HYSBYSIAD YNGHYLCH GWELLIANNAU
NOTICE OF AMENDMENTS

Cyflwynwyd ar 17 Ionawr 2020
Tabled on 17 January 2020

Bil Iechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru)
Health and Social Care (Quality and Engagement) (Wales) Bill

Helen Mary Jones

Section 2, page 2, after line 4, insert—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—
(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.

Adran 2, tudalen 2, ar ôl llinell 4, mewnodoser—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—
(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.
Helen Mary Jones

Section 2, page 2, after line 9, insert—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Adran 2, tudalen 2, ar ôl llinell 9, mewnosoder—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Helen Mary Jones

Section 2, page 2, after line 9, insert—

‘( ) complying with the staffing duty, and’.

Adran 2, tudalen 2, ar ôl llinell 9, mewnosoder—

‘( ) complying with the staffing duty, and’.

Helen Mary Jones

Section 2, page 2, after line 9, insert—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Adran 2, tudalen 2, ar ôl llinell 9, mewnosoder—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Helen Mary Jones

Section 2, page 2, after line 11, insert—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.

Adran 2, tudalen 2, ar ôl llinell 9, mewnosoder—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.
“staffing duty” means the duty of the Welsh Ministers to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,
(b) the provision of safe and high-quality health services, and
(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Adran 2, tudalen 2, ar ôl llinell 11, mewnosoder—

“staffing duty” means the duty of the Welsh Ministers to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,
(b) the provision of safe and high-quality health services, and
(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Helen Mary Jones

Section 2, page 2, after line 23, insert—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.

Adran 2, tudalen 2, ar ôl llinell 23, mewnosoder—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.

Helen Mary Jones

Section 2, page 2, after line 28, insert—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Adran 2, tudalen 2, ar ôl llinell 28, mewnodoser—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Helen Mary Jones

Section 2, page 2, after line 28, insert—

‘( ) complying with the staffing duty, and’.

Adran 2, tudalen 2, ar ôl llinell 28, mewnodoser—

‘( ) complying with the staffing duty, and’.

Helen Mary Jones

Section 2, page 2, after line 28, insert—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Adran 2, tudalen 2, ar ôl llinell 28, mewnodoser—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Helen Mary Jones

Section 2, page 2, after line 28, insert—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.

Adran 2, tudalen 2, ar ôl llinell 28, mewnodoser—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.
Helen Mary Jones
Section 2, page 2, after line 30, insert—

“staffing duty” means the duty of Local Health Boards to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,

(b) the provision of safe and high-quality health services, and

(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Helen Mary Jones
Section 2, page 3, after line 1, insert—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,

(b) the local context in which it is being provided,

(c) the number of individuals being provided it,

(d) the needs of individuals being provided it, and

(e) appropriate clinical advice.’.

Adran 2, tudalen 2, ar ól llinell 30, mewnogoder—

“staffing duty” means the duty of Local Health Boards to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,

(b) the provision of safe and high-quality health services, and

(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Adran 2, tudalen 3, ar ól llinell 1, mewnogoder—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.

Helen Mary Jones

Section 2, page 3, after line 6, insert—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Adran 2, tudalen 3, ar ôl llinell 6, mewnosoder—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Helen Mary Jones

Section 2, page 3, after line 6, insert—

‘( ) complying with the staffing duty, and’.

Adran 2, tudalen 3, ar ôl llinell 6, mewnosoder—

‘( ) complying with the staffing duty, and’.

Helen Mary Jones

Section 2, page 3, after line 6, insert—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Adran 2, tudalen 3, ar ôl llinell 6, mewnosoder—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Helen Mary Jones

Section 2, page 3, after line 6, insert—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.

Adran 2, tudalen 3, ar ôl llinell 6, mewnosoder—
’() the availability and accessibility of health services through the medium of Welsh, and’.

Helen Mary Jones

Section 2, page 3, after line 8, insert—

“staffing duty” means the duty of NHS trusts to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,

(b) the provision of safe and high-quality health services, and

(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Adran 2, tudalen 3, ar ôl llinell 8, mewnosoder—

“staffing duty” means the duty of NHS trusts to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

(a) the health, wellbeing and safety of individuals to whom health services are provided,

(b) the provision of safe and high-quality health services, and

(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Helen Mary Jones

Section 2, page 3, after line 19, insert—

“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,

(b) the local context in which it is being provided,

(c) the number of individuals being provided it,

(d) the needs of individuals being provided it, and

(e) appropriate clinical advice. ’.

Adran 2, tudalen 3, ar ôl llinell 20, mewnosoder—
“appropriate numbers” means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

(a) the nature of the particular kind of health service,
(b) the local context in which it is being provided,
(c) the number of individuals being provided it,
(d) the needs of individuals being provided it, and
(e) appropriate clinical advice.’.

Helen Mary Jones

Section 2, page 3, after line 24, insert—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Adran 2, tudalen 3, ar ôl llinell 25, mewnysoder—

‘( ) improving the health of the general population of Wales with the aim of reducing the need for individuals to receive health services, and’.

Helen Mary Jones

Section 2, page 3, after line 24, insert—

‘( ) complying with the staffing duty, and’.

Adran 2, tudalen 3, ar ôl llinell 25, mewnysoder—

‘( ) complying with the staffing duty, and’.

Helen Mary Jones

Section 2, page 3, after line 24, insert—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and’.

Adran 2, tudalen 3, ar ôl llinell 25, mewnysoder—

‘( ) reducing inequalities between the people of Wales with respect to the benefits that they can obtain from the provision of health services, and ’.

Helen Mary Jones

Section 2, page 3, after line 24, insert—
‘( ) the availability and accessibility of health services through the medium of Welsh, and’.

Adran 2, tudalen 3, ar ôl llinell 25, mewnodoser—

‘( ) the availability and accessibility of health services through the medium of Welsh, and’.

Helen Mary Jones

Section 2, page 3, after line 26, insert—

“staffing duty” means the duty of Special Health Authorities to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—
(a) the health, wellbeing and safety of individuals to whom health services are provided,
(b) the provision of safe and high-quality health services, and
(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Adran 2, tudalen 3, ar ôl llinell 27, mewnodoser—

“staffing duty” means the duty of Special Health Authorities to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—
(a) the health, wellbeing and safety of individuals to whom health services are provided,
(b) the provision of safe and high-quality health services, and
(c) in so far as it affects either of those matters, the wellbeing of staff.’.

Helen Mary Jones

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (health service bodies: Miscellaneous), after section 25E (nurse staffing levels: reports) insert—

“Register of managers employed by a Local Health Board, NHS trust or Special Health Authority

25F Creating a register of managers employed by a Local Health Board, NHS trust or Special Health Authority
(1) Regulations must provide for the creation of a register of clinical and non-clinical managers who are employed or engaged by a Local Health Board, NHS trust or Special Health Authority.

(2) All persons who carry out managerial roles within a Local Health Board, NHS trust or Special Health Authority must be registered on the register of managers.

(3) The regulations required by subsection (1) must—
   (a) state that the register of managers is required in order to support the duties set out in sections 12A, 20A and 24A,
   (b) define which roles are classified as managerial roles,
   (c) set out what competencies must be evidenced in order for a person to be registered on the register,
   (d) establish a body corporate with all of the necessary functions required in order to administer the register.

(4) The regulations required by subsection (1) may make any other provision in respect of the register of managers.

(5) No person may be employed in any managerial role by a Local Health Board, NHS trust or Special Health Authority if they are not registered on the register referred to in subsection (1).

(6) Regulations may not be made under subsection (1) unless a draft of the regulations has been laid before, and approved by resolution of, the National Assembly for Wales.

(7) In section 203(5) insert in the appropriate place—
   “( ) section (25F)(1)”.

Adran 2, tudalen 3, ar ôl llinell 33, mewnoser—

‘(6) Ym Mhennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), ar ôl adran 25E (lefelau staff nyrsio: adroddiadau) mewnoser—

“Register of managers employed by a Local Health Board, NHS trust or Special Health Authority

25F Creating a register of managers employed by a Local Health Board, NHS trust or Special Health Authority

(1) Regulations must provide for the creation of a register of clinical and non-clinical managers who are employed or engaged by a Local Health Board, NHS trust or Special Health Authority.

(2) All persons who carry out managerial roles within a Local Health Board, NHS trust or Special Health Authority must be registered on the register of managers.

(3) The regulations required by subsection (1) must—
(a) state that the register of managers is required in order to support the duties set out in sections 12A, 20A and 24A,

(b) define which roles are classified as managerial roles,

(c) set out what competencies must be evidenced in order for a person to be registered on the register,

(d) establish a body corporate with all of the necessary functions required in order to administer the register.

(4) The regulations required by subsection (1) may make any other provision in respect of the register of managers.

(5) No person may be employed in any managerial role by a Local Health Board, NHS trust or Special Health Authority if they are not registered on the register referred to in subsection (1).

(6) Regulations may not be made under subsection (1) unless a draft of the regulations has been laid before, and approved by resolution of, the National Assembly for Wales.

(7) Yn adran 203(5) mewnosoder yn y lle priodol—

“( ) adran (25F)(1)”.

Helen Mary Jones

Page 6, after line 27, insert a new section—

‘( ) Non-compliance with the duty of candour

Any failure by an NHS Body to comply with any or all of sections 4 to 10 of this Act shall be dealt with under the NHS Wales Escalation and Intervention Arrangements or any other arrangements which replace them, wholly or in part, from time to time.’.

Tudalen 6, ar ôl llinell 31, mewnosoder adran newydd—

‘( ) Diffyg cydymffurfio â’r ddyletswydd gonestrydd

Rhaid ymdrin ag unryw fethiant gan gorff y GIG i gydymffurfio ag unryw un neu ragor o adranau 4 i 10 o'r Ddeddf hon o dan Drefniadau Uwchgyfeirio ac Ymyrryd GIG Cymru neu unryw drefniadau eraill sy’n eu disodli yn gyfan gwbl neu’n rhanol, o bryd i’w gilydd.’.

Helen Mary Jones

Section 13, page 8, line 6, after ‘services’, insert—

‘, and

(b) establish a structure for itself which includes representation in each local authority area in Wales, to ensure that the Citizen Voice Body—

(i) represents the interests of people in all parts of Wales, and
(ii) is accessible to people in all parts of Wales.

Adran 13, tudalen 8, llinell 7, ar ôl ‘cymdeithasol’, mewnysoder—

‘a

(b) sefydlu strwythur i’w hun sy’n cynnwys sylwadau ym mhob ardal awdurndod lleol yng Nghymru, i sicrhau bod Corff Llais y Dinesydd—

(i) yn cynrychioli buddiannau pobl ym mhob rhan o Gymru, a

(ii) yn hygyrch i bobl ym mhob rhan o Gymru’.

Helen Mary Jones

Section 15, page 8, after line 21, insert—

‘(c) the Welsh Ministers.’.

Adran 15, tudalen 8, ar ôl llinell 22, mewnysoder—

‘(c) Gweinidogion Cymru.’.

Helen Mary Jones

Section 15, page 8, after line 21, insert—

‘( ) The recipient of any representation made under subsection (1) must prepare a response to each representation made.

( ) A response under subsection (first subsection to be inserted by this amendment) must state—

(a) the extent to which the recipient accepts the representation, and

(b) any actions that the recipient intends to take in relation to the representation.

( ) As soon as reasonably practicable, the recipient must publish the response on their website and send the response to the Citizen Voice Body.’.

Adran 15, tudalen 8, ar ôl llinell 22, mewnysoder—

‘( ) Rhaid i’r sawl sy’n cael unrhyw sylwadau a wneir o dan is-adran (1) baratoi ymateb i bob un.

( ) Rhaid i ymateb o dan is-adran (is-adran gynylaf i’w mewnysod gan y gwelliant hwn) nodi—

(a) y graddau y mae’r sawl sy’n cael y sylwadau yn eu derbyn, a

(b) unrhyw gamau y mae’r sawl sy’n cael y sylwadau yn bwriadu eu cymryd mewn perthnas a’r sylwadau hynny.

( ) Cyn gynted ag y bo’n rhesymol ymarferol, rhaid i’r sawl sy’n cael y sylwadau gyhoeddîr ymateb ar ei wefan ac anfon ymateb at Gorff Llais y Dinesydd.’.
Page 9, after line 33, insert a new section—

‘( ) Entry to premises

(1) In this section—

(a) “authorised representative” means any person who is authorised by the Citizen Voice Body to enter premises, and

(b) “premises” means

(i) any premises owned or controlled by an NHS body or local authority at which health services or social services are provided,

(ii) any other premises where health services or social services are provided by an NHS body or local authority.

(2) An authorised representative of the Citizen Voice Body may, for the purposes of carrying out any of the Citizen Voice Body’s functions—

(a) enter and view premises, and

(b) observe the carrying on of activities on those premises.

(3) Subsection (2) does not apply in respect of any premises, or parts of premises, if, in the opinion of the Citizen Voice Body, the presence of an authorised representative on those premises, or those parts of premises, would compromise—

(a) the effective provision of health services or social services; or

(b) the safety, privacy or dignity of any person.

(4) The Citizen Voice Body and all authorised representatives must have regard to any guidance issued by the Welsh Ministers in relation to this section.’.

Tudalen 9, ar ôl llinell 33, mewnosoder adran newydd—

‘( ) Mynediad i fangre

(1) Yn yr adran hon—

(a) ystyr “cynrychiolydd awdurdodedig” yw unrhyw berson sydd wedi ei awdurdodi gan Gorff Llais y Dinesydd i fynd i fangre, a

(b) ystyr “mangre” yw—

(i) unrhyw fangre sydd o dan berchenogaeth neu o dan reolaeth corff GIG neu awdurdod lleol lle y darperir gwasanaethau iechyd neu wasanaethau cymdeithasol,

(ii) unrhyw fangre arall lle y darperir gwasanaethau iechyd neu wasanaethau cymdeithasol gan gorff GIG neu awdurdod lleol.

(2) Caiff cynrychiolydd awdurdodedig Corff Llais y Dinesydd, at ddibenion cynnal unrhyw un neu ragor o swyddogaethau Corff Llais y Dinesydd—

(a) mynd i fangre i’w gweld a
Page 9, after line 33, insert a new section—

‘( ) Duty to co-operate with the Citizen Voice Body

Each NHS body and local authority, when exercising its social services functions, must co-operate with the Citizen Voice Body in the exercise of its functions.’.

Page 10, after line 32, insert a new section—

‘PART ()

DUTY OF CO-OPERATION

( ) Duty upon relevant bodies to co-operate

(1) All relevant bodies must work collaboratively and in co-operation with each other in order to secure improvements when providing health services or social services.

(2) In discharging the duty in subsection (1), relevant bodies must ensure that the needs of the individuals to whom the health services or social services are being provided are paramount.’.
RHAN ( )

DYLETSWYDD CYDWEITHREDU

( ) Dyletswydd ar gyrrf perthnasol i gydweithredu

(1) Rhaid i bob corff perthnasol gyfdlafurio a chydweithredu er mwyn sicrhau gweliant eu ddarpariaethau iechyd neu wasanaethau cymdeithasol wrth ddarparu gwasanaethau iechyd neu wasanaethau cymdeithasol.

(2) Wrth gyflawni'r dyletswydd yn is-adran (1), rhaid i gyrrf perthnasol sicrhau bod anghenion unigolion y darparir y gwasanaethau iechyd neu'r gwasanaethau cymdeithasol iddynt o'r pwys mwyaf.'.

Helen Mary Jones

Page 10, after line 32, insert a new section—

‘( )’ Guidance given by the Welsh Ministers

(1) The Welsh Ministers must issue guidance in relation to the duty set out in section (section to be inserted by amendment 50) of this Part no later than one year from the date upon which this Act receives Royal Assent.

(2) A relevant body must have regard to the guidance issued by the Welsh Ministers under subsection (1).’.

Tudalen 10, ar ôl llinell 36, mewnosoder adran newydd—

‘( )’ Canllawiau a roddir gan Weinidogion Cymru

(1) Rhaid i Weinidogion Cymru ddyroddi canllawiau mewn perthynas â’r ddyfelyddwydd a nodir yn adran (adran i’w mewn mewnosod gan welliant 50) o’r Rhan hon heb fod yn hwyraeth na blwyddyn o’r dyddiad y bydd y Ddeddf hon yn cael y Cydsyniad Brenhinol.

(2) Rhaid i gorff perthnasol roi sylw i’r canllawiau a ddyroddir gan Weinidogion Cymru o dan is-adran (1).’.

Helen Mary Jones

Page 10, after line 32, insert a new section—

‘( )’ Interpretation of this Part

(1) A reference in this Part (to be inserted by amendment 50) to health services is to services provided in Wales under or by virtue of the 2006 Act for or in connection with—

(a) the prevention, diagnosis or treatment of illness,

(b) the promotion and protection of public health.

(2) In subsection (1), “illness” has the meaning given in section 206 of the 2006 Act.

(3) In this Part—
“health care provider” ("darparwr gofal iechyd") means a primary care provider, Local Health Board, NHS trust or Special Health Authority;

“primary care provider” ("darparwr gofal sylfaenol") means a person who provides health care on behalf of a Local Health Board by virtue of a contract, agreement or arrangement under Part 4, 5, 6 or 7 of the 2006 Act between the person and the Local Health Board;

“relevant body” ("corff perthnasol") means a health care provider or a local authority exercising its social services functions;

“social services” ("gwasanaethau cymdeithasol") means services provided in the exercise of a local authority’s social services functions;

“social services functions” ("swyddogaethau gwasanaethau cymdeithasol"), in relation to a local authority, has the same meaning as it has for the purposes of the Social Services and Well-being (Wales) Act 2014 (anaw 4) (see, in particular, section 143 of that Act);

“Special Health Authority” ("Awdurdod Iechyd Arbennig") means a body established under section 22 of the 2006 Act; but does not include any cross-border Special Health Authority (within the meaning of section 8A(5) of the 2006 Act) other than NHS Blood and Transplant.'.
ystyr “darparwr gofal sylfaenol” ("primary care provider"), yw person sy’n darparu gofal iechyd ar ran Bwrdd Iechyd Lleol yn rhinwedd contract, cytundeb neu drefniant o dan Ran 4, 5, 6 neu 7 o Ddeddf 2006 rhwng y person a’r Bwrdd Iechyd Lleol,
ystyr “gwasanaethau cymdeithasol” ("social services") yw gwasanaethau a ddarperir wrth arfer swyddogaethau gwasanaethau cymdeithasol awdurdod lleol, mae i “swyddogaethau gwasanaethau cymdeithasol” ("social services functions"), mewn perthynas ag awdurdod lleol, yr un ystyr ag sydd iddo at ddibenion Deddf Gwasanaethau Cymdeithasol a Llesiant (Cymru) 2014 (dccc 4) (gweler, yn benodol, adran 143 o’r Ddeddf honno).’

Helen Mary Jones

53

Page 10, after line 32, insert a new section—

‘PART ()

CREATION OF A SINGLE HEALTH AND CARE INSPECTORATE

( )  Merging of Healthcare Inspectorate Wales and Care Inspectorate Wales

(1) The Welsh Ministers shall by order merge the Healthcare Inspectorate Wales and the Care Inspectorate Wales.

(2) In this section, to “merge” means—

(a) to abolish each of the Healthcare Inspectorate Wales and the Care Inspectorate Wales, create a new body corporate and transfer some or all of the functions of the Healthcare Inspectorate Wales or the Care Inspectorate Wales to the new body corporate, or

(b) to abolish one of the Healthcare Inspectorate Wales or the Care Inspectorate Wales and to transfer some or all of the functions of the abolished body to the remaining body.

(3) Where subsection (2)(a) is applied for the purposes of an order made under subsection (1) the new body corporate must be named the “Health and Care Inspectorate Wales”.

(4) Where subsection 2(b) is applied for the purposes of an order made under subsection (1) the remaining body must be renamed the “Health and Care Inspectorate Wales”.’

Tudalen 10, ar ôl llinell 36, mewnosoder adran newydd—

‘RHAN ()

CREU UN AROLYGIAETH IECHYD A GOFAL

( )  Uno Arolygiaeth Gofal Iechyd Cymru ac Arolygiaeth Gofal Cymru
Page 10, after line 32, insert a new section—

"( ) How functions are to be exercised

(1) An order made under section (section to be inserted by amendment 53) must contain provision that the new Health and Care Inspectorate Wales has complete discretion as to the manner in which its functions are exercised and is not subject to the direction or control of the National Assembly for Wales or the Welsh Government.

(2) But this discretion is subject to the aim that all functions must be carried out efficiently and cost-effectively.’.

Tudalen 10, ar ôl llinell 36, mewnodoser adran newydd—

‘( ) Merging of Healthcare Inspectorate Wales and Care Inspectorate Wales: consequential provisions

(1) Rhaid i orchymyn a wneir o dan adran (adran i’w mewnodos gan welliant 53) gynnwys darpariaeth bod gan Arolygiaeth Iechyd a Gofal Cymru ddigresiwn llwyr yng Nghymru i gyflawni sut y mae swyddogaethau i gael eu harfer, ac nad yw’n ddarostyngedig i gyfarwyddyd na rheolaeth y Cynulliad Cenedlaethol Cymru na Llywodraeth Cymru.

(2) Ond Mae’r disgresiwn hwn yn ddarostynedig i’r nod bod yn rhaid i’r holl swyddogaethau gael eu cyflawni’n effeithlon ac yn gosteffeithiol’.
(1) An order under section \textit{(section to be inserted by amendment 53)} may contain consequential, supplementary, incidental or transitional provision, or savings.

(2) Where an order under section \textit{(section to be inserted by amendment 53)} transfers functions, the power in subsection (1) includes power to make consequential or supplementary provision—

(a) to modify the constitutional or funding arrangements of the transferee or the transferor, or

(b) to modify the functions of the transferee or the transferor.

(3) Where an order under section \textit{(section to be inserted by amendment 53)} modifies functions of a body, the power in subsection (1) includes power to make consequential or supplementary provision to modify the constitutional or funding arrangements of the body.’.

Tudalen 10, ar ôl llinell 36, mewnosoder adran newydd—

‘( ) Uno Arolygiaeth Gofal Iechyd Cymru ac Arolygiaeth Iechyd Cymru: darpariaethau canlyniadol

(1) Caiff gorchymyn a wneir o dan adran \textit{(adran i’w mewnosit gan welliant 53)} gynnwys darpariaeth ganlyniadol, darpariaeth atodol, darpariaeth gysylltiedig, darpariaeth drosiannol, neu ddarpariaeth arbed.

(2) Pan fo gorchymyn o dan adran \textit{(adran i’w mewnosit gan welliant 53)} yn trosglwyddo swyddogaethau, ma’r pŵer yn is-adran (1) yn cynnwys pŵer i wneud darpariaeth ganlyniadol neu ddarpariaeth atodol—

(a) i addasu trefniadau cyfansoddiadol neu drefniadau ariannu’r trosglwyddai neu’r trosglwyddydd, neu

(b) i addasu swyddogaethau’r trosglwyddai neu’r trosglwyddydd.

(3) Pan fo gorchymyn o dan adran \textit{(adran i’w mewnosit gan welliant 53)} yn addasu swyddogaethau corff, ma’r pŵer yn is-adran (1) yn cynnwys pŵer i wneud darpariaeth ganlyniadol neu ddarpariaeth atodol i addasu trefniadau cyfansoddiadol neu drefniadau ariannu’r corff.’.

Helen Mary Jones

Page 10, after line 32, insert a new section—

‘( ) Procedure for making an order

An order made under section \textit{(section to be inserted by amendment 53)} may not be made unless a draft of the order has been laid before, and approved by resolution of, the National Assembly for Wales.’.
Tudalen 10, ar ôl llinell 36, mewnosoder adran newydd—

‘( ) **Gweithdrefn ar gyfer gwneud gorchymyn**

Ni chaniateir gwneud gorchymyn a wneir o dan is-adran (adran i’w mewnosod gan welliant 53) oni bai bod drafft o’r gorchymyn wedi’i osod gerbron Cynulliad Cenedlaethol Cymru, a’i gymeradwyo ganddo drwy benderfyniad.’.

**Helen Mary Jones** 57

Section 23, page 11, line 27, after ‘Act’, insert ‘, save for section [section to be inserted by amendment 56].’.

Adran 23, tudalen 11, llinell 27, ar ôl ‘hon’, mewnosoder ‘, ac eithrio adran [adran i’w mewnosod gan welliant 56].’.

**Helen Mary Jones** 58

Schedule 1, page 13, line 18, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.

Atodlen 1, tudalen 13, llinell 17, hepgorer ‘Gweinidogion’ a mewnosoder ‘Cynulliad Cenedlaethol’.

**Helen Mary Jones** 59

Schedule 1, page 13, line 31, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.

Atodlen 1, tudalen 13, llinell 30, hepgorer ‘Weinidogion’ a mewnosoder ‘Gynulliad Cenedlaethol’.

**Helen Mary Jones** 60

Schedule 1, page 14, line 2, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.

Atodlen 1, tudalen 14, llinell 2, hepgorer ‘Gweinidogion’ a mewnosoder ‘Cynulliad Cenedlaethol’.

**Helen Mary Jones** 61

Schedule 1, page 14, line 6, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.

Atodlen 1, tudalen 14, llinell 7, hepgorer ‘Gweinidogion’ a mewnosoder ‘Cynulliad Cenedlaethol’.

**Helen Mary Jones** 62

Schedule 1, page 14, line 7, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.

Atodlen 1, tudalen 14, llinell 8, hepgorer ‘Weinidogion’ a mewnosoder ‘Gynulliad Cenedlaethol’.

Cynulliad Cenedlaethol Cymru  National Assembly for Wales
Helen Mary Jones

Schedule 1, page 14, line 10, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.
Atodlen 1, tudalen 14, llinell 10, hepgorer ‘Gweinidogion’ a mewnoserder ‘Cynulliad Cenedlaethol’.

Helen Mary Jones

Schedule 1, page 14, line 23, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.
Atodlen 1, tudalen 14, llinell 23, hepgorer ‘Gweinidogion’ a mewnoserder ‘Cynulliad Cenedlaethol’.

Helen Mary Jones

Schedule 1, page 14, line 31, leave out ‘Welsh Ministers’ and insert ‘National Assembly for Wales’.
Atodlen 1, tudalen 14, llinell 30, hepgorer ‘Gweinidogion’ a mewnoserder ‘Cynulliad Cenedlaethol’.

Helen Mary Jones

Schedule 3, page 22, after line 18, insert—

‘The Welsh Language Standards (No. 7) Regulations 2018
(1) In Schedule 6 to the Welsh Language Standards (No. 7) Regulations 2018 (S.I 2018/441 (W.77)) (“the 2018 Regulations”), insert in the appropriate place—


(2) The amendment made by this paragraph does not affect the power to make further regulations amending or revoking the 2018 Regulations.’.

Atodlen 3, tudalen 22, ar ôl llinell 20, mewnoserder—

‘Rheoliadau Safonau’r Gymraeg (Rhif 7) 2018
(1) Yn Atodlen 6 i Rheoliadau Safonau’r Gymraeg (Rhif 7) 2018 (O.S. 2018/441 (Cy.77)) (“Rheoliadau 2018”), mewnoserder yn y lle priodol—


(2) Nid yw’r diwygiadau a wneir gan y paragraff hwn yn efethio ar y pŵer i wneud rheoliadau pellach i ddiwygio neu ddirymu Rheoliadau 2018.’.
Angela Burns 67

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (health service bodies: Miscellaneous), after section 30 (schemes for meeting losses and liabilities etc of certain health service bodies) insert—

“30A Duty to secure quality in health services: guidance

(1) The Welsh Ministers must issue guidance in relation to the duties under sections 12A, 20A and 24A of this Act and any bodies to which those sections apply must have regard to the guidance.

(2) The guidance must set out, in particular—

(a) how the duties under sections 12A, 20A and 24A are assessed,

(b) how a relevant body can demonstrate improved outcomes achieved as a result of taking steps to comply with a duty, and

(c) how innovations and improvements which are initially applied at a local or regional level can be implemented across the whole of Wales.’.

Adran 2, tudalen 3, ar ôl llinell 33, mewnosoder—

‘(6) Ym Mhennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), ar ôl adran 30 (cynlluniau ar gyfer bodloni colledion ac atebolrwyddau etc rhai o gyrff y gwasanaeth iechyd) mewnosoder—

“30A Duty to secure quality in health services: guidance

(1) The Welsh Ministers must issue guidance in relation to the duties under sections 12A, 20A and 24A of this Act and any bodies to which those sections apply must have regard to the guidance.

(2) The guidance must set out, in particular—

(a) how the duties under sections 12A, 20A and 24A are assessed,

(b) how a relevant body can demonstrate improved outcomes achieved as a result of taking steps to comply with a duty, and

(c) how innovations and improvements which are initially applied at a local or regional level can be implemented across the whole of Wales.’.

Angela Burns 68

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (Health service bodies: Miscellaneous) before section 25A (duty to have regard to providing sufficient nurses, insert—
“25AA Duty of quality: ensuring appropriate number of registered healthcare staff

(1) The Welsh Ministers must take all reasonable steps to ensure that there is a sufficient number of—
   (a) registered nurses,
   (b) registered midwives,
   (c) medical practitioners, and
   (d) such other types of employees as the Welsh Ministers may by regulations prescribe

available to every Local Health Board, NHS trust and Special Health Authority to enable them to comply with the staffing duty imposed in sections 12A, 20A and 24A.

(2) In fulfilling the duty under subsection (1), the Welsh Ministers must have regard to—
   (a) the number of people training for the professions listed in or by virtue of subsection (1) in Wales,
   (b) any information as to variation in staffing needs caused by differences in the geographical areas for which Local Health Boards, NHS trusts and Special Health Authorities are responsible, and
   (c) any information provided to them by a Local Health Board, NHS trust or Special Health Authority about how it has complied with the staffing duty imposed in sections 12A, 20A and 24A.

(3) As soon as reasonably practicable after the end of each financial year, the Welsh Ministers must lay before the National Assembly for Wales a report setting out—
   (a) how they have complied with subsection (1), and
   (b) the extent to which their compliance with subsection (1) enabled Local Health Boards, NHS trusts and Special Health Authorities to comply with the staffing duty imposed in sections 12A, 20A and 24A.’.

Adran 2, tudalen 3, ar ôl llinell 33, mewnosoder—

‘(6) Ym Mhenod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), cyn adran 25A (dyletswydd i roi sylw i ddarparu digon o nyrsys) mewnosoder—

“25AA Duty of quality: ensuring appropriate number of registered healthcare staff

(1) The Welsh Ministers must take all reasonable steps to ensure that there is a sufficient number of—
(a) registered nurses,
(b) registered midwives,
(c) medical practitioners, and
(d) such other types of employees as the Welsh Ministers may by regulations prescribe

available to every Local Health Board, NHS trust and Special Health Authority to enable them to comply with the staffing duty imposed in sections 12A, 20A and 24A.

(2) In fulfilling the duty under subsection (1), the Welsh Ministers must have regard to—

(a) the number of people training for the professions listed in or by virtue of subsection (1) in Wales,
(b) any information as to variation in staffing needs caused by differences in the geographical areas for which Local Health Boards, NHS trusts and Special Health Authorities are responsible, and
(c) any information provided to them by a Local Health Board, NHS trust or Special Health Authority about how it has complied with the staffing duty imposed in sections 12A, 20A and 24A.

(3) As soon as reasonably practicable after the end of each financial year, the Welsh Ministers must lay before the National Assembly for Wales a report setting out—

(a) how they have complied with subsection (1), and
(b) the extent to which their compliance with subsection (1) enabled Local Health Boards, NHS trusts and Special Health Authorities to comply with the staffing duty imposed in sections 12A, 20A and 24A.‘.

Angela Burns

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (Health service bodies: Miscellaneous) before section 25A (duty to have regard to providing sufficient nurses, insert—

“25AB Duty of quality: real-time staffing assessment

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) Each Local Health Board, NHS trust and Special Health Authority must put and keep in place arrangements for the real-time assessment of its compliance with the staffing duty imposed in sections 12A, 20A and 24A.'
(3) The arrangements referred to in subsection (2) must include—

(a) a procedure for the identification by any member of staff of any risks caused to staffing levels to—

(i) the health, wellbeing and safety of patients,

(ii) the provision of safe and quality health care, or

(iii) insofar as it affects either of the matters in (i) or (ii), the wellbeing of staff.

(b) a procedure for the notification of any risk referred to in subsection (a) to an individual with lead professional responsibility (whether clinical or non-clinical) in the area where the risk was identified,

(c) a procedure for the mitigation of any risk referred to in subsection (a) by an individual referred to in subsection (b) and a requirement for that individual to seek and have regard to appropriate clinical advice in carrying out such mitigation,

(d) raising awareness among staff about the procedures described in subsections (a) and (c),

(e) encouraging and enabling staff to use the procedures referred to in subsections (a) and (b),

(f) training individuals with lead professional responsibility (whether clinical or non-clinical) for particular types of health care in how to implement the arrangements referred to in subsections (a) to (e), and

(g) ensuring that the individuals referred to in subsection (f) receive adequate time and resources to implement the arrangements referred to in subsections (a) to (e).”

“25AC Real-time staffing assessment: duty to have risk escalation process in place

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) Each Local Health Board, NHS trust and Special Health Authority must put and keep in place arrangements for the escalation of any risk—

(a) identified under the real-time staffing assessment of its staffing levels in accordance with section 25AB(2), and

(b) which it has not been possible to mitigate in accordance with the arrangement put in place under section 25AB(3).

(3) The arrangements under subsection (2) must include—
(a) a procedure for the initial reporting of the risk by an individual with lead professional responsibility (whether clinical or non-clinical) in the area where the risk was identified, to a more senior decision maker,

(b) a requirement for the senior decision maker referred to in subsection (a) to seek and have regard to appropriate clinical advice in reaching a decision on the risk, including how to mitigate it,

(c) a procedure for the onward reporting of the risk to a further more senior decision-maker and a requirement for that decision-maker to seek and have regard to appropriate clinical advice in reaching a decision on the risk, including on how to mitigate it,

(d) a requirement for the arrangements put in place under subsection (c) to escalate further in order to reach a final decision on the risk, including in appropriate cases by the reporting of the risk to the members of the Health Board, NHS trust or Special Health Authority (as the case may be),

(e) a requirement to prepare a report on the decision of each decision maker involved in the process, giving reasons for their decision,

(f) a procedure for the notification of every report referred to in subsection (e) to—

i. any individual who was involved in identifying the risk in accordance with the arrangements put in place under subsection (a),

ii. any individual who was involved in attempting to mitigate the risk in accordance with the arrangements put in place under subsection (c),

iii. any individual who was involved in reporting the risk in accordance with the arrangements put in place under subsections (a), (c) or (d), and

iv. any individual who gave clinical advice in accordance with the arrangements put in place under section 25AB(c) or under subsections (b), (c) or (d) of this subsection,

(g) a procedure for any individual referred to in subsection (f) to record any disagreement with any decision in the report referred to in subsection (e),
(h) a procedure for the individuals referred to in subsection (f) to be able to request a review of the final decision on a risk (other than a final decision made by the members of the Health Board, NHS trust or Special Health Authority) made in accordance with the arrangements put in place under subsection 25AB(c) or, as the case may be, subsections (b), (c) or (d) of this subsection,

(i) raising awareness among staff about the procedures described in paragraphs (a) to (g),

(j) training individuals with lead professional responsibility (whether clinical or non-clinical) for particular types of health care, and other senior decision-makers, in how to implement the arrangements put in place under subsections (a) to (i), and

(k) ensuring that the individuals referred to in subsection (j) receive adequate time and resources to implement those arrangements.’.

Adran 2, tudalen 3, ar ôl llinell 33, mewnodoser –

‘(6) Ym Mennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), cyn adran 25A (dyletswydd i roi sylw i ddarparu digon o nyrsys) mewnodoser—

“25AB Duty of quality: real-time staffing assessment

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) Each Local Health Board, NHS trust and Special Health Authority must put and keep in place arrangements for the real-time assessment of its compliance with the staffing duty imposed in sections 12A, 20A and 24A.

(3) The arrangements referred to in subsection (2) must include–

(a) a procedure for the identification by any member of staff of any risks caused to staffing levels to–

(i) the health, wellbeing and safety of patients,

(ii) the provision of safe and quality health care, or

(iii) insofar as it affects either of the matters in (i) or (ii), the wellbeing of staff.

(b) a procedure for the notification of any risk referred to in subsection (a) to an individual with lead professional responsibility (whether clinical or non-clinical) in the area where the risk was identified,
(c) a procedure for the mitigation of any risk referred to in subsection (a) by an individual referred to in subsection (b) and a requirement for that individual to seek and have regard to appropriate clinical advice in carrying out such mitigation,

(d) raising awareness among staff about the procedures described in subsections (a) and (c),

(e) encouraging and enabling staff to use the procedures referred to in subsections (a) and (b),

(f) training individuals with lead professional responsibility (whether clinical or non-clinical) for particular types of health care in how to implement the arrangements referred to in subsections (a) to (e), and

(g) ensuring that the individuals referred to in subsection (f) receive adequate time and resources to implement the arrangements referred to in subsections (a) to (e).”

“25AC  Real-time staffing assessment: duty to have risk escalation process in place

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) Each Local Health Board, NHS trust and Special Health Authority must put and keep in place arrangements for the escalation of any risk–

(a) identified under the real-time staffing assessment of its staffing levels in accordance with section 25AB(2), and

(b) which it has not been possible to mitigate in accordance with the arrangement put in place under section 25AB(3).

(3) The arrangements under subsection (2) must include–

(a) a procedure for the initial reporting of the risk by an individual with lead professional responsibility (whether clinical or non-clinical) in the area where the risk was identified, to a more senior decision maker,

(b) a requirement for the senior decision maker referred to in subsection (a) to seek and have regard to appropriate clinical advice in reaching a decision on the risk, including how to mitigate it,

(c) a procedure for the onward reporting of the risk to a further more senior decision-maker and a requirement for that decision-maker to seek and have regard to appropriate clinical advice in reaching a decision on the risk, including on how to mitigate it,
(d) a requirement for the arrangements put in place under subsection (c) to escalate further in order to reach a final decision on the risk, including in appropriate cases by the reporting of the risk to the members of the Local Health Board, NHS trust or Special Health Authority (as the case may be),

(e) a requirement to prepare a report on the decision of each decision maker involved in the process, giving reasons for their decision,

(f) a procedure for the notification of every report referred to in subsection (e) to—

i. any individual who was involved in identifying the risk in accordance with the arrangements put in place under subsection (a),

ii. any individual who was involved in attempting to mitigate the risk in accordance with the arrangements put in place under subsection (c),

iii. any individual who was involved in reporting the risk in accordance with the arrangements put in place under subsections (a), (c) or (d), and

iv. any individual who gave clinical advice in accordance with the arrangements put in place under section 25AB(c) or under subsections (b), (c) or (d) of this subsection,

(g) a procedure for any individual referred to in subsection (f) to record any disagreement with any decision in the report referred to in subsection (e),

(h) a procedure for the individuals referred to in subsection (f) to be able to request a review of the final decision on a risk (other than a final decision made by the members of the Local Health Board, NHS trust or Special Health Authority) made in accordance with the arrangements put in place under subsection 25AB(c) or, as the case may be, subsections (b), (c) or (d) of this subsection,

(i) raising awareness among staff about the procedures described in paragraphs (a) to (g),

(j) training individuals with lead professional responsibility (whether clinical or non-clinical) for particular types of health care, and other senior decision-makers, in how to implement the arrangements put in place under subsections (a) to (i), and

(k) ensuring that the individuals referred to in subsection (j) receive adequate time and resources to implement those arrangements.'
Angela Burns

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (Health service bodies: Miscellaneous) after section 26 (intervention orders) insert—

“26A Failure to comply with the duty to secure quality in health services
(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.
(2) If the Welsh Ministers consider that a body to which this section applies has failed to exercise its functions in accordance with sections 12A, 20A and 24A, they may make an intervention order in respect of the body.”

Adran 2, tudalen 3, ar ôl llinell 33, mewnosoder—

‘(6) Ym Mhennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), ar ôl adran 26 (gorchmyrion ymyrryd) mewnosoder—

“26A Failure to comply with the duty to secure quality in health services
(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.
(2) If the Welsh Ministers consider that a body to which this section applies has failed to exercise its functions in accordance with sections 12A, 20A and 24A, they may make an intervention order in respect of the body.”

Angela Burns

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (health service bodies: Miscellaneous), after section 30 (schemes for meeting losses and liabilities etc of certain health service bodies) insert—

“30A Duty to secure quality in health services: guidance
(1) The Welsh Ministers must issue guidance in relation to the duties under sections 12A, 20A and 24A of this Act and any bodies to which those sections apply must have regard to the guidance.
(2) The guidance must set out, in particular—
   (a) how the duties under sections 12A, 20A and 24A align with the social care duties placed upon the bodies to which those sections apply, and
   (b) how the duties under sections 12A, 20A and 24A support the integration of health services and social care services.”
Adran 2, tudalen 3, ar ôl llinell 33, mewnrosader—

‘(6) Ym Mhennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), ar ôl adran 30 (cynlluniau ar gyfer bodloni colledion ac atebolrwyddau etc rhai o gyrff y gwasanaeth iechyd) mewnrosader—

“30A  Duty to secure quality in health services: guidance

(1) The Welsh Ministers must issue guidance in relation to the duties under sections 12A, 20A and 24A of this Act and any bodies to which those sections apply must have regard to the guidance.

(2) The guidance must set out, in particular—

(a) how the duties under sections 12A, 20A and 24A align with the social care duties placed upon the bodies to which those sections apply, and

(b) how the duties under sections 12A, 20A and 24A support the integration of health services and social care services.”.

Angela Burns

Section 2, page 3, after line 32, insert—

‘(6) In Chapter 4 of Part 2 (health service bodies: Miscellaneous), after section 25E (nurse staffing levels: reports) insert—

“Data collection, analysis and publication

“25F  Collection, analysis and publication of data

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) In order to evidence compliance with the duties in sections 12A, 20A and 24A, regulations must provide for the establishment and operation of systems to collect, analyse and publish data which must be supplied by Local Health Boards, NHS trusts and Special Health Authorities to the Welsh Ministers relating to, as applicable to those bodies—

(a) attendance at accident and emergency units,

(b) ambulance quality indicators,

(c) bed availability and occupancy within hospitals,

(d) cancelled elective operations,

(e) cancer waiting times,

(f) referral to treatment waiting times,

(g) critical care bed capacity,

(h) cancellation of urgent operations,
(i) delayed transfers of care,
(j) diagnostic test waiting times and activity, and
(k) the activities of mental health community teams.”

(3) The regulations required by subsection (1) must be made no later than twelve months from the date upon which this Act receives Royal Assent.

(4) Regulations may not be made under this section unless a draft of the regulations has been laid before, and approved by resolution of, the National Assembly for Wales.

(7) In section 203(5) insert in the appropriate place—

“( ) section (25F)(1)”.

Adran 2, tudalen 3, ar ôl llinell 33, mewnosopher—

‘(6) Ym Mhennod 4 o Ran 2 (cyrff y gwasanaeth iechyd: Amrywiol), ar ôl adran 25E (lefelau staff nyrsio: adroddiadau) mewnosopher—

“Data collection, analysis and publication

“25F Collection, analysis and publication of data

(1) This section applies to Local Health Boards, NHS trusts and Special Health Authorities.

(2) In order to evidence compliance with the duties in sections 12A, 20A and 24A, regulations must provide for the establishment and operation of systems to collect, analyse and publish data which must be supplied by Local Health Boards, NHS trusts and Special Health Authorities to the Welsh Ministers relating to, as applicable to those bodies—

(a) attendance at accident and emergency units,
(b) ambulance quality indicators,
(c) bed availability and occupancy within hospitals,
(d) cancelled elective operations,
(e) cancer waiting times,
(f) referral to treatment waiting times,
(g) critical care bed capacity,
(h) cancellation of urgent operations,
(i) delayed transfers of care,
(j) diagnostic test waiting times and activity, and
(k) the activities of mental health community teams.”
(3) The regulations required by subsection (1) must be made no later than twelve months from the date upon which this Act receives Royal Assent.

(4) Regulations may not be made under this section unless a draft of the regulations has been laid before, and approved by resolution of, the National Assembly for Wales.

(7) In section 203(5) insert in the appropriate place—

“( ) section (25F)(1)”.

**Angela Burns**

Section 13, page 8, line 6, after ‘services’, insert—

‘, and

(b) establish regional bodies reflecting the health board structure within Wales to ensure that the Citizen Voice Body—

(i) represents the interests of people in all parts of Wales, and

(ii) is accessible to people in all parts of Wales’.

Adran 13, tudalen 8, llinell 7, ar ôl ‘cymdeithasol’, mewnôsoder—

‘, ac

(b) sefydlu cyrff cyhoeddus i adlewyrchu strwythur y byrddau iechyd yng Nghymru i sicrhau bod Corff Llais y Dinesydd—

(i) yn cynrychioli buddiannau pobl ym mhob rhan o Gymru,a

(ii) yn hygyrch i bobl ym mhob rhan o Gymru’.

**Angela Burns**

Section 15, page 8, after line 21, insert—

‘(c) the Welsh Ministers, and

(d) any other person or body who makes decisions or exercises functions on behalf of a local authority or NHS body.’.

Adran 15, tudalen 8, ar ôl llinell 22, mewnôsoder—

‘(c) Gweinidogion Cymru, a

(d) unrhyw berson neu gorff arall sy’n gwneud penderfyniadau neu sy’n arfer swyddogaethau ar ran awdur dîod lleol neu gorff GIG.’.
Section 16, page 9, after line 14, insert—

‘( ) Subsections (second subsection to be inserted by this amendment) and (third subsection to be inserted by this amendment) apply in respect of any concern as defined in the National Health Service (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 and any complaint as defined in the Social Services Complaints Procedure (Wales) Regulations 2014.

( ) The Welsh Ministers must by regulations provide for a system which enables a joint investigation to be carried out by an NHS body and a local authority into any concern or complaint raised by or on behalf of any person which relates to the provision of both health services and social services.

( ) The regulations in subsection (second subsection to be inserted by this amendment) must provide for—

(a) timescales within which a complaint or concern must be received,
(b) the investigation process,
(c) the reporting process, and
(d) redress.

( ) Regulations under subsection (second subsection to be inserted by this amendment) may not be made unless a draft of the regulations has been laid before, and approved by resolution of the National Assembly for Wales.’.

Adran 16, tudalen 9, ar ôl llinell 14, mewnosoder—

‘( ) Mae is-adrannau (ail is-adran i’w mewnosod gan y gwelliannau) a (trydydd is-adran i’w mewnosod gan y gwelliannau) yn gymwys mewn perthynas ag unrhyw bryder fel y’i ddefiniwir yn Rheoliadau’r Gwasanaeth Iechyd Gwladol (Trefniadau Pryderon, Cynnyrch a Iawn) (Cymru) 2011 ac unrhyw gwyn fel y’i ddefiniwir yn Rheoliadau Gweithdrefn Gwynion y Gwasanaethau Cymdeithasol (Cymru) 2014 .

( ) Rhaid i Weinidogion Cymru, drwy rheoliadau, ddarparu ar gyfer system sy’n galluogi corff GIG ac awdurodd lleol i gymnahl ymchwiliad ar y cyd i unrhyw bryder neu gwyn a godir gan unrhyw berson neu ar ran unrhyw berson sy’n ymwnued â darparu gwasanaethu iechyd a gwasanaethau cymdeithasol.

( ) Rhaid i’r rheoliadau yn is-adran (ail is-adran i’w mewnosod gan y gwelliannau) ddarparu ar gyfer—

(a) y terfynau amser y mae’n rhaid i gwyn neu bryder ddod i law,
(b) proses yr ymchwiliad,
(c) y broses adrodd, a
(d) iawn.

( ) Ni chaniatir gwneud rheoliadau o dan is-adran (ail is-adran i’w mewnosod gan y gwelliannau) oni bai bod drafft o’r rheoliadau wedi’i osod gerbron Cynulliad Cenedlaethol a’i gymeradwyo ganddo drwy benderfyniad.’.
Angela Burns

Page 9, after line 33, insert a new section—

(1) **Entry to premises**

(a) “authorised representative” means any person who is authorised by the Citizen Voice Body to enter premises,

(b) “excluded premises” means—

(i) parts of a care home which are not communal areas,

(ii) premises or parts of any premises used as residential accommodation for employees of an NHS body, local authority or other body which provides health services or social services at the premises,

(iii) premises which are occupied by one or more persons as their home and which at least one of those persons occupies under a tenancy or licence,

(c) “premises” means—

(i) any premises owned or controlled by an NHS body or local authority at which health services or social services are provided,

(ii) any other premises where health services or social services are provided by an NHS body or local authority.

(2) An authorised representative of the Citizen Voice Body may, for the purposes of carrying out any of the Citizen Voice Body’s functions—

(a) enter and view premises, and

(b) observe the carrying on of activities on those premises.

(3) Subsection (2) does not apply in respect of—

(a) any premises, or parts of premises, if, in the opinion of the Citizen Voice Body, the presence of an authorised representative on those premises, or those parts of premises, would compromise—

(i) the effective provision of health services or social services, or

(ii) the safety, privacy or dignity of any person, or

(b) excluded premises.

(4) The Welsh Ministers must prepare and publish a code of practice which includes guidance relating to—

(a) the circumstances in which the Citizen Voice Body may have access to premises for the purpose of seeking the views of individuals in respect of health services or social services,

(b) the circumstances in which the Citizen Voice Body may enter excluded premises upon the invitation of members of the public for the purpose of seeking the views of those individuals in respect of health services or social services,
(c) where access to premises or excluded premises is permitted or has been agreed, engagement with individuals at those premises or excluded premises for the purpose of seeking the views of individuals in respect of health services or social services, and

(d) the obligations of each local authority and NHS body to ensure that where appropriate access to premises is permitted by all third party providers of health and social care, including private sector providers, through appropriate commissioning arrangements.

(5) In preparing the code of practice required by subsection (4) the Welsh Ministers must consult—

(a) the Citizen Voice Body,
(b) each local authority,
(c) each NHS body, and
(d) such other persons as the Welsh Ministers consider appropriate.

(6) The Citizen Voice Body and all authorised representatives must have regard to the code of practice issued by the Welsh Ministers in relation to this section.’.

Tudalen 9, ar ôl llinell 33, mewnodoser adran newydd—

’( ) Mynediad i fangre

(1) Yn yr adran hon—

(a) ystyr “cynrychiolydd awdurdodedig” yw unrhyw berson sydd wedi ei awdurdodi gan Gorff Llais y Dinesydd i fynd i mewn i fangre,

(b) ystyr “mangre wedi’i heithrio” yw—

   (i) rhannau o gartref gofal nad ydynt yn fannau cymunedol,
   (ii) mangre neu rannau o fangre a ddefnyddir yn lle fwy llygreig y gyflogeion corff GIG, gyflogeion awdurdod lleol neu gyflogeion corff arall sy’n darparu gwasanaethau iechyd neu wasanaethau cymdeithasol yn y fangre,
   (iii) mangre a feddiennir gan un neu ragor o bersonau fel ei gartref ac y mae o leiaf un o’r personau hynnyn yn meddiannu o dan denantiaeth neu drwydded,

(c) ystyr “mangre” yw—

   (i) unrhyw fangre sydd o dan berchenogaeth neu o dan reolaeth corff GIG neu awdurdod lleol lle y darperir gwasanaethau iechyd neu wasanaethau cymdeithasol,
   (ii) unrhyw fangre arall lle y darperir gwasanaethau iechyd neu wasanaethau cymdeithasol gan gorff GIG neu awdurdod lleol.

(2) Caiff cynrychiolydd awdurdodedig Corff Llais y Dinesydd, at ddibenion cynnal unrhyw un neu ragor o swyddogaethau Corff Llais y Dinesydd—

(a) mynd i fangre i’w gweld, a
Angela Burns

Page 9, after line 33, insert a new section—

‘( ) Duty to provide information, advice and training to volunteers and staff of Citizen Voice Body

Cynulliad Cenedlaethol Cymru
National Assembly for Wales
(1) The Citizen Voice Body must secure the provision of information, advice and training to its volunteers and staff.

(2) In exercising its functions under this section, the Citizen Voice Body must have regard to any guidance given from time to time by the Welsh Ministers.’.

Angela Burns

Page 10, after line 32, insert a new section—

‘( ) Guidance given by the Welsh Ministers

(1) The Welsh Ministers must issue guidance in relation to the duty set out in section [section to be inserted by amendment 50] of this Part.

(2) A relevant body must have regard to the guidance issued by the Welsh Ministers under subsection (1).’.

Angela Burns

Section 23, page 11, line 27, after ‘Act’, insert ‘, save for section 16(second subsection to be inserted by amendment 75),’.

Adran 23, tudalen 11, llinell 27, ar ól ‘hon’, mewnodsoder ‘ac eithrio adran 16(ail is-adran i’w mewnodsod gan welliant 75)’.
‘National Assembly for Wales as follows—

(a) one member to be selected from the area of each Local Health Board. Each such member shall also sit on the regional body for that area, and

(b) between three and five additional members to be appointed from the general public from a range of professional backgrounds, one of which must be a solicitor or barrister qualified to practice in England and Wales.

() No person can be appointed as a member of the Citizen Voice Body if they are connected to an NHS body or a local authority.

() For the purposes of this paragraph, “connected” means to be a member, director, or trustee of an NHS body or local authority.

Atodlen 1, tudalen 13, llinell 17, hepgorer ‘Gweinidogion Cymru sydd i benodi’r aelodau’ a mewnosoder—

‘Cynulliad Cenedlaethol Cymru sydd i benodi’r aelodau fel a ganlyn—

(a) un aelod i’w ethol o ardal pob Bwrdd Iechyd Lleol. Rhaid i bob aelod hefyd eistedd ar y corff rhanbarthol ar gyfer yr ardal honno, a

(b) rhwng tri a phump aelod ychwanegol i’w hethol o blith y cyhoedd yn gyffredinol o ystod o gefndiroedd proffesiynol, a rhaid i un ohonynt fod yn gyfreithiwr neu’n fargyfreithiwr sydd wedi cymhwyso i ymarfer yng Nghymru a Lloegr.

() Ni chanateir penodi person yn aelod o Gorff Llais y Dinesydd os yw’n gysylltiedig â chorff GIG neu awdurddod lleol.

() At ddibenion y paragraff hwn, ystyr “cysylltiedig” yw bod yn aelod, yn gyfarwyddwr, neu’n ymddiriedolwr corff GIG neu awdurddod lleol’.

Angela Burns

Schedule 1, page 13, after line 18, insert—

‘() In making an appointment in accordance with paragraph 2(1)(c), the Welsh Ministers must have regard to the importance of having local representation for the areas covered by each of the Local Health Boards in Wales.’.

Atodlen 1, tudalen 13, ar ôl llinell 17, mewnosoder—

‘() Wrth wneud penodiad yn unol â pharagraff 2(1)(c), rhaid i Weinidogion Cymru roi sylw i bwysigrywdd cael cynrychiolaeth leol ar gyfer yr ardaloedd a gwmpesir gan bob un o’r Byrddau Iechyd Lleol yng Nghymru.’

Angela Burns

Schedule 1, page 13, after line 23, insert—
The Body must establish regional bodies reflecting the health board structure within Wales, each of which will be known as the Citizen Voice Body for the area in which each of them operates (referred to in this Schedule as the “regional bodies”). The area of operation for each of the regional bodies is the same as the areas covered by each of the Local Health Boards in Wales.

The Body must make rules to regulate the procedure of the regional bodies (including quorum). Such rules must include provision that—

(a) one third of the members of each of the regional bodies must be appointed by the Welsh Ministers,
(b) one third of the members of each of the regional bodies must be appointed from voluntary organisations,
(c) one third of the members of each of the regional bodies must be appointed from the general public, and
(d) no member of any regional body may be connected to an NHS body or a local authority.

For the purposes of this paragraph—

(a) “voluntary organisations” means a voluntary organisation within the area of operation of the regional bodies that is determined by the Welsh Ministers as having sufficient interest in the provision of health or social services within that area, and
(b) “connected” means to be a member, director, or trustee of an NHS body or local authority.

Atodlen 1, tudalen 13, ar ôl llinell 22, mewnodoser—

Rhad i’r Corff sefydlu cyrff rhanbarthol i adlewyrchu strwythur y byrddau iechyd yng Nghymru, y cyfeirir at bob un fel Corff Llais y Dinesydd ar gyfer yr ardal y mae pob un yn gweithredu ynddi (y cyfeirir atynt yn yr Atodlen hon fel y “cyrff rhanbarthol”). Mae’r ardal gweithredu ar gyfer pob un o’r cyrff rhanbarthol yr un peth â’r ardaloedd ar gyfer pob un o’r Byrddau Iechyd Lleol yng Nghymru.

Rhad i’r Corff wneud rheolau i reoleiddio gweithdrefn y cyrff rhanbarthol (gan gynnwys cwarwm). Rhaid i reolau o’r fath gynnwys darpariaeth sy’n nodi—

(a) bod yn rhaid i draen o’r aerolau ar gyfer pob corff rhanbarthol gael eu penodi gan Weinidogion Cymru,
(b) bod yn rhaid i draen o’r aerolau ar gyfer pob corff rhanbarthol gael eu penodi gan sefydliadau gwirfoddol,
(c) bod yn rhaid i draen o’r aerolau ar gyfer pob corff rhanbarthol gael eu penodi gan y cyhoedd yn, a
(d) na chaniateir i unrhyw gorff rhanbarthol fod yn gysylltiedig â chorff GIG nac awdurdod lleol.

At ddibenion y paragraff hwn—
(a) ystyr “sefydliadau gwirfoddol” yw sefydliad gwirfoddol o fewn ardal weithredu cyrff rhanbarthol a bennir gan Weinidogion Cymru fel un sydd â digon o ddiddordeb yn y gwasanaethau iechyd neu gymdeithasol a ddarperir o fewn yr ardal honno

(b) ystyr “cysylltiedig” yw bod yn aelod, yn gyfarwyddwr, neu’n ymddiriedolwr corff GIG neu awdurdod lleol.’.

Angela Burns

Schedule 1, page 14, after line 31, insert—

‘Indemnity cover

(1) The Welsh Ministers must make regulations for the purpose of providing that, in prescribed circumstances, the Citizen Voice Body must hold approved indemnity cover for the benefit of its staff and volunteers.

(2) For the purposes of this paragraph—

“approved body” (“corff cymeradwy”) means a person or persons approved in relation to indemnity cover of any description, after such consultation as may be prescribed, by the Welsh Ministers or by such other person as may be prescribed,

“approved indemnity cover” (“sicrwydd indemniad cymeradwy”) means indemnity cover made—

(a) on prescribed terms, and

(b) with an approved body,

“indemnity cover” (“sicrwydd indemniad”), in relation to a person who is a volunteer with, or a member of staff of, the Citizen Voice Body, means a contract of insurance or other arrangement made for the purpose of indemnifying them, and any person prescribed in relation to them, to any prescribed extent against any liability which arises out of the provision of services in accordance with arrangements made by the Citizen Voice Body with them.’.

Atodlen 1, tudalen 14, ar ôl llinell 30, mewnysoder—

‘Sicrwydd indemniad

(1) Rhaid i Weinidogion Cymru wneud rheoliadau at ddibenion darparu bod yn rhaid bod gan Gorff Llais y Dinesydd, o dan amgylchiadau rhagnodedig, sicrwydd indemniad cymeradwy er lles ei staff a’i wirfoddolwyr.

(2) At ddibenion y paragraff hwn—

ystyr “corff cymeradwy” ("approved body") yw person neu bersonau cymeradwy mewn perthynas â sicrwydd indemniad o unrhyw ddisgrifiad, ar ôl unrhyw ymgyngoridau a ragnodir, gan Weinidogion Cymru neu gan unrhyw berson arall a ragnodir,
ystyr “sicrwydd indemniad” (“indemnity cover”), mewn perthynas â pherson sy’n wirfoddolwr gyda Chorff Llais y Dinesydd, neu sy’n aelod o staff y Corff hwnnw, yw contract yswiriant neu drefniant arall a wneir at ddiben eu hindemnio, ac unrhyw berson arall a ragnodir mewn perthynas â hwy, i unrhyw raddau rhagnodedig yn erbyn unrhyw atebolrwydd sy’n deillio o ddarparu gwasanaethau yn unol â threfniadau a wneir gyda hwy gan Gorff Llais y Dinesydd,
ystyr “sicrwydd indemnity cymeradwy” (“approved indemnity cover”) yw sicrwydd indemnity a wneir—
   (a) ar delerau rhagnodedig, a
   (b) gyda chorff cymeradwy.’.

Angela Burns 84
Schedule 1, page 16, line 8, leave out ‘may’ and insert ‘must’.
Atodlen 1, tudalen 16, llinell 8, hepgorer ‘Caiff Gweinidogion’ a mewnosoder ‘Rhaid i Weinidogion’.

Angela Burns 85
Schedule 1, page 16, line 9, after ‘appropriate’, insert ‘and ensure that the Citizen Voice Body has sufficient resources to undertake its functions effectively’.
Atodlen 1, tudalen 16, llinell 10, ar ôl ‘briodol’, mewnosoder ‘a sicrhau bod gan Gorff Llais y dinesydd ddigon o adnoddau i gyflawni ei swyddogaethau yn effeithiol’. 