

Cynulliad Cenedlaethol Cymru
Pwyllgor Archwilio

The National Assembly for Wales
Audit Committee

Lleihau'r Incwm a Gollir o Daliadau Presgripsiwn
Reducing Lost Income from Prescription Charges

Cwestiynau 1-25
Questions 1-25

Dydd Iau 27 Mawrth 2003
Thursday 27 March 2003

Aelodau o'r Cynulliad yn bresennol: Dafydd Wigley (Cadeirydd), Eleanor Burnham, Alun Cairns, Janet Davies, Jocelyn Davies, Janice Gregory, Alison Halford, Ann Jones.

Swyddogion yn bresennol: Syr John Bourn, Archwilydd Cyffredinol Cymru; Frank Grogan, Swyddfa Archwilio Genedlaethol Cymru; David Powell, Swyddog Cydymffurfio Cynulliad Cenedlaethol Cymru.

Tystion: Ann Lloyd, Cyfarwyddwr GIG Cymru; Ian Gibson, Pennaeth Dros Dro Cangen Llywodraethu Corfforaethol y GIG, Is-adran Cyllid y Gwasanaeth Iechyd Gwladol, Cynulliad Cenedlaethol Cymru.

Assembly Members present: Dafydd Wigley (Chair), Eleanor Burnham, Alun Cairns, Janet Davies, Jocelyn Davies, Janice Gregory, Alison Halford, Ann Jones.

Officials present: Sir John Bourn, Auditor General for Wales; Frank Grogan, National Audit Office Wales; David Powell, National Assembly for Wales Compliance Officer.

Witnesses: Ann Lloyd, Director, NHS Wales; Ian Gibson, Acting Head of the NHS Corporate Governance Branch, National Health Service Finance Division, National Assembly for Wales.

*Dechreuodd y sesiwn cymryd tystiolaeth am 10.27 a.m.
The evidence-taking session began at 10.27 a.m.*

[1] **Dafydd Wigley:** Symudwn ymlaen at yr eitem nesaf ar yr agenda, sef sesiwn tystiolaeth ar leihau'r incwm a gollwyd o daliadau presgripsiwn. Mae'r eitem hon, wrth gwrs, yn adeiladu ar yr hyn yr ydym wedi bod yn ei drafod eisoes.

[2] **Ann Jones:** Sorry, Chair, but the simultaneous translation is not working.

[3] **Dafydd Wigley:** Is the translation not working at all at the moment?

[4] **Jocelyn Davies:** My headphones are working.

[5] **Dafydd Wigley:** It seems that it is working for some, but not for others. If there is a problem, no doubt that can be sorted out during the break.

The Committee will be considering the memorandum that we have before us on progress on the loss of income relating to prescription charges. I welcome our new witnesses, and invite you to introduce yourselves.

Mr Gibson: My name is Ian Gibson, and I am the acting head of the corporate governance branch in the National Health Service Finance Division.

[1] **Dafydd Wigley:** We will move on to the next item on the agenda, which is the evidence session on reducing lost income from prescription payments. This item, of course, builds on what we have been discussing already.

[2] **Ann Jones:** Mae'n ddrwg gennyf, Gadeirydd, ond nid yw'r offer cyfieithu ar y pryd yn gweithio.

[3] **Dafydd Wigley:** Onid yw'r offer cyfieithu'n gweithio o gwbl ar hyn o bryd?

[4] **Jocelyn Davies:** Mae fy nghlustffonau i'n gweithio.

[5] **Dafydd Wigley:** Ymddengys ei fod yn gweithio i rai, ond nid i eraill. Os oes problem, mae'n siwr y gellir ei datrys yn ystod yr egwyl.

Bydd y Pwyllgor yn ystyried y memorandwm sydd ger ein bron ar gynnydd o ran yr incwm a gollir yn sgîl taliadau presgripsiwn. Croesawaf ein tystion newydd ac fe'ch gwahoddaf i gyflwyno eich hunain.

Mr Gibson: Fy enw i yw Ian Gibson, a fi yw pennaeth dros dro y gangen llywodraethu corfforaethol yn Is-adran Cyllid y Gwasanaeth Iechyd Gwladol.

[6] **Dafydd Wigley:** Your colleague, Chris Brown, is not with us on this issue?

Ms Lloyd: No, he is not with us on this issue.

[7] **Dafydd Wigley:** Right. Alison, would you like to start the questioning?

[8] **Alison Halford:** Certainly. Ms Lloyd, it is good news that the losses have been reduced to £8 million. That is excellent and very commendable. What steps have you taken to effectively reduce the amount of income lost from prescription charges? This refers to paragraphs 7 and 8 of the Auditor General's memorandum.

Ms Lloyd: There has been considerable partnership with the NHS Counter Fraud Service and it has been incredibly helpful to us, because it has looked at our policies and has advised us on best practice. It has provided us with training so that we are now able to take that forward on our own. It has helped us with inspection and intelligence about what the latest fraud areas are. It has been very helpful indeed.

We have also ensured that we have had local counter-fraud offices established within the organisations, which can help the managers to be able to highlight the areas of difficulty that we might have. We have professionally-trained specialists covering each health authority and trust. That has been very helpful indeed, because what we found was that people needed instant access to expert advice, and they needed to be able to be trained to do this properly. We have had some charters signed between the patient groups and some of the professional organisations about using services effectively and well. We have improved ways of working with pharmacists and I think that that has been effective too. We have also strengthened

[6] **Dafydd Wigley:** Nid yw eich cydweithiwr, Chris Brown, gyda ni ar y mater hwn?

Ms Lloyd: Na, nid yw gyda ni ar y mater hwn.

[7] **Dafydd Wigley:** Iawn. Alison, a hoffech gychwyn ar y cwestiynau?

[8] **Alison Halford:** Yn sicr. Ms Lloyd, newyddion da yw bod y colledion wedi'u gostwng i £8 miliwn. Mae hynny'n rhagorol ac i'w gannol yn fawr. Pa gamau yr ydych wedi eu cymryd i ostwng yn effeithiol gyfanswm yr incwm a gollir o daliadau presgripsiwn? Mae hyn yn cyfeirio at baragraffau 7 a 8 memorandwm yr Archwilydd Cyffredinol.

Ms Lloyd: Bu partneriaeth arwyddocaol â Gwasanaeth Gwrth Dwyll y GIG ac mae wedi bod yn ddefnyddiol iawn i ni, oherwydd mae wedi edrych ar ein polisïau ac wedi'n cynghori ar arferion gorau. Mae wedi darparu hyfforddiant i ni fel ein bod bellach yn gallu bwrw ymlaen â hynny ein hunain. Mae wedi'n cynorthwyo ym maes archwilio a chudd-wybodaeth ynghylch beth yw'r meysydd twyll diweddaraf. Mae wedi bod yn ddefnyddiol iawn, yn wir.

Yr ydym hefyd wedi sicrhau ein bod wedi sefydlu swyddfeydd gwrth-dwyll lleol o fewn y sefydliadau, a all gynorthwyo'r rheolwyr i allu amlygu'r meysydd lle y gallem wynebuanawsterau. Mae gennym arbenigwyr sydd wedi'u hyfforddi'n broffesiynol ar gyfer pob un awdurdod ac ymddiriedolaeth iechyd. Mae hynny wedi bod yn ddefnyddiol iawn yn wir, oherwydd canfuom fod pobl angen mynediad ar unwaith at gyngor arbenigol, ac yr oeddent angen gallu derbyn hyfforddiant i wneud hyn yn iawn. Mae rhai siarteri wedi'u harwyddo rhwng y grwpiau cleifion a rhai o'r sefydliadau proffesiynol ynglyn â defnyddio gwasanaethau'n effeithiol ac yn dda. Yr ydym wedi gwella ffyrdd o gydweithio â fferyllwyr a chredaf y bu hynny'n

measures to investigate and follow up fraud, and we now have our own post-payment verification unit established in Health Solutions Wales, which can keep a check on whether legitimate claims have been made, and, if not, where these are recurring, and, again, ensure that the information is fed through to the localities so that they can take the necessary action, and work with our NHS counter-fraud offices, the central ones.

[9] **Alison Halford:** In that very impressive answer, Ms Lloyd, you only left out one thing, so I will just nudge your memory on that if I may. Have you any comments on the extent and impact of penalty charges imposed by the post-payment verification team?

Ms Lloyd: Well, we do not have any evidence yet on the impact of that particular initiative. However, certainly, it was an initiative suggested very strongly to us by the NHS Counter Fraud Service. This has now been implemented. It has, we believe, led to a greater awareness of the problem, both among the public and among pharmacists. They are now aware that we are watching this very carefully, and I think that that has been the greatest message that has come through the sanctions. So people are, from their behaviour, being far more careful. We are very much looking at issues such as why payments are made that are not justifiable. Sometimes it is because of error, so we are working hard on error rate as well. However, certainly, those who wish to defraud are very well aware of the actions that we will take.

[10] **Eleanor Burnham:** May I come in on this?

effeithiol hefyd. Yr ydym hefyd wedi cryfhau mesurau i ymchwilio a mynd i'r afael â thwyll, ac erbyn hyn mae gennym ein huned gwirio ôl-daliadau ein hunain a sefydlwyd yn Atebion Iechyd Cymru, sy'n gallu cadw llygad i weld a wnaethpwyd ceisiadau teg, ac, os na wnaed, ymhle mae'r rhain yn ailddigwydd, ac, eto, sicrhau bod y wybodaeth yn cael ei bwydo i'r cymdogaethau er mwyn iddynt allu cymryd y camau angenrheidiol, a gweithio ar y cyd â'n swyddfeydd gwrth-dwyll y GIG, y rhai canolog.

[9] **Alison Halford:** Yn yr ateb trawiadol iawn hwnnw, Ms Lloyd, un peth yn unig a gafodd ei hepgor gennych, felly yr wyf am eich atgoffa os caf fi. A oes gennych unrhyw sylwadau ar hyd a lled ac effaith y cosbau ariannol a ddynodwyd gan yr uned gwirio ôl-daliadau?

Ms Lloyd: Wel, nid oes gennym unrhyw dystiolaeth eto o effaith y fenter benodol honno. Fodd bynnag, yn sicr, yr oedd yn fenter a awgrymwyd yn gryf iawn i ni gan Wasanaeth Gwrth Dwyll y GIG. Mae hon wedi'i rhoi ar waith bellach. Y mae, yn ein barn ni, wedi arwain at gynnydd yn yr ymwybyddiaeth o'r broblem, ymhlith y cyhoedd ac ymhlith fferyllwyr. Maent yn ymwybodol yn awr ein bod yn cadw llygad barcud ar hyn, a chredaf mai honno yw'r neges amlycaf sydd wedi deillio o'r cosbau. Felly mae pobl, o'u hymddygiad, yn llawer mwy gofalus. Yr ydym yn edrych ar faterion fel pam bod taliadau na ellir eu cyfiawnhau'n cael eu gwneud. Mae hyn weithiau oherwydd camgymeriad, felly yr ydym yn gweithio'n galed ar gyfradd y camgymeriadau hefyd. Fodd bynnag, yn sicr, mae'r rheini sy'n dymuno twyllo yn ymwybodol iawn o'r camau y byddwn yn eu cymryd.

[10] **Eleanor Burnham:** A gaf fi gyfrannu yma?

[11] **Dafydd Wigley:** Very briefly, Eleanor. I am being generous with you.

[12] **Eleanor Burnham:** Thank you very much for your generosity, Chair. Ms Lloyd, you mentioned earlier the complexity of all the payment systems, reimbursement and so on. Do you not think that we should simplify everything so that it is even less likely that people inadvertently make mistakes or get caught in this scenario?

Ms Lloyd: Well, as I said previously, it is highly complicated. We want to simplify it, but I think that this issue of fraud within the system is actually slightly different. There is a margin of error; we are highlighting that with our post-payment verification unit, to see to what extent there is a genuine margin of error, in what areas that arises, and how we can therefore give better instruction and training to overcome that. However, the vast majority is not in that category.

[13] **Dafydd Wigley:** Janet, do you want to take the questioning on?

[14] **Janet Davies:** Yes. If we turn to paragraph 2 of the memorandum, it refers to a range of factors that contributed to the shortfall in income from prescription charges. Of this estimated loss in income of £8 million, what proportion do you attribute to deliberate fraud as opposed to simple error on the part of patients, or inaccurate checks on the part of pharmacists?

[11] **Dafydd Wigley:** Yn gryno iawn, Eleanor. Yr wyf yn bod yn hael â chi.

[12] **Eleanor Burnham:** Diolch yn fawr iawn am eich haelioni, Gadeirydd. Ms Lloyd, awgrymasoch yn gynharach gymhlethdod yr holl systemau talu, ad-dalu ac ati. Onid ydych yn credu y dylem symleiddio popeth fel ei bod hyd yn oed yn llai tebygol bod pobl yn gwneud camgymeriadau'n anfwriadol neu'n cael eu dal yn y sefyllfa hon?

Ms Lloyd: Wel, fel y soniais eisoes, y mae'n gymhleth iawn. Yr ydym am ei symleiddio, ond credaf fod y mater hwn o dwyll o fewn y system ychydig yn wahanol mewn gwirionedd. Mae lle ar gyfer camgymeriadau; yr ydym yn amlygu hynny gyda'n huned gwirio ôl-daliadau, i weld i ba raddau y mae lle dilys ar gyfer camgymeriadau, ym mha feysydd y mae hynny'n digwydd, a sut y gallwn felly roi gwell cyfarwyddyd a hyfforddiant i oresgyn hynny. Fodd bynnag, nid yw'r mwyafrif llethol yn y categori hwnnw.

[13] **Dafydd Wigley:** Janet, a ydych am fynd ymlaen â'r holi?

[14] **Janet Davies:** Ydw. Os ydym yn troi at baragraff 2 y memorandwm, mae'n cyfeirio at amrywiaeth o ffactorau sydd wedi cyfrannu at y diffyg mewn incwm o daliadau presgripsiwn. O'r amcangyfrif hwn bod £8 miliwn o incwm wedi'i golli, pa gyfran yr ydych yn ei briodoli i dwyll bwriadol yn hytrach na chamgymeriad syml ar ran y cleifion, neu archwiliadau anghywir o du'r fferyllwyr?

Ms Lloyd: The post-payment verification unit at Health Solutions Wales is undertaking that analysis for us at the present time. However, it does not think that error—this is its initial belief—is an enormous part of it. There has also been a significant drop in the number of incorrect claims.

[15] **Janet Davies:** Right, so if there has been a significant drop, it would suggest that the unit has already had some effect, even though it is still investigating. You said that it is beginning to come to terms with what is happening. Are you aware of anything that is being done to address problems with fraud particularly and to reduce the level of patient error, or the inaccuracy of pharmacists' checks? Can you go into detail on that, or have we not got to that point yet?

Ms Lloyd: Do you want to take this, Ian?

Mr Gibson: Certainly, in terms of pharmacists, I know that training awareness sessions have been put in place through our links with the NHS Counter Fraud Service. I know that the issue regarding the pharmacists' reward scheme is currently being reviewed and the results of that review should be available in April. So there are things going on that are improving that aspect of the whole process.

[16] **Dafydd Wigley:** Val?

[17] **Val Lloyd:** Ms Lloyd, I am jumping back to paragraph 8 again. I wondered if you could expand on the value of the work of this Committee and of the Auditor General in helping to identify the problem and recommend measures to help reduce the amount of income lost.

Ms Lloyd: Mae uned gwirio ôl-daliadau Atebion Iechyd Cymru yn cynnal y dadansoddiad hwnnw i ni ar hyn o bryd. Fodd bynnag, nid yw'n credu bod camgymeriadau—dyma ei gred gychwynnol—yn rhan enfawr ohono. Cafwyd gostyngiad sylweddol hefyd yn nifer y ceisiadau anghywir.

[15] **Janet Davies:** Iawn, felly os cafwyd gostyngiad sylweddol, byddai'n awgrymu y cafodd yr uned rywfaint o effaith yn barod, er ei bod yn parhau i ymchwilio. Dywedasocho ei bod yn dechrau dod i delerau â'r hyn sy'n digwydd. A ydych yn ymwybodol o unrhyw beth sy'n cael ei wneud i fynd i'r afael â phroblemau twyll yn benodol ac i ostwng lefel camgymeriadau cleifion, neu wallusrwydd archwiliadau fferyllwyr? A allwch fanylu ar hynny, neu onid ydym wedi cyrraedd y pwynt hwnnw eto?

Ms Lloyd: A ydych am gyfrannu yma, Ian?

Mr Gibson: Yn sicr, o ran fferyllwyr, gwn fod sesiynau ymwybyddiaeth o hyfforddiant wedi'u sefydlu drwy ein cysylltiadau â Gwasanaeth Gwrth Dwyll y GIG. Gwn fod y mater sy'n ymwneud â'r cynllun gwobrwyo fferyllwyr yn cael ei adolygu ar hyn o bryd a dylai canlyniadau'r adolygiad hwnnw fod ar gael ym mis Ebrill. Felly mae pethau'n digwydd sy'n gwella'r agwedd honno ar y broses gyfan.

[16] **Dafydd Wigley:** Val?

[17] **Val Lloyd:** Ms Lloyd, yr wyf yn neidio'n ôl at baragraff 8 eto. Tybed a allwch ymhelaethu ar werth gwaith y Pwyllgor hwn a'r Archwilydd Cyffredinol wrth helpu i nodi'r broblem ac argymhell mesurau i gynorthwyo i ostwng cyfanswm yr incwm a gollir.

Ms Lloyd: I think that the value is extremely high. It was a very important issue and the Committee, working with the Auditor General, has provided us with a very valuable lesson. Certainly, the information that came from the report and the Committee's work in terms of what might work to help overcome some of these problems has been extremely helpful, and it is evidenced by the drop that we have seen in the results. We still need to go further, because we need to reduce that number further. I think that the checks that we have put in place, the extra training and the heightened awareness around the NHS in Wales and the primary care community is all working to reduce the £8 million further.

[18] **Val Lloyd:** Do you have a timetable by which any outstanding recommendations will be achieved?

Ms Lloyd: Yes, we do. Ian would you like to answer that?

Mr Gibson: The recommendations arising from the previous report?

[19] **Val Lloyd:** Yes.

Mr Gibson: I think, if I remember rightly, that the final recommendation, which refers to age being put on prescriptions automatically, will be in place by December of this year.

[20] **Dafydd Wigley:** Thank you for your positive comments on the role of the Committee and the audit team. I am sure that that is appreciated. Janet, you have a question?

Ms Lloyd: Credaf fod y gwerth yn uchel iawn. Yr oedd yn fater pwysig iawn ac mae'r Pwyllgor, gan weithio â'r Archwilydd Cyffredinol, wedi dysgu gwrs werthfawr iawn i ni. Yn sicr, mae'r wybodaeth a ddeilliodd o'r adroddiad a gwaith y Pwyllgor o ran beth a allai weithio i gynorthwyo i oresgyn rhai o'r problemau hyn wedi bod yn ddefnyddiol iawn, a chafwyd tystiolaeth o hyn gyda'r gostyngiad yr ydym wedi'i weld yn y canlyniadau. Mae angen i ni fynd ymhellach eto, oherwydd mae angen i ni ostwng y nifer hwnnw ymhellach. Credaf fod yr archwiliadau yr ydym wedi'u sefydlu, yr hyfforddiant ychwanegol a'r ymwybyddiaeth gynyddol ynghylch y GIG yng Nghymru a'r gymuned ofal sylfaenol i gyd yn gweithio i ostwng yr £8 miliwn ymhellach.

[18] **Val Lloyd:** A oes gennych amserlen i gyflawni unrhyw argymhellion sydd heb eu cyflawni eto?

Ms Lloyd: Oes, mae gennym. Ian a hoffech ateb hynny?

Mr Gibson: Yr argymhellion sy'n deillio o'r adroddiad blaenorol?

[19] **Val Lloyd:** Ie.

Mr Gibson: Credaf, os gallaf gofio'n iawn, y bydd yr argymhelliad terfynol, sy'n cyfeirio at roi oedran ar bresgripsiynau yn awtomatig, yn cael ei roi ar waith erbyn mis Rhagfyr eleni.

[20] **Dafydd Wigley:** Diolch am eich sylwadau positif ar rôl y Pwyllgor a'r tîm archwilio. Yr wyf yn sicr y gwerthfawrogir hynny. Janet, mae gennych gwestiwn?

[21] **Janet Davies:** On paragraph 9—not of this report, I am afraid, but do not worry about that—of the Auditor General’s previous memorandum in December about continuing progress on reducing lost income, how are you going to keep the momentum going to ensure that the figure for lost income continues to reduce?

Ms Lloyd: I think that we will ensure that by continuing with the schemes that we have in place. I think that the work arising from Health Solutions Wales in terms of looking at the claims being made, highlighting where errors have been made and looking at where the core of the problem lies as well as disseminating that information to the service and to the localities, can only help to continue this heightened awareness and to highlight where the real issues are arising throughout Wales. It is grand when you start off on a scheme because everyone gets enthusiastic and puts in place double the amount of checks. However, maintaining that momentum is now very important for us. That is why it has been important for us to get locally-owned schemes and locally-available evidence and intelligence, and for us at the Assembly to continue to impress upon the local health boards the real importance of reducing this problem. That is the way in which we will continue to place it as a high priority, because we must not lose the momentum.

[22] **Janet Davies:** In fact, it is always easier to reduce loss of income initially; it gets harder and harder as time goes on.

Ms Lloyd: That is right.

[23] **Janet Davies:** Would you consider putting in place a target for reducing income year on year?

[21] **Janet Davies:** O ran paragraff 9—nid o’r adroddiad hwn, yn anffodus, ond peidiwch â phoeni am hynny—o femorandwm blaenorol yr Archwilydd Cyffredinol ym mis Rhagfyr am y cynnydd parhaus ar ostwng yr incwm a gollir, sut yr ydych am gynnal y momentwm er mwyn sicrhau y parheir i ostwng y ffigur ar gyfer yr incwm a gollir?

Ms Lloyd: Credaf y byddwn yn sicrhau hynny drwy barhau â’r cynlluniau sydd gennym ar waith. Credaf y bydd y gwaith sy’n deillio o Atebion Iechyd Cymru o ran edrych ar y ceisiadau a wneir, gan amlygu lle y gwnaed camgymeriadau ac edrych ar wraidd y broblem yn ogystal â lledaenu’r wybodaeth honno i’r gwasanaeth ac i’r cymdogaethau, ond yn cynorthwyo i barhau â’r ymwybyddiaeth gynyddol ac amlygu lle mae’r materion gwirioneddol yn codi ledled Cymru. Mae’n sefyllfa ddelfrydol wrth gychwyn cynllun oherwydd mae pawb yn frwdfrydig ac yn cynnal dwywaith gymaint o archwiliadau. Fodd bynnag, mae cynnal y momentwm yn bwysig iawn i ni bellach. Dyna pam ei bod wedi bod yn bwysig i ni gael cynlluniau lleol a thystiolaeth a deallusrwydd sydd ar gael yn lleol, ac i ni yn y Cynulliad barhau i bwysleisio gwir bwysigrwydd gostwng y broblem hon i’r byrddau iechyd lleol. Dyna’r ffordd y byddwn yn parhau i’w ystyried fel blaenoriaeth uchel, oherwydd rhaid inni beidio a cholli’r momentwm.

[22] **Janet Davies:** Mewn gwirionedd, mae wastad yn haws gostwng yr incwm a gollir yn y lle cyntaf; mae’n mynd yn anoddach ac yn anoddach gydag amser.

Ms Lloyd: Mae hynny’n wir.

[23] **Janet Davies:** A fydddech yn ystyried gosod targed ar gyfer gostwng incwm flwyddyn ar ôl blwyddyn?

Ms Lloyd: I think that I would prefer to consider a target when we know, from the work that Health Solutions Wales is undertaking, what proportion is now down to fraud and what proportion is down to error so that we know that we can probably improve the error rate and how much more work needs to be done in terms of the actual fraud being perpetrated.

[24] **Dafydd Wigley:** I suspect that I would be pushing my luck if I asked whether we could get that figure down to £4 million.

Ms Lloyd: I hope that we will. We need to eradicate this.

[25] **Dafydd Wigley:** Yes, indeed. I congratulate you on the work that you have done and the way in which £7 million or £8 million has already been saved. That is a significant amount of money and it is to your credit and to the credit of your department and the team that worked on it that that has been achieved. We appreciate that. I would be very grateful if you passed on our congratulations.

I thank you for answering questions in this fairly brief and focused session looking at how this matter is progressing. No doubt, you will have another look in due course. However, it is gratifying to see the progress that is being made. Once again, a draft transcript will be sent to you so that you can correct any factual inaccuracies. It will be published as part of our minutes and included as an attachment to our report in due course. I thank both of you for your presence in this part of our meeting. I think that you will be back again for the next part, but we will now break for coffee.

Ms Lloyd: Credaf y byddai'n well gennyf ystyried targed pan fyddwn yn gwybod, o waith a gyflawnir gan Atebion Iechyd Cymru, pa gyfran sy'n deillio o dwyll a pha gyfran sy'n deillio o gamgymeriadau er mwyn i ni gael gwybod y byddwn yn ôl pob tebyg yn gallu gwella'r gyfradd gamgymeriadau a faint o waith ychwanegol sydd angen ei wneud o ran atal y twyll mewn gwirionedd.

[24] **Dafydd Wigley:** Yr wyf yn amau y byddwn yn hy pe bawn yn gofyn a fyddai modd cael y ffigur hwnnw i lawr i £4 miliwn.

Ms Lloyd: Gobeithiaf y gwnawn. Mae angen i ni gael gwared ar hyn.

[25] **Dafydd Wigley:** Oes, yn wir. Yr wyf yn eich llongyfarch am y gwaith yr ydych wedi'i wneud a'r ffordd y mae £7 miliwn neu £8 miliwn wedi'i arbed yn barod. Mae'n swm sylweddol o arian a dylid rhoi clod i'ch adran a'r tîm a weithiodd arno am gyflawni hynny. Yr ydym yn gwerthfawrogi hynny. Byddwn yn gwerthfawrogi pe baech yn eu llongyfarch ar ein rhan.

Diolch i chi am ateb cwestiynau yn y sesiwn gweddol gryno hon a oedd yn edrych ar sut mae'r mater hwn yn symud yn ei flaen. Mae'n debyg y byddwch yn edrych ar y mater eto maes o law. Fodd bynnag, mae'n foddhaol gweld y cynnydd sydd wedi'i wneud. Unwaith eto, bydd trawsgrifiad drafft yn cael ei anfon atoch er mwyn i chi allu cywiro unrhyw wallau ffeithiol. Bydd yn cael ei gyhoeddi fel rhan o'n cofnodion ac yn cael ei gynnwys fel atodiad i'n hadroddiad yn ei dro. Diolch i chi'ch dau am fod yn bresennol yn y rhan hon o'n cyfarfod. Credaf y byddwch yn dychwelyd eto ar gyfer y rhan nesaf, ond fe gawn egwyl am goffi yn awr.

Daeth y sesiwn cymryd tystiolaeth i ben am 10.41 a.m.
The evidence-taking session ended at 10.41 a.m.