

Agenda – Y Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon

Lleoliad:	I gael rhagor o wybodaeth cysylltwch a:
Fideo Gynadledda drwy Zoom	Sarah Beasley
Dyddiad: Dydd Mercher, 25 Tachwedd 2020	Clerc y Pwyllgor 0300 200 6565
Amser: 09.00	Seneddlechyd@senedd.cymru

Yn unol â Rheol Sefydlog 34.19, mae'r Cadeirydd wedi penderfynu gwahardd y cyhoedd o gyfarfod y Pwyllgor at ddibenion diogelu iechyd y cyhoedd. Bydd y cyfarfod hwn yn cael ei ddarlledu'n fyw ar www.senedd.tv.

Rhag-gyfarfod anffurfiol (09.00–09.30)

- 1 Cyflwyniad, ymddiheuriadau, dirprwyon a datgan buddiannau**
(09.30)
- 2 COVID–19: Sesiwn dystiolaeth gyda'r Gweinidog Iechyd a Gwasanaethau Cymdeithasol a Chyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol a Phrif Weithredwr GIG Cymru.**
(09.30 – 10.45) (Tudalennau 1 – 37)
Vaughan Gething AS, Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Dr Andrew Goodall, Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau
Cymdeithasol a Phrif Weithredwr GIG Cymru.

Briff ymchwil

Egwyl (10.45–11.00)

- 3 COVID–19: Sesiwn dystiolaeth gyda'r Gweinidog Iechyd a Gwasanaethau Cymdeithasol a Chyfarwyddwr Cyffredinol Iechyd a**



Gwasanaethau Cymdeithasol a Phrif Weithredwr GIG Cymru (parhad)

(11.00–11.45)

Vaughan Gething AS, Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Dr Andrew Goodall, Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau
Cymdeithasol a Phrif Weithredwr GIG Cymru

4 Papurau i'w nodi

4.1 Llythyr gan y Cadeirydd at Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru ynghylch data am achosion o haunanladdiad neu achosion o geisio cyflawni hunanladdiad

(Tudalen 38)

4.2 Ymateb gan Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru ynghylch data am achosion o hunanladdiad neu achosion o geisio cyflawni hunanladdiad

(Tudalennau 39 – 41)

5 Cynnig o dan Reol Sefydlog 17.42 (ix) i benderfynu gwahardd y cyhoedd o weddill y cyfarfod

(11.45)

6 COVID-19: Trafod y dystiolaeth

(11.45–12.00)

7 Y Grŵp Rhyngweinidogol ar Dalu am Ofal Cymdeithasol: Briffio technegol

(12.00–12.30)

Matthew Jenkins, Dirprwy Gyfarwyddwr yr Is-adran Partneriaethau a
Chydweithredu – Llywodraeth Cymru

Anna Adams, Dirprwy Gyfarwyddwr, Pennaeth yr Is-adran Drethi Polisi,
Strategaeth ac Ymgysylltu – Llywodraeth Cymru

Eitem 2

Mae cyfyngiadau ar y ddogfen hon

Senedd Cymru
Item 4.1
Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon

Welsh Parliament

Health, Social Care and Sport Committee

Estelle Hitchon

Cyfarwyddwr Partneriaethau ac Ymgysylltu
Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru

5 Tachwedd 2020

Annwyl Estelle

Byddwch yn ymwybodol bod y Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon yn cynnal ymchwiliad i **effaith COVID-19, a'r modd y mae'n cael ei reoli, ar iechyd a gofal cymdeithasol yng Nghymru.**

Fel rhan o'r ymchwiliad, mae'r Pwyllgor wedi clywed tystiolaeth lafar yn ddiweddar ynglŷn ag effaith COVID-19 ar iechyd meddwl pobl Cymru a'r gwasanaethau cymorth sydd ar waith.

Yng nghyfarfod y Pwyllgor ddoe, cytunodd yr Aelodau y dylwn ysgrifennu atoch i ofyn am unrhyw ddata sydd gennych sy'n nodi a fu cynnydd yn nifer y digwyddiadau y bu'n rhaid i Ymddiriedolaeth GIG Gwasanaethau Ambiwllans Cymru fynd iddynt lle mae amheuaeth o hunanladdiad neu ymgais i gyflawni hunanladdiad.

Mae'r pandemig yn sicr yn cael effaith niweidiol ar iechyd meddwl pobl Cymru, a byddwn yn ddiolchgar pe gallech rannu'r wybodaeth hon â'r Pwyllgor i'n cynorthwyo yn ein hymchwiliad.

Edrychaf ymlaen at eich ymateb.

Yn gywir



Dr Dai Lloyd AS

Cadeirydd y Pwyllgor Iechyd, Gofal Cymdeithasol a Chwaraeon



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Welsh Ambulance Services NHS Trust

Evidence to Health, Social Care and Sport Committee inquiry into the impact of the Covid-19 outbreak, and its management, on health and social care in Wales

Introduction

1. The Health, Social Care and Sport Committee is conducting an inquiry into the impact of the Covid 19 outbreak on health and social care in Wales. The Committee has heard evidence of the impact of Covid 19 on mental health, and the Chair wrote to the Welsh Ambulance Services NHS Trust (the Trust) on 5 November requesting any data we have which:

[...] indicates whether there has been an increase in incidents attended by the Welsh Ambulance Services NHS Trust where suicide or attempted suicide is suspected

2. The Trust welcomes the Committee's inquiry and the request for these data.

Background

3. The Trust provides the emergency ambulance service for Wales, the NHS Direct Wales service, the 111 service and the non-emergency patient transport service (NEPTS). We will confine our responses to the emergency ambulance (999) service.
4. The Trust responds to more than 1800 emergency calls a day across the country, and every year we take 679,000 calls for more than 450,000 incidents in our three Clinical Contact Centres (CCC) in Wales.
5. When a call comes into a CCC, it is entered on to our computerised priority dispatch system, which seeks to quickly to assign a level of priority to the call e.g. red, amber, green and to identify the priority symptom the person is experiencing e.g. stroke, chest pain. There are 37 symptom categories in our priority dispatch system.
6. The two key symptom categories for mental health calls are Protocol 23 (Overdose/Poisoning) and Protocol 25 (Psychiatric/Suicide Attempt). Mental health calls can also be sorted into other symptom categories. For example, a panic attack could be categorised into breathing problems.

Overall mental health demand

7. In the year 2019, the Trust categorised circa 6% of its demand (27,584 calls) into the two principal mental health categories, Protocols 23 and 25. However, research suggests that circa 10% of ambulance service demand is related to mental health conditions.¹
8. All 999 service providers have mental health demand to a greater or lesser degree. A recent report commissioned by Welsh Government found that the ambulance service had the highest volumes of mental health calls when compared to other 999 providers

¹ Duncan, E.A.S., Best, C., Dougall, N. et al. Epidemiology of emergency ambulance service calls related to mental health problems and self-harm: a national record linkage study. *Scand J Trauma Resusc Emerg Med* 27, 34 (2019). <https://doi.org/10.1186/s13049-019-0611-9>

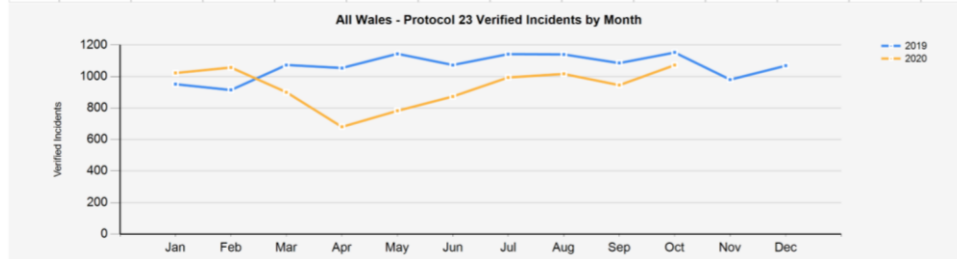
e.g. police forces.² Additionally, the ambulance service took higher acuity calls than other services, with most calls focused on suicide, self-harm or overdose.

Mental health demand during the pandemic

9. The total 999 demand across all conditions has, to date, been about 7% lower in 2020 when compared with 2019 (January to October only). A number of hypotheses exist about why this is the case, including people staying at home during 'lockdown' periods, fewer road accidents with reduced traffic and people avoiding use of the ambulance service to ensure resource availability during the pandemic.
10. Our data show that our Protocol 23 (Overdose/Poisoning) demand was 14% higher in January and February 2020 than the previous year but has subsequently been lower in every month of 2020 when compared to 2019.

All Wales - Protocol 23

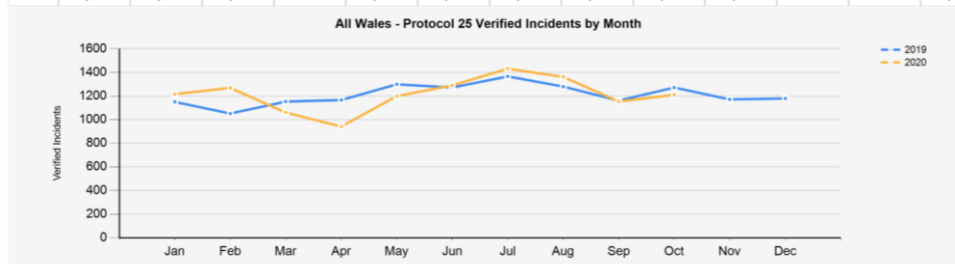
Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	951	914	1,073	1,054	1,144	1,073	1,142	1,140	1,085	1,152	980	1,068	12,776
2020	1,022	1,057	900	680	782	873	994	1,016	945	1,072			9,341



11. Our data show that our Protocol 25 (Psychiatric/Suicide Attempt) demand was also higher in January and February 2020 than the previous year (by 13%). This demand was also circa 6% higher in July-August 2020 when compared with 2019. Protocol 25 demand was lower in the period March-May 2020.

All Wales - Protocol 25

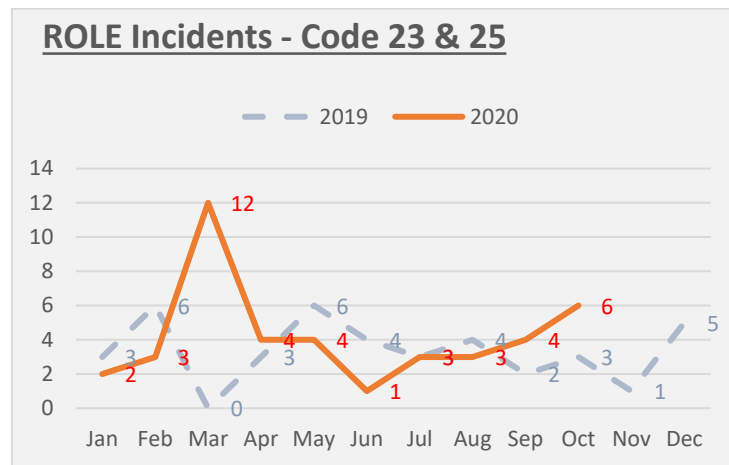
Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	1,150	1,052	1,153	1,166	1,299	1,272	1,366	1,280	1,161	1,272	1,171	1,179	14,521
2020	1,216	1,269	1,060	942	1,199	1,290	1,431	1,362	1,154	1,210			12,133



12. There is considerable regional variation within these data. For example, Protocol 25 (Psychiatric/Suicide Attempt) demand has been consistently and considerably higher across the Aneurin Bevan Health Board area in 2020 when compared with 2019, whereas Swansea Bay Health Board area has similar levels of demand across both years in this protocol.
13. Ambulance staff have been able to confirm deaths without a doctor present for some years now. This process is referred to as Recognition of Life Extinct (ROLE). We have

² NCCU Beyond the Call – a national review of access to emergency services for those experiencing mental health and/or welfare concerns (2020)

examined our ROLE data for Protocols 23 (Overdose) and 25 (Psychiatric) calls over the last two years. We have seen a spike in deaths associated with mental health calls in March 2020 and another increase in September/October 2020, when compared with 2019.



14. We must take great caution in interpreting these data, as numbers are small and the medical cause of death ultimately has to be determined at an inquest.
15. In summary, the Welsh Ambulance Services NHS Trust has seen some significant increases in mental health demand during 2020, but these increases have varied according to protocol, month and health board area.