsh Government holds quarterly Seasonal Planning Group meetings, attended by senior representatives of Local Health Boards, WAST and Local Authorities. The Group works to improve planning arrangements and share good practice by working in co-operation with key partners. It also provides assurance to the Welsh Government that NHS Wales are operationally ready and resilient to deliver services throughout periods of high demand such as winter.

As part of the Seasonal Planning work, the Welsh Government organised a Winter Planning Forum which was held in Cardiff on 10 September 2013. LHBs, Social Care and WAST representatives presented their joint-plans for the forthcoming winter period. The event provided an opportunity for engagement, constructive peer review and sharing of best practice.

Following the Seasonal Planning Group meeting on 9 December, the Welsh Government identified and shared relevant good practice with Local Health Boards, WAST and Local Authorities.

The Welsh Government hold senior level weekly winter planning calls with the Health Boards and WAST. These calls enable the sharing of good practice and have increased engagement between services.

Dr Grant Robinson was appointed as Unscheduled Care Clinical lead in September 2013. Dr Robinson has been working with leaders from health and social care to secure improvement across pathways of unscheduled care and to ensure best practice is shared.

A National Patient Flow Collaborative has been established by the 1000 lives improvement team. Health Boards have created project teams to drive forward improvements in patient flow. Specialist staff training is underway. A collaborative learning event, held in December 2013, was attended by around 80 staff. Each Health Board will be attending an Executive Team masterclass and on site workshops before the end of March 2014.

6) Details of any work to address the requirement that care homes must transfer service users to an emergency department following a fall – even if this may not be clinically appropriate.

It is not national policy to require care homes to transfer residents to a hospital emergency department following a fall regardless of their clinical needs. Care and Social Services Inspectorate Wales (CSSIW) guidance makes it clear that a hospital admission is only one

outcome of a fall and only when certain criteria have been met. Decisions following a fall are taken on the basis of the individuals clinical and personal circumstances.

7) Details of any action being taken to review patient medication on admission to A&E to determine the extent of medication related complications and their impact on unscheduled care

Adverse medication-related events have been reported to account for up to 6.5% of hospital admissions in England. Limited work has been undertaken in Wales to verify the number of medicine-related admissions. However, data collected as part of a study at Wrexham Maelor Hospital since April 2006 reflects a similar percentage.

Data from the Wrexham Maelor study was presented at an all Wales clinical leadership and engagement showcase conference in 2013, a North Wales Medicines Research Symposium in July 2013 and at the All Wales Prescribing Advisory Group (AWPAG) meeting in December 2013. AWPAG have established a working group to take the work forward.

Thematic analysis of the data collected in the Wrexham Maelor study has revealed that:

- A wide range of medicines are involved in medicine-related admissions
- The medicine-related admissions identified have involved dispensing, prescribing, medicine monitoring and IT system errors as contributory factors.
- Increased patient susceptibility during acute illness e.g. acute kidney injury has also been identified as contributing to medicine related admissions.

8) An update on the timescales for implementing a revised suite of performance indicators for Unscheduled Care

New unscheduled care performance measures will be piloted from April 2014. The pilot will be reviewed after three months.

9) An update on the timescales for the implementation of the 111 service

In my letter of 14th January, I provided you with a provisional timeline for the development of a 111 service. This has been agreed by the 111/OOH work-stream of the Improving Unscheduled Care Steering Board but remains subject to the agreement of the Board, which is meeting on 19th February 2014.

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Sissley'. The signature is written in a cursive style with a large initial 'D'.