

Agenda – Petitions Committee

Meeting Venue:

Committee Room 1 – Senedd

Meeting date: 7 November 2017

Meeting time: 09.15

For further information contact:

Graeme Francis – Committee Clerk

Kath Thomas – Deputy Clerk

0300 200 6565

SeneddPetitions@assembly.wales

Private (9.15 – 9.30)

1 (9.30) Introduction, apologies, substitutions and declarations of interest

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2 New petitions

2.1 P-05-781 Port Talbot Community Against the Super Prison

(Pages 32 – 42)

2.2 P-05-782 Build a Chepstow Bypass to Remove the Bottle Neck from the M48 onto the A48

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2.3 P-05-783 Ensuring Equality of Curriculum for Welsh Medium Schools e.g. GCSE Psychology

(Pages 49 – 65)

3 Updates to previous petitions

Health

3.1 P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

(Pages 66 – 106)



Education

- 3.2 P-04-628 To improve access to Education and services in British Sign Language (Pages 107 – 108)
- 3.3 P-05-760 Stop Compulsory Welsh Language GCSE (Pages 109 – 111)

Economy and Infrastructure

- 3.4 P-04-688 TATA Steel Port Talbot Power Plant (Pages 112 – 113)
- 3.5 P-05-738 Public Petition for the Dinas Powys By-Pass (Pages 114 – 117)
- 3.6 P-05-748 School Buses for School Children (Pages 118 – 119)
- 3.7 P-05-758 Statue to Honour Billy Boston (Pages 120 – 122)
- 3.8 P-05-776 To recognize the three hundredth anniversary of Williams Pantycelyn (Pages 123 – 126)

Communities and Children

- 3.9 P-05-742 Stop Forsythia Closing (Pages 127 – 130)

Environment and Rural Affairs

- 3.10 P-05-715 A Ban on the Manufacture, Sale and Use of Snares in Wales. (Pages 131 – 138)
- 3.11 P-05-773 Don't Fill Landfill! (Pages 139 – 142)

**Item 4 – Evidence session for P-04-472 Make the MTAN law and P-04-575
Call in All Opencast Mining Planning Applications (10.00 – 10.30)**

Lesley Griffiths AM – Cabinet Secretary for Environment and Rural Affairs

Neil Hemington – Welsh Government, Head of Planning

Joanne Smith – Welsh Government, Senior Planning Manager

4.1 P-04-472 Make the MTAN law

(Page 143)

4.2 P-04-575 Call in All Opencast Mining Planning Applications

(Pages 144 – 154)

Document is Restricted

Agenda Item 1

By virtue of paragraph(s) ix of Standing Order 17.42

Document is Restricted

Agenda Item 2.1

P-05-781 Port Talbot Community Against the Super Prison

This petition was submitted by The Port Talbot Super Prison Protest Group, having collected 1,263 signatures online and 7,528 on paper – a total of 8,791 signatures.

Petition text:

We call on the National Assembly for Wales to urge the Welsh Government not to release or sell land to the UK government for the development of a super prison in Baglan.

The UK Government, with the support of the Welsh Government, proposes to build a 1600 capacity mens' 'super prison' on Baglan Moors.

The site is near to homes and local facilities, local businesses and will place significant strain on roads and health services in the area. The site is in an enterprise zone and designated for economic use as well as being in a flood risk area.

Wales already has a large surplus of prison places with its existing prisons.

This prison would bring with it all of the associated problems with large prisons and there has been no guarantee from either government on what protections would be put in place to help Port Talbot cope with such a large number of prisoners.

There is no long term guarantee that the new prison would remain housing category C prisoners. It could be changed in future to hold more dangerous criminals.

Port Talbot can do better than this and our town deserves much more. Will you sign the petition and tell the UK Government and the Welsh Government, NO to a super prison in Port Talbot?

Assembly Constituency and Region

- Aberavon
- South West Wales

The proposed prison in Baglan

Y Pwyllgor Deisebau | 7 Tachwedd 2017

Petitions Committee | 7 November 2017

Research Briefing:

Petition number: P-05-781

Petition title: Port Talbot Community Against the Super Prison

Text of petition: We call on the National Assembly for Wales to urge the Welsh Government not to release or sell land to the UK government for the development of a super prison in Baglan.

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There is no long term guarantee that the new prison would remain housing category C prisoners. It could be changed in future to hold more dangerous criminals.

Port Talbot can do better than this and our town deserves much more. Will you sign the petition and tell the UK Government and the Welsh Government, NO to a super prison in Port Talbot?

Background

On 22 March 2017, the Lord Chancellor and Secretary of State for Justice announced in a [written statement](#) that four potential sites for new prisons in England and Wales had been identified. One of these sites was in Neath Port Talbot. She noted that "final decisions on

the new prisons will be subject to planning approvals, as well as value for money and affordability.” She went on to note that one of the reasons for building new prisons was to close older and overcrowded prisons.

During a [Westminster Hall debate](#) on 12 September 2017 the prisons Minister, Sam Gyimah MP commented:

When assessing where to build new prisons, the Ministry of Justice worked closely with the Welsh Government to identify suitable sites for a new prison build in Wales. We undertook a comprehensive evaluation of more than 20 sites in south Wales, ensuring that various factors were taken into consideration, such as preference for sites located along the M4 corridor because of their accessibility and the travel time benefits they would bring.

After careful consideration, Port Talbot was selected as the best potential site for a new category C prison build in Wales. That was for a number of reasons, including the capacity of local infrastructure to support the prison and the potential to maximise the benefits of investment in the local community. In addition, the site is owned by the Welsh Government, who are supportive of our work to progress these plans. As I mentioned, supply and demand for prison places are misaligned. For example, we do not have enough category C prison places in south Wales; the proposed prison at Port Talbot would address that shortfall.

There are currently [five prisons in Wales](#) (Prescoed is a satellite prison of HMP Usk):

- [Berwyn](#) (Wrexham)
- [Cardiff](#)
- [Parc](#) (Bridgend)
- [Swansea](#)
- Usk/Prescoed

The most recently opened prison in Wales is HMP Berwyn, Wrexham. It was opened in February 2017. It will provide over 2,000 places when fully operational. There are no prisons for women in Wales, and no prison for the highest risk offenders.

While proponents of the proposed prison in Baglan have stressed the economic benefits, there appears to be considerable local opposition. Issues raised in opposition to the proposal include the impact on the local community and businesses, the impact on public services, transport and the suitability of the land itself for building on. It has also been reported that there are restrictions on the use of the land that could be problematic for the Ministry of Justice should it decide to proceed with the development. Wider issues, such as the effectiveness of larger prisons in reducing reoffending have also been raised.

Welsh Government action

In response to an [urgent question](#) from David Rees AM on 22 March 2017, the Cabinet Secretary for Communities and Children said:

I have had direct discussions with the UK prisons Minister regarding the proposed site for the development of the new prison at Port Talbot. This proposal has the potential to offer south Wales a modern, fit-for-purpose facility that concentrates on rehabilitation, making our communities safer.

He went on to answer a range of questions on the issue from other Members.

The Welsh Government has written to the Chair (October 2017), confirming its previous position and that it recognises the “strength of the petitioners’ views”. The letter notes that the UK Government is responsible for prisons, and any decision to proceed with the development will be subject to the planning process which will provide an opportunity for residents to put their views to councillors.

National Assembly for Wales action

Since March 2017, this issue has been raised by Assembly Members on numerous occasions in the Siambr and in written questions. Issues raised include the impact of a new prison on local services in devolved areas including health, social care, housing, education and transport. Assembly Members have also questioned whether the additional prison places will be used to accommodate prisoners from Wales. The Wales Governance Centre [published research](#) on 22 March 2017 which stated that there would be a surplus of prison places in Wales for Welsh prisoners if the proposed prison in Baglan went ahead.

On 20 September 2017, there was a Plaid Cymru debate on “superprisons” in the Senedd. The motion, amongst other things, called on the Welsh Government to oppose the construction of the prison. During the debate, the Cabinet Secretary for Communities and Children said:

Responsibility for prisons lies with the UK Government. The Welsh Government was approached by the Ministry of Justice as part of an exercise across England and Wales to see if we knew of any land that could be developed for this scale of prison. We supplied a list of 20 sites. [...] We regularly provide this type of service for all businesses and all developers.

He went on to comment that the Welsh Government was not part of the decision process that selected Baglan as the preferred site for a new prison:

Llywydd, we have granted the Ministry of Justice two licences to carry out work on that land. These include ecology mitigation measures and, again, this is normal practice. Developers want to know what the make-up of the land is prior to putting in a planning application. We have also been asked by the Ministry of Justice to discuss an option agreement for the land. We have not sold the land to the Ministry of Justice or come to an agreement regarding the sale or discussed the value. It is not a fait accompli as many have suggested in here and externally, as we’ve heard. If alternative offers for the land come forward, there is nothing to prevent us from assessing the economic benefits of that and accepting a good offer.

The Cabinet Secretary also welcomed the Ministry of Justice’s intention to hold a two-day community event that will give visitors and residents the chance to see and comment on the proposals before a formal planning application is made.

Media coverage

There has been a substantial amount of media coverage of the issue. Links to a number of articles can be found below:

BBC News, 22 March 2017, [*New prison in Port Talbot announced by Ministry of Justice*](#)

BBC News, 21 August 2017, [*Public safety 'priority' in Baglan prison plans, MoJ says*](#)

ITV News, 23 August 2017, [*Former inmate criticises plans for a new 'super prison' in Port Talbot*](#)

BBC News, 20 September 2017, [*Port Talbot prison should be moved to Swansea, says MP*](#)

BBC News, 11 October 2017, [*Baglan prison: Planned site's restriction concern*](#)

BBC News, 25 October 2017, [*Port Talbot prison: Petition against Baglan plan presented*](#)

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.

Carl Sargeant AC/AM
Ysgrifennydd y Cabinet dros Gymunedau a Phlant
Cabinet Secretary for Communities and Children



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref P-05-781
Ein cyf/Our ref CS/01367/17

David J Rowlands AM
Chair - Petitions committee.
National Assembly for Wales
Cardiff Bay
Cardiff Bay
CF99 1NA

SeneddPetitions@assembly.wales

11 October 2017

Dear David

Thank you for your letter 21 September advising me that the Petitions Committee had received a petition from The Port Talbot Super Prison Protest Group.

I recognise the strength of the petitioners' views.

The UK Government is responsible for prisons. The Welsh Government was approached by the Ministry of Justice, as part of an exercise across England and Wales, to see if we knew of any land that could be developed. We often respond to enquiries of this kind from potential developers and we therefore supplied a list of 20 possible sites for their consideration.

The Ministry of Justice will decide where they wish to build a prison and whether to go further on this site. They have committed to listening to local people with a two day community consultation event.

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Carl.Sargeant@llyw.cymru
Correspondence.Carl.Sargeant@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Should the Ministry of Justice then decide to proceed with a planning application, this will be considered by Neath Port Talbot Council. As with all planning applications, this will provide an opportunity for residents to put their views to councillors.

Yours sincerely

A handwritten signature in cursive script, appearing to read 'Carl Sargeant', written in black ink on a light background.

Carl Sargeant AC/AM

Ysgrifennydd y Cabinet dros Gymunedau a Phlant
Cabinet Secretary for Communities and Children

**P-05-781 Port Talbot Community Against the Super Prison –
Correspondence from the petitioner to the Committee, 26.10.17**

Firstly, we, the community of Neath Port Talbot would like to thank the petitions committee for accepting our petition against the proposed Ministry of Justice development of land at Baglan Moors in Port Talbot to build a prison to house up to 1600 inmates.

We would like to submit the following response:

At present the Welsh Assembly Government are still the owners of the land at the proposed site at Baglan Moors, so our efforts are concentrated in this direction.

The impact of a prison on the town of Port Talbot has not been considered by the Welsh Assembly Government.

We are not a huge town, our resources have been slashed year after year. We don't even have a police station to serve the town.

Our hospital services have also been cut to the point where we only have a nurse led local accident centre, not a fully functioning A & E. The nearest A & E departments are at Morriston, Swansea & Bridgend.

Should the proposed prison go ahead, an area already suffering high employment will suffer even more as the proposed prison will be a rehabilitation centre? Inmates would be allowed limited daily release for training placements/work experience etc.... placements and training that should go to local residents not inmates.

Local housing stock from housing associations etc. would also be affected as released inmates may choose to stay in Port Talbot after release. Their families could relocate here, pushing the private rental market prices up as private landlords take advantage of the increase in demand. This would push locals out of the area due to higher rents & less rental properties available.

Some local industries will suffer as it is well documented that large prisons such as this one proposed house factories/industries inside them, which will take work away from local businesses. These industries include metal working, machine shop producing uniforms for national businesses, laundry services for large chain hotels around the UK. All of this will have a detrimental effect on the local economy here in Port Talbot.

There has been significant ground work done to improve the drainage in this well documented flood plane for many years. This has resulted in the flood risk

categorisation of that area to be downgraded to a lesser risk of flooding. This was done in the same period that the Welsh Assembly Government offered up Baglan Moors as a potential site to the MoJ. The re-categorisation was announced just days before the prison news became public knowledge.

As there are no firm statements that either Swansea or Cardiff prisons are closing any time soon..... WHY is there a need for this new prison in Port Talbot?? Unless of course the First Minister, Mr Sergeant & Mr Skates know differently??

It would appear Port Talbot would be the last to know in any case.

There is a covenant on the land, and as it stands a prison goes against two of the restrictions:

Schedule 2 (a): Not to use the property hereby conveyed or any part thereof other than as an industrial park in accordance with the planning permissions granted in respect of the said property.

And:

Schedule 3: The Agency shall not use the (demised premises, property) or permit the same to be used for offensive, noisy or dangerous trade business manufacture or occupation of for any purpose or in the manner which may be a nuisance to the Agency or the owners or occupiers of neighbouring or adjacent premises.

The infrastructure of Port Talbot despite investment in the last few years will not cope with the increased traffic, especially during the construction period which would last in excess of 24 months. Ysgol Bae Baglan has caused enough problems with traffic, the new Welsh Medium School which opens in 2018 will add to this problem. A prison, during and after construction will make the problem unimaginable.

Which brings us onto the next point. Due to the land being on what is called a 'natural soak', a form of construction called pile driving will have to be used to ensure any building on this land has secure foundations due to the water levels. A build of the magnitude of a massive prison and required storage/parking facilities could and probably would make subsidence issues already experienced by the local residents dramatically more severe. Would the Welsh Assembly Government be responsible for compensating these residents as and when these subsidence problems occur as they would be caused as a direct result of the Welsh Assembly Government selling/releasing the land to the MoJ??

That the Cabinet Secretary for Communities & Children Mr K Skates even considers such a site as Baglan Moors as suitable for a prison needs to be questioned closely. In the response laid out above it is more than obvious that Port Talbot stands to lose more than it will gain from this proposed prison being built in the town.

We want to grow as an industrial/manufacturing town. We need to build for future generations to come, not leave them the legacy of a prison that will impact the town for at least the next 60 years.

As a town we are prepared to fight this proposal on every level, but The Welsh Assembly can stop this now by listening to the people of Port Talbot, over 8,000 signatures show that the majority of the town are against this.

Please do not release or sell this land to the Ministry of Justice, listen to the people of the town and put a stop to this proposal to build this prison here.

Agenda Item 2.2

P-05-782 Build a Chepstow Bypass to Remove the Bottle Neck from the M48 onto the A48

This petition was submitted by Jez Becker, having collected 201 signatures online.

Petition text:

We call on the National Assembly for Wales to urge the Welsh Government to finally take in hand the problem of traffic congestion on the A48 through Chepstow.

The lowering of the Severn Bridge Toll represents a huge opportunity for growth in Monmouthshire, Forest of Dean and South East Wales. However the road infrastructure is inadequate. The A48 is already suffering from congestion and poor air quality through the town of Chepstow. With the addition of new housing estates in both Monmouthshire and Forest of Dean the current proposals fall unacceptably short in facilitating growth.

This scheme has been an aspiration since the 1960s and unless both the Welsh and UK governments finally co-operate and commit then the economic prosperity so within reach will be choked off, instead leaving the quality of the residents' lives to deteriorate and stifle sustainable economic development.

Additional information:

In a good example of how this issue has been neglected by all branches of government, a sister petition has been lodged with the UK Government as they rejected the original as being a Wales only issue.

We ask the National Assembly of Wales to ensure that this vital transport route not fall prey to cross border buck passing.

Assembly Constituency and Region

- Monmouth
- South Wales East

P-05-782 Build a Chepstow Bypass to remove the bottle neck from the M48 onto the A48

Y Pwyllgor Deisebau | 07 Tachwedd 2017

Petitions Committee | 07 November 2017

Research Briefing:

Petition number: [P-05-782](#)

Petition title: Build a Chepstow Bypass to Remove the Bottle Neck from the M48 onto the A48

Text of petition:

We call on the National Assembly for Wales to urge the Welsh Government to finally take in hand the problem of traffic congestion on the A48 through Chepstow.

The lowering of the Severn Bridge Toll represents a huge opportunity for growth in Monmouthshire, Forest of Dean and South East Wales. However the road infrastructure is inadequate. The A48 is already suffering from congestion and poor air quality through the town of Chepstow. With the addition of new housing estates in both Monmouthshire and Forest of Dean the current proposals fall unacceptably short in facilitating growth.

This scheme has been an aspiration since the 1960s and unless both the Welsh and UK governments finally co-operate and commit then the economic prosperity so within reach will be choked off, instead leaving the quality of the residents' lives to deteriorate and stifle sustainable economic development.

Additional information:

In a good example of how this issue has been neglected by all branches of government, a sister petition has been lodged with the UK Government as they rejected the original as being a Wales only issue.

We ask the National Assembly of Wales to ensure that this vital transport route not fall prey to cross border buck passing

Background

The Welsh Government, as the highway authority for the motorway and trunk road network in Wales, is responsible for the A48 through Chepstow. It describes the A48 as “a strategic road

in South Wales linking the south west of Wales with England". The South Wales Trunk Road Agent (SWTRA) is responsible for the management, maintenance and improvement of trunk roads in south Wales on behalf of the Welsh Government.

Local development and local transport planning

Monmouthshire County Council's (MCC's) [adopted Local Development Plan](#) lists the line of a potential A48 Chepstow Outer By-pass scheme for protection from development likely to prejudice its implementation (Policy MV10). Its [Local Transport Plan](#) lists the construction of a new Hardwick Hill and Chepstow Bypass as a long term aspiration of local significance which forms part of a wider Chepstow traffic, environmental and road safety improvements scheme.

Air quality

Hardwick Hill on the A48 in Chepstow has been designated an [Air Quality Management Area](#) (AQMA) due to the high emissions from traffic, particularly heavy goods vehicles travelling up the hill. Monmouthshire County Council's 2011 [Air Quality Action Plan for Chepstow](#) says:

The possibility of a bypass for Chepstow has been investigated a number of times over the years. [...]

This option had by far the greatest support at the stakeholder workshops, but there was also a reasonable amount of opposition. **A bypass would significantly improve air quality within the AQMA and would also improve safety and living conditions for those living on Hardwick Hill.** However, there would be negative impacts for people living alongside the bypass route. As the exceedance area only affects a small number of properties on Hardwick Hill, **the costs of a bypass would almost certainly outweigh the benefits. In addition there could be a negative impact on the economy of the town if through traffic is reduced.**

Monmouthshire County Council's 2016 local air quality management [Progress Report](#) (PDF 3.16MB) states:

[...] air quality within the Chepstow Air Quality Management Area (AQMA) continues to exceed the nitrogen dioxide annual mean objective level at certain locations [including Hardwick Hill].

The Toll at the Severn Bridge has been identified as a contributing factor to air quality exceedances on the A48, Hardwick Hill, as a number of HGV's use the route to avoid paying the toll into Wales. **It was agreed at the meeting that petitioning to remove the Toll in 2017 was a priority.**

Severn Crossings Tolls and the UK Government's position

The UK Government [consulted](#) on proposals for reductions to the Severn Crossings Tolls in January 2017. In July 2017, it subsequently [announced](#) that tolls will be abolished for all vehicles by the end of 2018.

The UK Government rejected a [similar petition calling for a Chepstow bypass](#) submitted in February 2017 on the basis that:

It's about something that the UK Government or Parliament is not responsible for.

Your petition is about something that the Welsh Government is responsible for. That means that the UK Government and Parliament can't look into it. Responsibility for roads is devolved in Wales.

Welsh Government action

There are no Chepstow bypass schemes listed in either the Welsh Government's [National Transport Finance Plan](#) 2015 or its Infrastructure Investment Plan [project pipeline](#).

In 2013/14, SWTRA carried out a public consultation seeking views on how to improve air quality in Chepstow by making changes to the A48 on behalf of the Welsh Government. According to the [consultation summary report](#) (PDF 3.24MB), 13 of the 21 respondents suggested a new bypass as a solution.

In his letter to the Chair in respect of this petition, the Cabinet Secretary for Economy and Infrastructure stated:

[...] we have conducted a consultation exercise and study into Air Quality Assessment in Chepstow. The outcome of the consultation was that **there were five potential options, one of which was a bypass**. However, the full impact of the tolls being lifted along with new housing developments in the area, are yet to be fully realised.

Whilst no formal plans for a Chepstow bypass have been developed to date, it is considered that such a scheme would likely straddle the Wales–England border to the south of Chepstow and Sedbury. This would require cross–border collaboration between the Welsh Government and the relevant highway authority in England. In his letter, the Cabinet Secretary stated that the Welsh Government is “working with Highways England to develop a coherent cross–border approach to planning for the removal of the tolls” which will include the “likely impact on the traffic model for Chepstow, including the A48”.

National Assembly for Wales action

In response to a written question (WAQ27340) from Michael German on what consideration had been given to a Chepstow bypass in July 2003, the then Minister for Economic Development and Transport, Andrew Davies, [stated](#) (PDF 281KB):

The Assembly has no current plans for taking forward a Chepstow bypass as part of its trunk road programme. The Welsh Office did, however, indicate its support for a private venture project to construct an outer bypass of Chepstow, and offered to make a financial contribution. In recognition of this, the Welsh Office, with the former Gwent County Council, secured part of the route of the proposed bypass by virtue of agreements with a developer, who has constructed a road on the line of the proposed bypass at the south–west end. An inner bypass of Chepstow was also considered by the Welsh Office to address the safety issues at Hardwick Hill. However, following representations from the public and others, these proposals were withdrawn. De–trunking of the A48 through Chepstow is currently under consideration which, if taken forward, would allow the local authority to traffic–calm the existing A48.

In response to a question (WAQ51322) from Mike German on a Chepstow bypass and plans for de-trunking the A48 in February 2008, the then Deputy First Minister and Minister for Economy and Transport, Ieuan Wyn Jones, [stated](#) (PDF 26.2KB):

The Welsh Assembly Government has no plans for a Chepstow bypass especially since the Highways Agency recently detrunked the A48 across the border back to local authority control, removing it from their strategic highway network.

We have a similar view to the Highways Agency on the strategic importance of the A48/A466 at Chepstow. Our policy is to detrunk the routes thereby removing them from the strategic highway network in Wales and allowing Monmouthshire County Council to manage the routes as they think fit. If this is to proceed Monmouthshire County Council will have to agree the change of status and their becoming the responsible highway authority.

Following an [urgent question](#) in Plenary regarding the UK Government's consultation on continued tolling on the Severn Crossings in January 2017, Nick Ramsay stated:

[...] there are roads surrounding the area of the Severn Crossings, such as in Chepstow, in my constituency, for instance, which actually are carrying a lot of traffic—a lot more than they should—because people are currently avoiding the toll system. So, have you made any assessment, or are you planning to make any assessment, of the effect of reduction in the tolls—to this point now but, hopefully, in the future, even more—and the effect of lower traffic volumes on surrounding roads in areas like Chepstow [...].

The Cabinet Secretary for Economy and Infrastructure responded:

I was pleased to see the leader of Monmouthshire council recognise the challenges, but also the opportunities, that removing tolls—or, in the very least, reducing tolls—on the Severn Crossings would have for the entire region, not just the area that he represents.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.



Eich cyf/Your ref P-05-782
Ein cyf/Our ref KS/03374/17

David John Rowlands AM
Chair - Petitions committee

government.committee.business@wales.gsi.gov.uk

16 October 2017

Dear

David,

Thank you for your letter of 20 September regarding Petition P-05-782 Build a Chepstow Bypass to Remove the Bottle Neck from the M48 onto the A48.

We are working with Highways England to develop a coherent cross-border approach to planning for the removal of tolls. This will include the likely impact on the traffic model for Chepstow, including the A48, as it is recognised that a high number of HGVs and other vehicles use this route to avoid the tolls.

I can also confirm that we have conducted a consultation exercise and study into Air Quality Assessment in Chepstow. The outcome of the consultation was that there were five potential options, one of which was a bypass. However, the full impact of the tolls being lifted along with new housing developments in the area, are yet to be fully realised.

As part of the Air Quality Assessment findings, we will continue to work with the local council, developers and stakeholders to improve air quality and safety on the A48 in and around Chepstow.

Yours ever,
Ken

Ken Skates AC/AM
Ysgrifennydd y Cabinet dros yr Economi a'r Seilwaith
Cabinet Secretary for Economy and Infrastructure

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Ken.Skates@llyw.cymru
Correspondence.Ken.Skates@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Agenda Item 2.3

P-05-783 Ensuring Equality of Curriculum for Welsh Medium Schools e.g. GCSE Psychology

This petition was submitted by Chris Evans, having collected 652 signatures online.

Petition text:

I call upon the National Assembly for Wales to urge the Welsh Government to prevent Qualifications Wales (QW) from continuing to discriminate against Welsh-medium learners, and ensure linguistic equality in terms of school curriculum.

In 2015, the WJEC decided to drop GCSE Psychology because candidate numbers were relatively small (37 centres – 5 of which were Welsh medium with 144 Welsh medium applicants each year). Because of this, an invitation was extended by Qualifications Wales to the English Awarding Bodies; AQA, OCR, Pearson-Edexcel, to offer this subject, and others e.g. Economics, in Wales.

Unfortunately, and astoundingly, there was no pressure to offer these subjects in Welsh. Qualifications Wales' response to this is to say that the English Boards would refuse to offer subjects in Wales altogether if they were forced to offer a Welsh language option, and that they seek to ensure 'the widest choice of subjects to learners in Wales' (QW Newsletter, December 2016).

'The widest choice of subjects to learners in Wales' unless you are following a Welsh medium education! In September, there will be no year 10 Psychology GCSE course running in my school for the first time since 2009, while the English-medium school a few miles away, start a new GCSE Psychology course in English through AQA. The only reason that I can't offer this subject is because we teach through Welsh. There are four other Welsh centres in the same position.

Psychologists need to be able discuss their subject in Welsh. By depriving Welsh medium pupils of the opportunity to study Psychology GCSE through Welsh, we will lose 144 students per year who would have had the potential of contributing to Psychology – as a teacher, lecturer, therapist, researcher etc. in Welsh with confidence because the relevant terminology familiar to them.

Additional information:

144 candidates sat the unit 2 Psychology WJEC GCSE paper in Welsh to finish the course in 2015, with 5 centres teaching it, so there is the potential for significant numbers, not just a handful. I have arranged that three experienced Psychology examiners are available to work for any English Board, so that translation of candidate's scripts (solutions) would not be needed, just the translation of the paper itself.

The only English Board that even considered the application to provide a Welsh paper (from myself, not QW), was Pearson, but in the end they refused, saying it 'would require Welsh speakers at every level of the production of the papers'. This is nonsense because that doesn't even happen in the WJEC, where the Chief Examiner and the Subject Officer don't speak Welsh!

I don't blame the English Boards, because why should they go to the trouble when they don't have to? Qualifications Wales is to blame for their limp policy, which does not protect the rights of Welsh-medium learners. Surely it would have been possible to create an element of competition between the English Boards by giving priority to those open to the idea of offering a Welsh option, but they did not attempt to do this at all.

This is totally unacceptable in the modern Wales. If English Awarding Bodies are allowed to offer subjects in Wales, it must be made clear that they need to offer a Welsh paper when there is a reasonable request to do so.

Assembly Constituency and Region

- Wrexham
- North Wales

Ensuring Equality of Curriculum for Welsh Medium Schools

Y Pwyllgor Deisebau | 7 Tachwedd 2017
Petitions Committee | 7 November 2017

Research Briefing:

Petition number: P-05-783

Petition title: **Ensuring Equality of Curriculum for Welsh Medium Schools**

Text of petition: I call upon the National Assembly for Wales to urge the Welsh Government to prevent Qualifications Wales (QW) from continuing to discriminate against Welsh-medium learners, and ensure linguistic equality in terms of school curriculum.

In 2015, the WJEC decided to drop GCSE Psychology because candidate numbers were relatively small (37 centres – 5 of which were Welsh medium with 144 Welsh medium applicants each year). Because of this, an invitation was extended by Qualifications Wales to the English Awarding Bodies; AQA, OCR, Pearson-Edexcel, to offer this subject, and others e.g. Economics, in Wales.

Unfortunately, and astoundingly, there was no pressure to offer these subjects in Welsh. Qualifications Wales' response to this is to say that the English Boards would refuse to offer subjects in Wales altogether if they were forced to offer a Welsh language option, and that they seek to ensure 'the widest choice of subjects to learners in Wales' (QW Newsletter, December 2016).

'The widest choice of subjects to learners in Wales' unless you are following a Welsh medium education! In September, there will be no year 10 Psychology GCSE course running in my school for the first time since 2009, while the English-medium school a few miles away, start a new GCSE Psychology course in English through AQA. The only reason that I can't offer this subject is because we teach through Welsh. There are four other Welsh centres in the same position.

Psychologists need to be able discuss their subject in Welsh. By depriving Welsh medium pupils of the opportunity to study Psychology GCSE through Welsh, we will lose 144 students per year who would have had the potential of contributing to Psychology – as a

teacher, lecturer, therapist, researcher etc. in Welsh with confidence because the relevant terminology familiar to them

144 candidates sat the unit 2 Psychology WJEC GCSE paper in Welsh to finish the course in 2015, with 5 centres teaching it, so there is the potential for significant numbers, not just a handful. I have arranged that three experienced Psychology examiners are available to work for any English Board, so that translation of candidate's scripts (solutions) would not be needed, just the translation of the paper itself.

The only English Board that even considered the application to provide a Welsh paper (from myself, not QW), was Pearson, but in the end they refused, saying it 'would require Welsh speakers at every level of the production of the papers'. This is nonsense because that doesn't even happen in the WJEC, where the Chief Examiner and the Subject Officer don't speak Welsh!

I don't blame the English Boards, because why should they go to the trouble when they don't have to? Qualifications Wales is to blame for their limp policy, which does not protect the rights of Welsh-medium learners. Surely it would have been possible to create an element of competition between the English Boards by giving priority to those open to the idea of offering a Welsh option, but they did not attempt to do this at all.

This is totally unacceptable in the modern Wales. If English Awarding Bodies are allowed to offer subjects in Wales, it must be made clear that they need to offer a Welsh paper when there is a reasonable request to do so.

WJEC's withdrawal of GCSE Psychology

In November 2015, WJEC [published a circular](#) stating that their GCSE Psychology (both English and Welsh medium) was to be withdrawn. It stated:

As the reform of GCSE, AS and A level qualifications progresses from the development stage to delivery stage, a phased withdrawal of legacy qualifications will begin. In most cases a legacy qualification will be replaced by an equivalent reformed qualification. **However, certain qualifications will not be reformed and the purpose of this communication is to identify those qualifications and provide early notice of their withdrawal.**

There are certain qualifications where the number of learners in Wales is considered too low for any awarding organisation to develop qualifications for award only in Wales. Where there is a reformed qualification in these subjects available in England, Qualifications Wales have invited awarding bodies to apply to have them designated by them for use on publicly funded learning programmes in Wales. One such qualification is GCSE Psychology which was offered by the awarding body [Pearson](#) for first teaching from 2017. The qualification is available only through the medium of English.

Qualifications Wales

Qualifications Wales are the independent regulator of qualifications in Wales and are responsible for the approval and designation of publicly funded qualifications. The main points in Qualifications Wales' response to the petition are:

- There is no requirement on awarding bodies (who are commercial organisations) to offer any regulated qualification;
- The number of learners in Wales for a given subject is not always sufficient to make the development of a separate qualification commercially attractive or viable;
- While Qualifications Wales can place conditions of recognition on regulated awarding bodies, it is a decision for the awarding body whether to accept the conditions and offer qualifications or whether to stop offering them at all;
- Not all subjects are awarded by all awarding bodies, some are awarded by a single body as the potential number of learners is only just sufficient to meet a viability threshold;
- Qualifications Wales require awarding bodies to publish their policy on Welsh-medium assessment, but they do not make Welsh medium provision mandatory as such a requirement may lead awarding bodies to completely withdraw their qualifications from Wales.

In relation to GCSE Psychology, Qualifications Wales state:

- Pearson did not intend to offer GCSE Psychology through the medium of Welsh for teaching from September 2017 as it did not have enough examiners and quality assurance personnel with the necessary Welsh language skills;
- Discussions have taken place between Pearson and WJEC to see whether Pearson could make use of some of WJEC's examiners, but it has not been possible to find a solution in time for a reformed qualification to be available in Welsh by September 2017;
- The timeline for the new curriculum means that the newly reformed qualifications are likely to run to 2026 so it may be feasible to develop a new qualification to help meet the need.

National Assembly for Wales action

In [Plenary on 7 March 2017](#), Llyr Gruffydd asked the Leader of the House and Chief Whip, Jane Hutt for a statement from the Minister for Lifelong Learning and Welsh Language on the lack of availability of bilingual teaching resources and the impact that this has on Welsh-medium education. Llyr Gruffydd said:

“But I understood today that the psychology GCSE won't be taught through the medium of Welsh anywhere next year, because of the uncertainty about the availability of the necessary materials. Welsh-medium schools in Wales have decided not to provide that course, and bilingual schools have chosen to provide the English course, because they know that the resources will be available. The risk there, of course, is that the authorities will say that there is no demand for such resources and we

will see a vicious cycle developing that is entirely unacceptable, in my view, and that is a million miles away, of course, from where we should be if we want to see a million Welsh speakers in Wales by 2050. It lets Welsh-medium schools down. It lets teachers who want to teach through the medium of Welsh down, and it lets pupils who want to be educated through the medium of Welsh down. And it undermines all ambitions that the Government has in terms of the Welsh language. So, I would kindly request that the relevant Minister appear before us to explain exactly what the Government is doing, and how they see that this is acceptable in any way whatsoever.”

In response, Jane Hutt said:

“It is very important that we do get the evidence to substantiate these concerns underpinning this question today. My understanding is that, in terms of psychology, it’s being ceased in both English and Welsh in 2018—English and Welsh—therefore, that obviously drives that decision, [...] So, obviously, it is a matter of exploring what these claims are in terms of getting the appropriate evidence and response.”

In her response to this Petition, the Cabinet Secretary for Education confirmed that arrangements for the approval and designation of qualifications such as the designation GCSE Psychology are a matter for Qualifications Wales.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.

Kirsty Williams AC/AM
Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref KW/01535/17
David John Rowlands AM
Chair - Petitions committee.
National Assembly for Wales
Cardiff Bay
CF99 1NA

government.committee.business@wales.gsi.gov.uk

10 October 2017

Dear David

Thank you for your letter of 20 September about the petition from Chris Evans, which is seeking support to ask the Welsh Government to intervene in the decision made by Qualifications Wales to allow awarding bodies to offer GCSE Psychology in Wales through the medium of English only.

I note the points raised by the petition. The Welsh Ministers' functions relating to the regulation of qualifications and the qualifications system were repealed in September 2015 with the establishment of Qualifications Wales as the independent regulator. Arrangements for the approval and designation of qualifications, such as the designation of GCSE Psychology, are a matter for Qualifications Wales.

It may be more appropriate for you to contact Philip Blaker, Chief Executive of Qualifications Wales to discuss the issue further; his contact details are Philip.Blaker@qualificationswales.org

I trust that you will find this information useful.

Yours sincerely

Kirsty Williams AC/AM
Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Kirsty.Williams@llyw.cymru
Correspondence.Kirsty.Williams@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.



David J Rowlands AM
Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff CF99 1NA

23 October 2017

Petition P-050-783: Ensuring equality of curriculum for Welsh Medium Schools e.g. GCSE Psychology

Dear Mr Rowlands

Thank you for inviting our views on the issues raised in this petition.

Since our establishment in September 2015, the issue of securing the availability of GCSE, AS and A level qualifications in lower take-up subjects, in both Welsh and English, has been significant and is one to which we have given considerable thought.

To help explain the nature of the challenge and the approach we have taken to address it, we have structured our response as follows:

1. Our powers and duties in respect of the qualifications system
2. Background on the reform of GCSEs and A levels in Wales
3. Our approach to designating GCSEs and A levels in low take-up subjects
4. The actions we have taken in respect of GCSE Psychology

1. Our powers and duties in respect of the qualifications system

The Qualifications Wales Act 2015 established us as the independent regulator of non-degree qualifications in Wales and set out our powers and duties.

The Qualifications Wales Act 2015 gives us two principal aims and sets out eight matters to which we must pay regard as we pursue those aims.

One of our aims is:

- Ensuring that qualifications and the Welsh qualifications system are effective in meeting the reasonable needs of learners in Wales

Of the eight matters to which we must have regard, the three that most relevant to this petition are:

- the desirability of promoting and facilitating the use of the Welsh language
- the range and nature of qualifications available, and of their assessment arrangements
- the reasonable requirements of employers, higher education institutions and the professions regarding education and training (including as to required standards of practical competence).

We regulate awarding bodies recognised by us and the qualifications they offer. The awarding bodies we regulate must meet our conditions of recognition. For qualifications to be eligible for inclusion on publicly funded courses, they must either be approved or designated by us against our approval or designation criteria.

Offering qualifications is a voluntary activity, there is no requirement on awarding bodies to offer any regulated qualifications. Regulation is also voluntary, there is no requirement on awarding bodies to seek recognition by us, unless they want their qualifications to be eligible for public funding. There are no legal requirements placed on awarding bodies to offer qualifications in the medium of Welsh.

Most of the awarding bodies we regulate offer the same qualifications in Wales as they do in England. The number of learners in Wales for a given subject are not always sufficient to make the prospect of developing separate qualifications specifically for Wales commercially attractive or even viable.

We have the power to place conditions of recognition on regulated awarding bodies, but because these bodies operate as commercial organisations it is a decision for them whether to accept those conditions and continue to offer regulated qualifications in Wales, or whether to stop offering their qualifications in Wales.

Placing a condition requiring Welsh medium assessment for a given qualification may result in the awarding body withdrawing it from Wales, taking the choice of the qualification away from all learners.

We have the power to provide grant funding to awarding bodies. In 2016/17, we spent £633,460 to support the cost of Welsh medium assessment and the translation of materials for assessors and teachers.

We have a published 'Regulatory Welsh-medium and Bilingual Qualifications Policy' aimed at awarding bodies, which lays out our approach to increasing the availability of Welsh-medium qualifications.

In our General Qualifications Strategic Plan, we set out our aim for all general qualifications offered in Wales to be available in Welsh and English. This is already the case for those GCSEs and A levels that have been designed for Wales, and for the Welsh Baccalaureate, all of which are offered by WJEC. GCSEs and A levels in other subjects that are taken by relatively low numbers of learners in Wales are offered by a range of awarding bodies. Some – but not all – of these are also offered in both languages. We continue to look at ways to increase the number of qualifications offered bilingually.

2. Background to the reform of GCSEs and A levels in Wales

In 2012, the Welsh Government's Review of Qualifications for 14 to 19-year-olds in Wales recommended reforming GCSEs and A levels.

The new qualifications were introduced in phases over three successive years. The first group of reformed subjects were introduced for first teaching from September 2015, the second from 2016, and the third group of subjects have just started being taught from September this year. These new qualifications have been specifically developed for Wales to meet design principles initially set by Welsh Government and more recently by us. These qualifications are only offered by WJEC and are all available in both Welsh and English. At the same time as the reforms in Wales, new GCSEs and A levels were developed separately in these subjects for England, based on requirements set by Ofqual, the qualifications regulator in England.

There are some GCSE and A level subjects for which the number of potential candidates in Wales is too low to make it viable for any awarding body to develop qualifications for award only in Wales. In some of these subjects, new GCSEs and A levels have been reformed in England, where the potential number of candidates is large enough to make the qualifications viable.

We enclose a list of these subjects in the appendix, noting which awarding body offers them as reformed GCSEs, AS and A levels in England. This is relevant because not all subjects are offered by all the awarding bodies. Some subjects are only offered by a single awarding body, usually because the potential number of learners taking them is only just sufficient to meet a viability threshold. New qualifications in these subjects were introduced for first teaching from September 2017, except for Latin and Dance, which were introduced in 2016.

Qualifications designed to meet requirements set by Ofqual differ in several important ways to those GCSEs and A levels for which we have set Approval Criteria. For example, new GCSEs in England are graded on a scale of 9 to 1, not A* to G; and new AS and A levels in England are decoupled, so that the AS results do not contribute to the overall grade awarded at A level.

3. Our approach to designating GCSEs and A levels in low take-up subjects

In autumn 2015, when we were established, we started to consider how to secure the continued availability in Wales of reformed qualifications in low take-up subjects that would not be developed specifically for Wales. In January 2016, we decided that where these subjects were available in England, we would allow the awarding bodies offering them to apply to have them 'designated' in Wales as eligible for use on publicly funded learning programmes.

We then set about developing specific criteria for designating GCSEs and A levels. As part of this process we engaged with awarding bodies who offer these qualifications to discuss their policy and capability to offer Welsh medium assessments. Two awarding bodies, AQA and OCR, confirmed they would not offer any Welsh medium assessment at all. Another awarding body, Pearson, said it would do so only where there was established demand and it was operationally feasible. The fourth, WJEC said it would make any of its qualifications offered under its Eduqas brand (i.e. developed to meet requirements in England) available through the medium of Welsh upon request, this would include providing the specification and sample assessment materials in Welsh, as well as the exam papers themselves.

We decided our designation criteria would require awarding bodies to publish their policy on Welsh medium assessment, but would stop short of making Welsh medium provision mandatory. In reaching this decision we looked at all available evidence about the possible impact of our approach, including the recent take-up of Welsh medium assessment in the subjects concerned. In making our decision we determined that imposing such a requirement would lead several awarding bodies to completely withdraw their GCSEs and A levels from Wales, which would mean a total loss of provision for some subjects.

We concluded that making the offer of Welsh-medium provision a mandatory condition of designation would not have been effective. It would have resulted in many subjects, including GCSE Psychology, not being available in Wales in either language. The negative impact of such a requirement on the reasonable needs of learners would have been contrary to our principal aims. Requiring awarding bodies to publish their policy towards Welsh medium assessment up front, on the other hand, had several benefits. It would encourage awarding bodies to consider the option of Welsh medium provision at an early stage in the qualification's development and give schools and colleges better information on the availability of Welsh medium qualifications.

Following our decision, we wrote to schools and colleges to ensure they understood what qualifications were available and what policy each awarding body had towards the provision of Welsh medium assessment.

4. The position for GCSE Psychology

Pearson's policy on offering Welsh-medium assessments is to do so for subjects in which there has been a proven demand for it in the past and it is judged operationally viable to offer this provision in future. In December 2016, we sought confirmation that it would be making GCSE Psychology available in Welsh as part of its policy.

In March 2017, Pearson confirmed that it did not intend to offer GCSE Psychology in the medium of Welsh for teaching from September 2017. Pearson explained this was because it did not have enough examiners and quality assurance personnel with the necessary Welsh language skills for it to be able to commit to offering Welsh medium assessment.

Following this decision, we engaged with Pearson to understand in more detail the basis for its decision and to look at how the barriers it had identified could be overcome. We facilitated discussions between Pearson and WJEC, who continues to offer an A level in Psychology, to explore whether Pearson could make use of some of WJEC's examiners to support its processes.

It has not been possible to find a solution in time for a reformed GCSE Psychology qualification to be available in Welsh by September 2017.

We are now considering what other options may be available to address the demand for a Welsh medium GCSE Psychology. The recently published timeline for introducing the new curriculum for Wales has clarified that the newly reformed qualifications are likely to run until 2026. This clarification means that it may yet be feasible to develop a new qualification that could help meet the need.

I trust this submission clarifies some of the issues related to the petition and helps to explain some of the challenges to securing bilingual provision of all GCSE and A level subjects offered in Wales.

When making any future changes to qualifications, for example to support the new curriculum for Wales, we will be able to plan to secure equal availability of Welsh and English-medium provision from the outset in all subjects. In the meantime, we will continue to look for opportunities to increase availability wherever we can.

Yours sincerely,



Philip Blaker
Chief Executive Officer
Qualifications Wales

Enc. List of GCSE, AS and A level subjects reformed to meet Ofqual requirements and the awarding bodies offering them.

Appendix:

List of GCSE, AS and A level subjects reformed to meet Ofqual requirements and the awarding bodies offering them.

GCSEs (9-1) for first teaching from 2016

The table below indicates which awarding body offers reformed GCSEs in the subjects listed.

An asterisk (*) next to a subject name indicates where a previous version of the GCSE has been assessed in the medium of Welsh by at least one awarding body since 2013.

GCSE (9-1) subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Classical Greek	No	Yes	No	No
Citizenship Studies	Yes	Yes	Yes	No
Dance	Yes	No	No	No
Latin*	No	Yes	No	Yes

GCSEs (9-1) for first teaching from 2017

The table below indicates which awarding body will offer reformed GCSEs in the subjects listed for first teaching from 2017.

An asterisk (*) next to a subject name indicates where a previous version of the GCSE has been assessed in the medium of Welsh by at least one awarding body since 2013.

GCSE (9-1) subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Ancient History	No	Yes	No	No
Arabic	No	No	Yes	No
Astronomy	No	No	Yes	No
Bengali	Yes	No	No	No

GCSE (9-1) subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Chinese	Yes	No	Yes	No
Classical Civilisation	No	Yes	No	No
Economics	Yes	Yes	No	No
Electronics*	No	No	No	Yes
Engineering	Yes	No	No	No
Film Studies	No	Yes	No	Yes
Geology	No	No	No	Yes
Italian	Yes	No	Yes	No
Japanese	No	No	Yes	No
Modern Greek	No	No	Yes	No
Modern Hebrew	Yes	No	No	No
Polish	Yes	No	No	No
Psychology*	Yes	Yes	Yes	No
Punjabi	Yes	No	No	No
Russian	No	No	Yes	No
Sociology*	Yes	No	No	Yes
Statistics	Yes	No	Yes	No
Urdu	Yes	No	Yes	No

AS and A levels (decoupled) for first teaching from 2016

The table below indicates which awarding body offers reformed AS and A level in the subjects listed.

An asterisk (*) next to a subject name indicates where a previous version of the AS / A level has been assessed in the medium of Welsh by at least one awarding body since 2013.

AS and A level subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Classical Greek	No	Yes	No	No
Dance	Yes	No	No	No
Latin	No	Yes	No	No

AS and A levels (decoupled) for first teaching from 2017

The table below indicates which awarding body will offer reformed AS and A level in the subjects listed for first teaching from 2017.

An asterisk (*) next to a subject name indicates where a previous version of the AS / A level has been assessed in the medium of Welsh by at least one awarding body since 2013.

AS and A level subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Accounting	Yes	No	No	No
Ancient History	No	Yes	No	No
Chinese	No	No	Yes	No
Classical Civilisation	No	Yes	No	No
Electronics *	No	No	No	Yes
Environmental science	Yes	No	No	No

AS and A level subject	AQA	OCR	Pearson (Edexcel)	WJEC Eduqas
Film Studies	No	Yes	No	Yes
Geology	No	Yes	No	Yes
History of Art	No	No	Yes	No
Italian	No	No	Yes	No
Music Technology*	No	No	Yes	No
Philosophy	Yes	No	No	No
Russian	No	No	Yes	No
Statistics	No	No	Yes	No

Agenda Item 3.1

P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

This petition was submitted by Anthony Cook, having collected 2,570 signatures. An associated petition collected 3,670 signatures

Text of the Petition

We call on the National Assembly for Wales to urge the Welsh Government to introduce routine screening for Type 1 Diabetes in children and young people.

In January of this year we tragically lost our beloved 13-year-old grandson, Peter Baldwin, to Type 1 diabetes that had been undetected until it was too late to save him. Peter was a well-loved and highly respected pupil at Whitchurch High School in Cardiff where he is greatly missed but for his family the hurt is unimaginable.

Our daughter Beth was recently presented with an award from The Pride of Britain for her fundraising efforts and for raising awareness of this terrible illness but with your help, and that of your friends and family we can really make a difference.

Please spare a couple of minutes to sign our petition calling on the Welsh Government to introduce a screening programme and to raise the profile of the need to check for Type 1 Diabetes in anyone presented to a health care professional with unexplained flu-like symptoms or general feeling of being unwell. The test involved is merely a finger prick or urine sample and takes less

time than you have spent reading this paragraph; it also only costs pennies. It is our intention to make this test as routine within GP surgeries and clinics as temperature and blood pressure checks presently are.

Your signature on this petition really could help save lives and prevent further terrible loss within families.

Additional Information:

The ideal standard would be for screening of all youngsters in order to catch this stealthy condition in the early stages. Many parts of the world are seeing the benefit of this screening and are now introducing it, the most recent being North Carolina in the U.S. Below is a link to the North Carolina implementation.

<http://insulinnation.com/living/reegans-rule-passes-north-carolina/>

The devolved Scottish Parliament is ahead of the rest of the U.K. and is already committed to debate the issue and appear very likely to implement screening. We want this for our children in Wales and are calling on the Welsh Government to introduce screening at the earliest opportunity.

PLEASE SIGN THE PETITION AND SHARE IT FAR AND WIDE

(now give yourself a pat on the back, you may have saved a child's life)

A petition campaigning for this change across the UK is currently collecting signatures on Change.org:

<https://www.change.org/p/craig-williams-mp-screen-children-for-type-1-diabetes>

Assembly Constituency and Region

- Cardiff North
- South Wales Central

By virtue of paragraph(s) ix of Standing Order 17.42

Document is Restricted

Vaughan Gething AC/AM
Ysgrifennydd y Cabinet dros Iechyd, Llesiant a Chwaraeon
Cabinet Secretary for Health, Well-being and Sport



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref VG/02364/17

David J Rowlands AM
Chair, Petitions Committee
National Assembly for Wales
Cardiff Bay
CF99 1NA

6 October 2017

Dear David,

I understand you have deferred your previous invitation of 28 July to attend the Petitions Committee to respond to petition P-04-682 - Routine Screening for Type 1 Diabetes in Children and Young People.

I am grateful the Committee has agreed at this time to accept a written outline of action underway by the NHS in Wales to address points made by the petitioners.

I would like to set on record my condolences to the family of Peter Baldwin and thank the petitioners for raising these important matters for consideration. I understand the aims of the original petition have been considered and a consensus has emerged that there is insufficient evidence to introduce a whole population screening programme. The UK and Wales screening committees will of course be open to considering any robust evidence which emerges in future about the efficacy of introducing such a programme.

Having reviewed the petitioners more recent suggestions, I have considered what is feasible to take forward and how this can align with the work of the Diabetes Delivery Plan for Wales. I agree more can be done to raise awareness among the public and among healthcare professionals about the four 'T' symptoms. The Royal College of Paediatrics and Child Health made a similar point in its 2017 clinical audit report about raising awareness of diabetic ketoacidosis (DKA). The Diabetes Delivery Plan for Wales was updated in December 2016 and an action was specifically included to raise awareness, by work led by our implementation group partners Diabetes UK Cymru. I am pleased Diabetes UK Cymru has worked with the petitioners, using the funds they have raised, to develop and deliver such a campaign.

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Vaughan.Gething@llyw.cymru
Correspondence.Vaughan.Gething@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

However, there is no feasible mechanism to legislate for the mandatory testing of all unwell children and asking of the four 'T' symptoms. Mandating would be very difficult to apply in practice and clinically inadvisable based on expert advice. In applying the prudent healthcare principles, I would be concerned about a significant number of unnecessary referrals and investigations, as well as patient anxiety and ultimately avoidable harm. It will also utilise finite resources and mask referrals for those with genuine clinical urgency.

Beyond this, the Children and Young People's Diabetes Network, in conjunction with the Diabetes Implementation Group, is considering the potential to use Datix reporting of delayed diagnosis of type 1 diabetes. Datix is a national system all NHS bodies in Wales use to report adverse healthcare incidents and a report in this instance would trigger reflection and investigation of the case handling and learning for all concerned. This may be supported further by encouraging clusters (grouped primary care providers) to use this shared learning and highlight good practice. Consideration is also being given to making available a Primary Care Diabetes Society's e-learning module and the potential for GP receptionist training on the symptoms of type 1 diabetes.

The network is working with Cardiff and Vale University Health Board to pilot a DKA pathway. A care pathway sets out a standardised approach across an organisation or healthcare system, based on evidence and good practice, for managing a person's healthcare journey. The DKA pathway will outline the correct procedure to follow when children and young people present with the symptoms of DKA in primary care. Should the pilot prove successful, the network will work with all health boards to embed the pathway and achieve a consistent approach across Wales.

The Diabetes Delivery Plan also emphasises to health boards the need to implement the National Institute for Health and Care Excellence recommended referral to specialist paediatric diabetes teams within 24 hours. Taken together, I am assured a proportionate level of focus and activity is in place to support NHS bodies in Wales to better identify, diagnose and treat children and young people with type 1 diabetes. However, I will ask the network to consider further the availability of glucose meters and electronic prompts for general practitioners.

Yours sincerely,



Vaughan Gething AC/AM

Ysgrifennydd y Cabinet dros Iechyd, Llesiant a Chwaraeon
Cabinet Secretary for Health, Well-being and Sport

Vivienne Harpwood, Cadeirydd / Chair
Ffon / Phone: 01874 712502
E-bost / Email: Vivienne.Harpwood@wales.nhs.uk

**Carol Shillabeer, Y Prif Weithredwr /
Chief Executive**
Ffon / Phone: 01874 712659
E-bost / Email: carol.shillabeer2@wales.nhs.uk



**GIG
CYMRU
NHS
WALES**

**Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board**

CS/AE/ae

30 August 2017

Mr David J Rowlands AC/AM
Chair
National Assembly for Wales Petitions Committee
Cardiff Bay
Cardiff
CF99 1NA

Dear Mr Rowlands

**Petition P-04-682 Routine Screening for Type 1 Diabetes in
Children and Young People**

Thank you for your letter dated 4th August 2017 in which you request further information from Powys Teaching Health Board on the following issues:

- The policy of the Health Board in relation to point of care blood glucose testing in primary care settings, including quality assurance and governance arrangements;
- The availability of blood glucose testing equipment in GP practices and other primary care settings, and data in relation to the number of tests carried out and in what circumstances;
- The arrangements in place to ensure effective dialogue between primary and secondary care. For example the policy in relation to carrying out case reviews in cases of delayed diagnosis of type 1 (such as when a child presents in DKA).

The responses to these questions are as follows:

- **Powys Teaching Health Board does not have a policy for point of care blood glucose testing in primary care.** However, the Diabetes Specialist Nurses have provided training as part of the Link Nurse programme, which includes nurses from all areas in Powys, on the

Pencadlys
Ty Glasbury, Ysbyty Bronllys,
Aberhonddu, Powys LD3 0LU
Ffôn: 01874 711661



Headquarters
Glasbury House, Bronllys Hospital
Brecon, Powys LD3 0LU
Tel: 01874 711661

importance of quality control of blood glucose monitors and ketone monitoring, in line with the policy which has been developed for the Powys Teaching Health Board community hospitals (currently under review).

- Blood glucose testing equipment is available in all GP practices. Powys Teaching Health Board does not have data relating to the number of tests carried out and in what circumstances.
- Powys Teaching Health Board dealt with a complaint in relation to a diagnosis of a child with Type 1 diabetes, which was also heard as a patient story at one of the health board's Board meetings. As a result, a specific action plan is in place to include a learning event for all GPs in Powys. The GP CPD coordinators will consider the inclusion of case reviews in the protected learning time events.

A pathway review was part of work commissioned by the Petitions Committee and undertaken by Diabetes UK. In addition, effective dialogue between primary/secondary care has been discussed at our recent Medical and Dental Education Committee (on 10th August) and with the Women and Children's Team.

The Women and Children's Directorate is exploring the development of a team based learning approach for conditions such as type 1 Diabetes and Addison's disease, which are rare presentations and need to be identified and managed urgently within a much larger volume of self-limiting illness in primary and community care.

The Powys Teaching Health Board Diabetes Plan identifies the need to monitor more closely the quality of the care provision in secondary care. One action from this is the formulation of a questionnaire and accompanying letter for all the relevant areas. This falls in line with the criteria measured in the annual National Paediatric Diabetes Audit.

I hope this is helpful. Do let me know if I can provide any further information.

Yours sincerely



Dr Catherine Woodward
Acting Chief Executive
(On Behalf of Carol Shillabeer)



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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Ysbyty Athrofaol Cymru
University Hospital of Wales
UHB Headquarters
Heath Park
Cardiff, CF14 4XW

Parc Y Mynydd Bychan
Caerdydd, CF14 4XW

Eich cyf/Your ref:P-04-682
Ein cyf/Our ref: LR-ns-08-6440
Welsh Health Telephone Network:
Direct Line/Linell uniongychol: 02920 745681

Len Richards
Chief Executive

31 August 2017

David J Rowlands AM
Chair
Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Dear Mr Rowlands

Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter dated 4 August 2017. I am pleased to be able to respond to your queries after consulting with the clinical leads in the UHB. Further information was requested regarding:

- 1. The policy of your Health Board in relation to point of care blood glucose testing in primary care settings, including quality assurance and governance arrangements**

An All-Wales pathway for diagnosis of diabetes in children and young people is in the final stages of preparation. The pathway emphasises point of care blood glucose testing in all children where Diabetes might be suspected in accordance with NICE guidelines and specifies that laboratory test for glucose and HbA1C are not appropriate.

POCT UHB Policy Commitment

We are committed to ensuring that there are appropriate arrangements in place to provide guidance on the selection and procurement of devices, that all staff undertaking POCT are trained and competent, that quality assurance procedures are in place and that there are systems in place to ensure the effective collection, sharing and reporting of high quality data and information within a sound information governance framework.

The newly revised UHB Policy states that GPs as Independent Contractors can use the Policy as a framework for good practice, but are not mandated to follow it, unless undertaking a commissioned service. However, there are many GP practices which currently participate in our POCT Blood Glucose/Ketone EQA Scheme. Although,



there is no clear reporting/ governance route in place as of yet to follow-up non-compliant practices, we still maintain a log of compliance issues.

In addition, GMS regulation requires contractors:

- to ensure that the equipment used by the service provider for providing care or treatment to a service user is safe for such use and is used in a safe way;
- where equipment or medicines are supplied by the service provider, ensuring that there are sufficient quantities of these to ensure the safety of service users and to meet their needs.

The Clinical Governance Practice Self- Assessment Tool (GPSAT) 2015-2017 part of the contract has similar expectations regarding maintenance of equipment. With launch of the new guidance and newly revised UHB policy we would hope to see further improvements.

2. The availability of blood glucose testing equipment in GP practices and other primary care settings, and data in relation to the number of tests carried out and in what circumstances

We do help to provide Self- Monitoring Blood Glucose guidance around suitable PoCT meters to be used across Primary Care, to which most practices adhere. Thus, preventing acceptance of unknown meters being used, which may be unsuitable for use.

However, there is no formal mechanism for the UHB to be able routinely monitor independent contractors in this area and the policy can only be applied voluntarily. The policy does apply however to the Cardiff and Vale Out of Hours Service.

Current GP contract does not include routine screening for Type 1 Diabetes in children. Therefore the UHB cannot enforce any data collection in relation to the number of tests carried out and in what circumstances.

3. The arrangements in place to ensure effective dialogue between primary and secondary care. For example your policy in relation to carrying out case reviews in cases of late diagnosis of type 1 (such as when a child presents in DKA).

The Children and Young People's Wales Diabetes Network (CYPWDN), have been working in collaboration with colleagues in primary care to improve early diagnosis of diabetes in children. The primary objective is to reduce the number of children and young people who have life threatening DKA at the point of diagnosis with type 1 diabetes. The key partners in this project are The Children & Young People's Wales Diabetes Network, General Paediatricians, Cluster leads, Practices, RCGP Wales, GPC Wales and Diabetes UK Cymru.

The key areas we have targeted for improvement are:

- 1) An all Wales referral pathway for the diagnosis and timely referral of children and young people with diabetes. We have had discussions on the pathway in the PCIC meeting, primary secondary care interface group for Child Health and it has been presented at the Clinical Directors' forum. Feedback will be sought from the Local Medical Committee and we hope to pilot it in Cardiff and Vale UHB in October 2017.

The pathway emphasises point of care blood glucose testing in any child with a potential diagnosis of diabetes in accordance with NICE guidance and same day referral to the Children's Assessment Unit based in the Children's Hospital for Wales. The Children's assessment unit have protocols and pathways in place for the immediate assessment, diagnosis and management of a child with potential diabetes. Further ongoing care is provided by a specialist multidisciplinary team.

- 2) Improved partnership working between primary care, General Paediatrics and Diabetes services in secondary care. We have commenced a policy in partnership with primary care to have a clear communication line when things go well and not as per standards (late diagnosis) via the incident reporting system. We are working on ways to close the loop following the incident reports. Feedback letters are also being sent to primary care following late diagnosis, highlighting NICE guidance as well as letters commending early diagnosis and prompt referral.
- 3) Training - CPET biannually, e-learning modules for type 1 diabetes in children, sustaining the training and targeting the education at different stages of training.
- 4) Behaviour change – We are liaising with 1000 Lives to run behaviour change sessions for the CYPWDN and primary care health care professionals to further explore how to influence thinking.

If you require any further information, please do not hesitate to contact me.

Yours sincerely



Len Richards
Chief Executive



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Cwm Taf
University Health Board

Your ref/eich cyf:
Our ref/ein cyf:
Date/Dyddiad:
Tel/ffôn:
Fax/ffacs:
Email/ebost:
Dept/adran:

AJW/CJM
01.09.2017
01443 744803
01443 744888
Allison.williams4@wales.nhs.uk
Chair and Chief Executive

David J Rowlands
Chair of the Petitions Committee
National Assembly for Wales

Dear David,

Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter dated the 4th August. In response to the queries posed to the health board from the National Assembly for Wales's Petitions Committee regarding the above Petition, please see the response below:

1. The policy of your Health Board in relation to point of care blood glucose testing in primary care settings, including quality assurance and governance arrangements;

At this present moment within Primary and Community setting only District nurses and Nursing homes are governed by Point of Care Testing (POCT) for Blood Glucose Monitoring (BGM). They are issued with the same meter and receive standardized training in its use including Quality Assurance: internal QA is documented in Log books kept with the meter, External QA is sent out via POCT who document the result and take action if required as per local policy.

This has yet to be completely rolled out into the GP practices due to the nature of GPs being independent contractors and complexity around the standardizing of the meters and the Quality Assurance. The issues being taken into consideration include the following:

- Each GP and Nurse within a practice tend to carry their own meter.
- Many practices now employ locums GPs, who also carry their meter, and these work within and across Local Health Board areas.
- Access to the testing strips can be problematic, as these need to be prescribed by the practice.
- Strips only have a 6 month shelf life, so the logistics of regulating the supply is complex and some would be out of date before there are used – due to the limited amount of times being used.

Return Address: Ynysmeurig House, Unit 3, Navigation Park, Abercynon, CF45 4SN

- Every GP/Practice Nurse working within Cwm Taf would require the same training plus have to undertake yearly updates in addition to this.
- Internal and External Quality Assurance would need to be carried out by every individual who has a meter.

Discussions have commenced within the Health Board with regard to how the above issues can be overcome and support a full roll out. One possibility being explored is the option around the meter sitting within the Emergency bag/trolley along with a log book and designated persons to undertake the Quality Assurance.

2. The availability of blood glucose testing equipment in GP practices and other primary care settings, and data in relation to the number of tests carried out and in what circumstances;

Blood glucose testing equipment is readily available in each GP Practice as they are provided with a list of meters recommended by Cwm Taf UHB, (ratified by the Point of Care Testing Team and Diabetes Nurse Specialists) for patient use and these are provided free to the GP practices. These are the meters the GP's and Practice nurses will use if required to perform a test on an ill patient.

As mentioned above GP's carry a meter within their own bag to use if on house calls.

There is no official data re the amount of tests undertaken, however an audit was performed a number of years ago requesting this information and it showed that the meters were used infrequently within the practices: once a month or less in most practices for use with an ill patient. Practice Nurses use them more frequently whilst educating people already diagnosed with diabetes, on how to self monitor. Circumstances where a meter may be required to be used to assess an ill patient: Vomiting/ abdominal pain in children, osmotic symptoms, Seizures, unconscious person, Confused/unwell person, etc.

District Nurses are provided with their own meters via the UHB, these meters are the same. Training for the meters is standardized with yearly updates; they perform both internal and external quality assurances which are governed by POCT.

3. The arrangements in place to ensure effective dialogue between primary and secondary care. For example your policy in relation to carrying out case reviews in cases of late diagnosis of type 1 (such as when a child presents in DKA).

Cwm Taf has excellent communications within and between primary, community and secondary Care. Primary Care clinicians are advised if they have any concerns they should refer directly to Secondary Care immediately for a review by a Consultant Paediatrician.

This has been improved recently with the opening of opening of the Paediatric Assessment Unit within the Royal Glamorgan Hospital. All the referrals are received and triaged by a consultant paediatrician from 8 AM till 8 PM. This service has been welcomed by GPs.

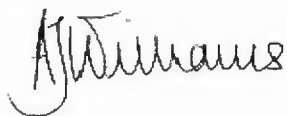
Cwm Taf has also invested in a Primary Care Diabetes Nurse Facilitator and 3 additional Primary Care Diabetes Nurse Specialists whose role it is to work closely with GP practices and teams. They are available to offer immediate support and advice to primary care teams on an individual case by case basis as well as general advice.

The Health Board holds a regular Diabetes Clinical Delivery & Planning Group on which there is representation from all stakeholders involved in delivering diabetes care. This includes consultants, GP and secondary care Diabetes Nurse Specialists, and also the Primary Care Diabetes Nurse Specialists to ensure effective dialogue between Primary and Secondary Care. The purpose of this group is to oversee the effective delivery of good quality care for patients with Diabetes in Cwm Taf. Blood Glucose Monitoring is a standard agenda item, along with patient / service user update and improvements against the delivery plan.

Where necessary individual case reviews are undertaken and lessons learnt are shared across the service. All clinicians have a responsibility to report significant incidents via Datix and every GP surgery is required to note, investigate and review significant incidents as well. Where necessary and appropriate, GPs are asked to include late diagnosis within their GP appraisal. The Primary Care Directorate produces a clinical governance newsletter which includes cases and lessons learnt from General Practice and from the Ombudsman reports and this is shared with all the GP contractors and their wider teams.

Any specific concerns are communicated from Consultant to GP via letter and updates sharing lessons learnt are offered to Practices as needed.

Yours sincerely



Mrs Allison Williams
Chief Executive/Prif Weithredydd



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Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Our Ref: JP/RB/AS

Direct Line: 01633 435958

1st September 2017

David J Rowlands AC/AM
Cadeirydd/Chair
Cynulliad Cenedlaethol Cymru Y Pwllgor Deisebau/
National Assembly for Wales Petitions Committee

SeneddPetitions@assembly.wales

Dear Mr Rowlands

Re: Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter dated 4 August 2017 requesting further information in relation to the above petition with regard to:

- The policy of the Health Board in relation to point of care blood glucose testing in primary care settings, including quality assurance and governance arrangements;
- The availability of blood glucose testing equipment in GP practices and other primary care settings, and data in relation to the number of tests carried out and in what circumstances;
- The arrangements in place to ensure effective dialogue between primary and secondary care. For example the policy in relation to carrying out case reviews in cases of late diagnosis of type 1 (such as when a child presents in DKA).

Aneurin Bevan University Health Board expects point of care blood glucose testing to be available in all GP Practices and Out of Hours settings. The quality assurance and governance arrangements rest with the independent contractors and the Health Board requires appropriate arrangements to be in place in this regard.

Bwrdd Iechyd Prifysgol Aneurin Bevan

Pencadlys,
Ysbyty Sant Cadog
Ffordd Y Lodj
Caerllion
Casnewydd
De Cymru NP18 3XQ
Ffôn: 01633 436700
E-bost: abhb.enquiries@wales.nhs.uk

Aneurin Bevan University Health Board

Headquarters
St Cadoc's Hospital
Lodge Road
Caerleon
Newport
South Wales NP18 3XQ
Tel No: 01633 436700
Email: abhb.enquiries@wales.nhs.uk



Bwrdd Iechyd Prifysgol Aneurin Bevan yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Aneurin Bevan
Aneurin Bevan University Health Board is the operational name of Aneurin Bevan University Local Health Board

Point of care testing equipment is widely available across the GP Practices and other primary care settings, and the primary care diabetes team has been actively promoting the need for blood glucose monitoring equipment in each GP surgery room and for blood ketone testing meters to be available in each surgery.

The importance of ongoing education and training regarding the testing, diagnosis and management of diabetes in children and young people is well recognised and a learning event was held recently, which was well attended from a range of colleagues in primary care and across the Health Board area. The Health Board encourages all healthcare professionals working in areas where diabetes diagnosis and management forms part of their service provision to undertake the DIATIPs training programme. In addition Dr David Millar-Jones, one of our GPs has been directly involved in the development of the POCKET Medic films for diagnosing diabetes in children. These videos are an excellent resource for educating both the public and healthcare professionals and Dr Millar-Jones is currently developing an on-line learning module.

With regard to effective dialogue between primary and secondary care and learning around late diagnosis, our secondary care clinicians always ask families at the time of diagnosis whether they have had any contact with primary care or other healthcare professionals in the week or so prior to diagnosis. Where it is identified that this has been the case, the clinicians make contact with the GP to request a review of the case to identify lessons learnt. I have asked our Director of Therapies and Health Science, who is the executive lead for diabetes to facilitate a conversation at the next Diabetes Planning and Delivery Group to identify whether this audit process could be improved and further developed.

I trust that this response answers your queries. Please do not hesitate to contact me for further information if required.

Yours sincerely



Judith Paget
Chief Executive/Prif Weithredwr



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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Block 5, Carlton Court
St Asaph Business Park
St Asaph
Denbighshire
LL17 0JG

Committee Clerking Team

Via e-mail:

SeneddPetitions@assembly.wales

Ein cyf / Our ref: GD/MO/4653/1114

Eich cyf / Your ref:

☎: 01745 448788 ext 6364

Gofynnwch am / Ask for: Dawn Lees

E-bost / Email: dawn.lees@wales.nhs.uk

Dyddiad / Date: 20th September 2017

Dear Clerk,

Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Further to your letter dated 4th August, in respect of the above Petition, I have discussed this with colleagues from the Diabetes Specialty Service who have sought advice from the Clinical Diabetes lead for Wales and the Diabetes National Specialist Advisory Group. The collective view is that NICE guidance should be adhered to and to ensure that diabetes education for Primary Care Health Professionals includes raising the awareness of the classic symptoms for Type 1 diabetes and prompts 'on the spot' finger prick blood glucose testing for any individual be that an adult, child or young person who presents with such symptoms. In support of this I can confirm that the Children & Young People's diabetes network in Wales corresponded on this matter in November last year as follows;

'As a Network we strongly recommend all NHS staff adhere to NICE guidelines, which state that the characteristics of type 1 diabetes in children and young people include polyuria, polydipsia, weight loss and tiredness and that children and young people with suspected type 1 diabetes should be referred immediately (on the same day) to the Paediatric Diabetes team.

Many of the recommendations the petitioners make in their correspondence to the committee are of excellent value and many are being pursued by ourselves, primary care colleagues and Diabetes UK Cymru. These include additional training for primary care staff, the provision of glucose meters to GP's / practice nurses and a need for health boards to be aware of and report on pathways of care and DKA rates at diagnosis'.

Furthermore, I have sought the views of Diabetes Specialist Leads on the practicalities of global Diabetes screening of all children who present at their GP surgery, regardless of whether they present with symptoms or not, and the consensus is that it is not a practical approach nor is it felt appropriate to finger prick test all children routinely, without any evidence that such screening is effective and this would not be desirable from the child's point who may object to such a procedure whenever presenting at a GP surgery.



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They do, however, agree with the importance of continuing efforts to educate all healthcare professionals of the early signs of Type 1 Diabetes in children and the need to undertake finger prick testing on the spot and it was suggested to include such training in the Diabetes LES. We therefore acknowledge the importance of supporting the awareness campaign to ensure that presenting symptoms are acted upon appropriately.

Whilst the primary care sector are not part of BCUHB's point of care blood glucose contract, there are regular supplies of new preferred formulary meters available in Primary Care. This enables all surgeries to have access to new glucose testing meters for self-monitoring of blood glucose and avoid any instances when a finger prick blood glucose measurement couldn't be undertaken in a GP surgery.

Furthermore, one of the meters also has the capability to measure blood ketone levels which would help to indicate a risk for Diabetic Keto-Acidosis (DKA). Whilst blips into the Diabetic Nursing Services are recorded, data is not routinely requested from primary care regarding the number of POC tests undertaken opportunistically based on presenting symptoms.

I trust this response is satisfactory in respect of the queries raised however, if you require any further information please do not hesitate to contact me

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Gary Doherty'.

Gary Doherty
Prif Weithredwr
Chief Executive

Ein cyf/Our ref: CEO.1685.0817

Eich cyf/Your ref: Kelly Sursona

Gofynnwch am/Please ask for: 01267 239581

Rhif Ffôn /Telephone: 01267 239579

Ffacs/Facsimile:

E-bost/E-mail: Kelly.sursona@wales.nhs.uk

Dyddiad/Date: 29 September 2017

Swyddfeydd Corfforaethol, Adeilad Ystwyth
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building
Hafan Derwen, St Davids Park, Job's Well Road,
Carmarthen, Carmarthenshire, SA31 3BB

David J Rowlands AC/AM
Chair
National Assembly for Wales
Petitions Committee
Cardiff Bay
Cardiff

Dear David

RE: Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter of 4 August 2017. I apologise for not providing a response from the Health Board to your letter of 23 February 2017 which requested our diagnosis and referral pathways for type 1 diabetes and diabetic ketoacidosis (DKA) in children and young people.

Within the Health Board area, since January 2017, 17 children with a new diagnosis of type 1 diabetes have attended appointments with the Hywel Dda paediatric service. Six patients were admitted as inpatients with DKA. Once diagnosed all children and young people remain under the care of the multidisciplinary team (MDT) within the Hywel Dda secondary care service.

- The Health Board Point of Care Testing Policy is linked to the Welsh Scientific Advisory Committee's Policy on the management of Point of Care Testing (POCT). "What, When and How?" (May 2017). The Health Board policy is available to all staff via the intranet, and in order to inform all Health Board staff of this a global email was issued to all directorate leads, general managers, medical and nursing staff and primary care practice managers. There is currently a training programme in progress on POCT for all relevant staff. Within the POCT policy there is information on

standard operating procedures and instructions to ensure quality assurance.

- Blood glucose testing equipment should be available in all primary care practices. Health professionals in primary care will undertake a blood glucose test if there is clinical evidence indicating the need.
- There is a POCT subcommittee within the Health Board, and included in this committee is primary care representation. The subcommittee reports into the Health Board Medical Devices Committee.

The paediatric secondary care team utilise the primary care newsletters to educate primary care colleagues on late diagnosis.

The Health Board has a newly appointed Paediatric Consultant due to take up post in the Autumn of this year. There has, until this time, been no capacity within the Health Board to undertake formal case reviews, however with the addition of the Paediatric Consultant the paediatrics team has planned the development of a guide on the management of late diagnosis. In addition, there is an annual diabetes update study day held locally each year.

Whilst it is difficult to hear of a young person dying from a treatable illness it is unclear what introducing routine screening for Type 1 diabetes in children and young people would accomplish. Several questions would have to be answered including what age at which this would be carried out, when would this be done and how? The provision of this would place additional demand on an already challenged primary care service with no clear evidence to suggest that this would prevent a similar incident.

The Health Board would welcome support and I suggest that the way forward is to raise the profile and further educate all health professionals in understanding the signs and symptoms of Type 1 diabetes across primary care, community and secondary care.

Yours sincerely



Steve Moore
Chief Executive

P-04-682 Introduce Routine Screening for Type 1 Diabetes in Children and Young People – Royal College of Paediatrics and Child Health to the Committee, 30.08.2017

Dear Mr Rowlands

Thank you for your recent letter to Dr Mair Parry and the Royal College of Paediatrics and Child Health (RCPCH) regarding Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People.

Having consulted with RCPCH members in Wales who specialise in diabetes, we feel that our response to your questions is best set out in the letter sent by Dr Christopher Bidder on Behalf of Children & Young People Wales Diabetes Network to the Chair of the Health, Social Care and Sport Committee dated 16.11.16, regarding this issue. I have attached a copy of that letter for convenience. Dr Bidder is of course a member of the RCPCH as well as being Chair of the Children & Young People Wales Diabetes Network.

This letter sets out our position on the first question in particular, which is that NHS Wales should be working at applying NICE guidance consistently. With reference to your other two specific questions, we would add that as paediatricians, our members are not in a position to speak on behalf of primary care colleagues, to whom you may wish to direct those questions.

We welcome the petitioner's aim to raise awareness of the signs/symptoms and to improve early diagnosis of type 1 diabetes and reiterate the final point made in the letter that if the Committee wishes to hear further evidence from paediatricians with expertise in diabetes at a Committee session, we would be happy to facilitate this.

Best wishes,

Gethin Jones

External Affairs Manager, Wales / Rheolwr Materion Allanol, Cymru
Royal College of Paediatrics and Child Health / Coleg Brenhinol Pediatreg a Iechyd
Plant



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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board

☎ Direct line/Rhif llinell union: 01792 530745

📠 Fax/ffacs:

✉ email:

DEPARTMENT OF CHILD HEALTH
Morrison Hospital
Morrison
Swansea, SA6 6NL

Our ref: CB/hjw
Your ref:

Date: 16/11/16

Dr Dai Lloyd
AM & Chair of Health & Social Care & Support Committee
National Assembly for Wales
Health & Social Care & Support committee
Cardiff
CF99 1NA

Dear Dr Lloyd

Thank you for your letter dated 10th November 2016. The Children and Young People's Wales Diabetes Network (& Brecon Group) welcomes the aim of the petitioners to see an earlier diagnosis of type 1 diabetes and a reduction in the number of children and young people where a delay leads to potential life-threatening Diabetic Ketoacidosis (DKA).

The Children and Young People's Wales Diabetes Network (& Brecon Group) is comprised of multi-disciplinary team members working in all 14 paediatric diabetes units in Wales. Our membership includes paediatricians, specialist nurses, dietitians and child psychologists. We also have representation from the third sector and parent representatives on our steering group.

Engaging primary care colleagues to reduce the incidence of DKA at diagnosis is one of the priority areas for our network. We continue to pursue a number of different themes to attempt to reduce the frequency of DKA at the time of diagnosis for children and young people with Type 1 diabetes in Wales by making an earlier diagnosis where possible. This includes:-

Research

The Early Detection of Type 1 Diabetes in Youth (EDDY) study carried out in Cardiff University recently reported the results of their feasibility study. The study aimed to assess the feasibility of developing / delivering a community educational intervention for parents of children under 18 years of age and GP / practice nurses in Cardiff, the Vale of Glamorgan and Bridgend, to increase the awareness of early symptoms of type 1 diabetes. The intervention included 120,000 reusable shopping bags and bilingual leaflets for delivery via 329 schools and nurseries (covering 105,000 children) and for GP's and practice nurses the delivery of glucose / ketone meters and single use lancets with posters, stickers and education sessions delivered to 102 practices.

The conclusion of the study was that delivery of the intervention was feasible and although the study was not designed to show a clinical effect, (such as a reduction in rates of DKA at diagnosis), anecdotal reports suggest the impact from the process evaluation is encouraging. The study authors are now looking for funding to conduct a much larger study that would be powered to show a reduction in DKA at diagnosis.

Collaboration with third sector organizations

The network continues to work closely with Diabetes UK Cymru regarding their planned 2017 public health campaign. We have met regularly with Diabetes UK Cymru to provide advice and support for their activities and will continue to do so.

As part of this collaboration we are working on conveying key clinical messages to primary care colleagues through NHS communication channels. These messages will urge primary care colleagues to proactively ask

about the '4 Ts' used to diagnose Type 1 (Toilet, Thirsty, Thinner, Tired) and encourage the use of a fifth and sixth 'T' – to TEST TODAY. Immediate near patient blood glucose testing of suspected diabetes in children and young people is the NICE standard.

Collaboration with primary care colleagues

The network coordinator has met with Dr Alistair Roeves and Dr David Miller-Jones, who both have leadership roles with regard to diabetes in primary care in Wales. We will continue to work with them to develop interventions and education to support learning in primary care. Dr Roeves has suggested making every new diagnosis of a child with diabetes a learning event within GP Clusters, led by primary care colleagues and we will explore this further with him. Dr Roeves has also suggested including a commitment to following the correct procedure at diagnosis within GP Cluster plans as part of this learning programme. This would be in addition to the communications campaigns listed above.

We have recently heard of a scheme in the West Midlands introducing a prompt on the electronic request system that the GP's use, such that should they ever request a formal laboratory blood glucose test for a child under the age of 18, then a message will appear on screen reminding them that this should be done as an immediate finger prick glucose. We will raise this with our colleagues and see if a similar electronic prompt is feasible in Wales.

Dr David Millar-Jones has also suggested that all GPs in Wales complete the e-learning module on diagnosis of diabetes produced by the Primary Care Diabetes Society. As a network, we support this proposal and would like to see all primary care clinical colleagues complete this learning.

Research and screening

There are a number of research pathways being explored around the world to consider the potentially attractive possibility of screening for Type 1 diabetes in children. One suggested pathway would be to identify children at increased risk, either because of their family history, through genetic screening of all children done at the time of birth or through screening of all children via blood testing for auto-antibodies around the age of 2 years. I believe the petitioners refer to the FR1DA study in their correspondence currently taking place in Bavaria. It is suggested that if 2 auto-antibodies are present in the blood stream, then children should be repeatedly screened at 1-6 monthly intervals with oral glucose tolerance tests looking for the emergence of abnormal blood glucose levels. Once abnormal blood glucose levels are present, some authors suggest that it may be possible to intervene with as yet unproven immune therapy to either prevent or defer the onset of Type 1 diabetes. In addition to repeated blood glucose testing, the FR1DA study is evaluating education for families to attempt to reduce the incidence of DKA at diagnosis. The FR1DA authors acknowledge that a limitation of their study is that it does not attempt to address the socio-economic cost of screening. Given the highly intensive nature of the screening process described, it is unclear whether it will be possible to prove that it will be of overall health benefit, or deliver a health economics model that makes it applicable to clinical practice. Indeed, in a journal article in 2015, the conclusion drawn from a health economics evaluation of population screening was that current screening costs far outweigh the economic benefits.

The Wales network continues to work closely with the 10 English networks to evaluate research and introduce best practice into our clinics.

Difficulties with the petitioner's proposal to screen unwell children

As a clinical network, we are unable to support the specific proposal raised by the petitioners calling for, "a **mandatory** duty for all GPs and healthcare professionals in a primary care setting to carry out the finger prick blood test for all children who present to them with an illness that could be masking Type 1." There are several reasons why such an approach would not meet the essential criteria of a good screening test:

- 1) There is a lack of evidence from research studies that testing whole populations of unwell children is of benefit to prevent DKA at diagnosis. Tragic cases, such as that of Peter Baldwin, appear to be exceptionally rare.
- 2) Transient stress hyperglycaemia is very common in unwell children. Studies report that between 3.8 and 4.7% of children presenting to emergency departments for any reason have elevated glucose levels and for febrile children this rate rises as high as 11.9% in one study. Transient stress hyperglycaemia does not appear to be associated with an increased risk of later developing diabetes.
- 3) Due to the lack of specificity of glucose testing in unwell children, there is a significant risk of harm from this approach; i.e. that in order to identify a very small number of cases such as Peter's, very

large numbers of normal children with transient stress hyperglycaemia then undergo follow up including unnecessary painful investigations and anxiety for their families.

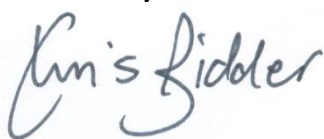
As a Network we strongly recommend all NHS staff adhere to NICE guidelines, which state that the characteristics of type 1 diabetes in children and young people include polyuria, polydipsia, weight loss and tiredness and that children and young people with suspected type 1 diabetes should be referred immediately (on the same day) to the Paediatric Diabetes team.

Many of the recommendations the petitioners make in their correspondence to the committee are of excellent value and many are being pursued by ourselves, primary care colleagues and Diabetes UK Cymru. These include additional training for primary care staff, the provision of glucose meters to GP's / practice nurses and a need for health boards to be aware of and report on pathways of care and DKA rates at diagnosis.

I am happy to be contacted to answer further queries if this would be beneficial to the committee

Best wishes,

Yours sincerely

A handwritten signature in blue ink that reads "Chris Bidder". The signature is written in a cursive, flowing style.

Dr Christopher Bidder

On Behalf of Children & Young People Wales Diabetes Network (& Brecon Group)



31 August 2017

Response to the National Assembly Petitions Committee - P-04-682 - Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for approaching the Royal College of General Practitioners Wales to provide information concerning this petition. The Royal College of GPs Wales represents a network of around 2,000 GPs, aiming to improve care for patients. We work to encourage and maintain the highest standards of general medical practice and act as the voice of GPs on resources, education, training, research and clinical standards.

This petition has been raised following a tragic case and we sympathise with the family of Peter Baldwin. Most GPs will only see one child diagnosed with a new diabetes case in their career and we support the increase of awareness for both clinicians and the public.

The Petitions Committee is seeking the view of RCGP Wales on the following areas:

- **the role of primary care clinicians in improving early diagnosis of type 1 diabetes and any barriers or opportunities that (the College) can identify;**

General Practitioners are ideally placed within the community to make the diagnosis of Type 1 diabetes. School children visit the GP between two and three times a year, but this figure is doubled in the under-fives (who visit the GP an average of six times per year). We are frequently the first person an unwell child will see and like all other health care professionals it can be a challenge recognising the symptoms of Type 1 diabetes.

The incidence of childhood diabetes is varied in different populations and is gradually increasing. Asians have a higher prevalence. The incidence of new cases of Type 1 Diabetes is currently reported to be 22.8 per 100,000 children under 15 years with a peak age of diagnosis of 9-14 years. The prevalence or number of cases is 187/100,000 children under 15 years. This means that each individual surgery may not have a diabetic child. (HQIP & RCPCH: National Paediatric Diabetes Audit 2013/14: Report 1: Care Processes and Outcomes

<http://www.rcpch.ac.uk/system/files/protected/page/2014%20NPDA%20Report%201%202014%20FINAL.pdf>) Type 2 Diabetes is now being diagnosed in over weight teenagers but again the numbers are small. (HQIP and RCPCH: National Paediatric Audit

2012/13: <http://www.rcpch.ac.uk/system/files/protected/page/NPDA%202012-13%20Core%20Report%202nd%20FINAL%20v%203.3.pdf>)

The RCGP GP Training curriculum statements 3.04 and 3.17 include recognition of Paediatric emergencies (of which Diagnosis of Type 1 diabetes would be included) and the impact this has on the child and their family. Educational opportunities are provided both by RCGP and other agencies because there is recognition that it is important that GPs keep up to date with continued professional development, which includes the management of paediatric emergencies.

We cannot ignore, however, the challenging climate primary care currently finds itself in, with the increasing demand vs recruitment and retention difficulties, which puts at risk continuity of care and knowledge of the individual child and family as well as time restraints for each consultation.

The petition specifically asks for screening. Screening programmes involve testing populations for preclinical conditions. Screening is not appropriate for a symptomatic person or child as this is a diagnostic test. There are studies going on in the USA (Trialnet) looking at genetic markers in at risk populations but these are not proven and further research will need to be done before this is considered acceptable to fulfil the NHS population screening criteria. Screening programmes should:

- be capable of detecting a high proportion of disease in its preclinical state
- be safe to administer
- be reasonable in cost
- lead to demonstrated improved health outcomes
- be widely available, as must the interventions that follow a positive result

<https://www.gov.uk/government/publications/evidence-review-criteria-national-screening-programmes/criteria-for-appraising-the-viability-effectiveness-and-appropriateness-of-a-screening-programme>

• whether patients and parents/carers should be routinely asked about the ‘Four Ts’ symptoms of type 1 diabetes when unwell children present in primary care settings;

The four Ts are in our opinion, frequently considered in the assessment of the unwell child. The Four Ts – toilet a lot, thirst, thinner and tiredness - are all symptoms and should be taken seriously, particularly in young children. Unfortunately, they are non-specific symptoms and occur in other conditions such as gastroenteritis, chronic urinary infections, flu-like illness, alcohol intoxication or misuse. Sadly they may not always be present when a child presents with diabetes and or may be masked by another acute condition linked to the development of diabetes. Weight loss in particular is often missing or masked by dehydration in the acute presentation. Urine sugar testing is relative easy both in the surgery and on a home visit. Obtaining samples can be difficult especially in smaller children. There should be increased awareness in the population, particularly among parents and carers of the potential importance of bringing a urine sample to an appointment with an unwell child.

We agree that there needs to be increased awareness of diabetes and particularly ketoacidosis and the risks to children and young people for primary care clinicians. Doctors do continual professional development and endocrine problems and paediatric emergencies should form part of the continuous cycle.

- **the scope for point of care blood glucose testing to be carried out more routinely when unwell children present in primary care settings.**

Point of care blood glucose monitoring is routinely used in primary care in the assessment and management of Type1 and Type2 diabetes. It is important to recognise the importance of appropriate use of this, whether adult or child. Individual clinicians use their judgment regarding when to use this but we would not want testing to delay emergency treatment if needed. There may be scope to increase the use of point of care blood glucose testing in children, we feel that the use of this should be carefully considered in collaboration with other professional and clinical bodies. There is scope for increasing awareness in the use of point of care blood glucose testing in children along with an increased awareness of the 'Four Ts' not only among health care professionals but also amongst the general public.

Y Gymdeithas Feddygol Brydeinig
Pumed Llawr
2 Pentir Caspian
Ffordd Caspian
Bae Caerdydd
Caerdydd
CF10 4DQ

British Medical Association
Fifth Floor
2 Caspian Point
Caspian Way
Cardiff Bay
Cardiff
CF10 4DQ

BMA

Cymru Wales

David Rowlands AM,
Chair, Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

1 September 2017

Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Dear David

Many thanks for your letter addressed to Dr Philip Banfield regarding the petition on Type 1 Diabetes in Children and Young People received by your committee. I would like to take the opportunity to inform you that I have recently been elected as Chair of the BMA's Welsh Council, succeeding Dr Banfield in this position, and am therefore responding in this capacity.

To begin, I acknowledge the sad circumstances which led to this petition and offer our sincere condolences to the family of Peter Baldwin.

In 2013, BMA Cymru Wales responded to the consultation on the Diabetes Delivery Plan for Wales, and emphasised the importance of early diagnosis and early access to specialist services so that children and young people with type 1 diabetes can lead a normal life as possible.

As you note in your summary of the petition, we consider that the important issue at hand is the raising of awareness of the signs and symptoms of type 1 diabetes. Our members have suggested this is by far the most vital element of early diagnosis rather than routine or universal screening, which is often inappropriate for a condition that is seldom, if ever, completely asymptomatic. The introduction of routine screening could have an impact on resources and also lead to capacity issues within an already stretched primary care arena – this would be an essential consideration in the development of any such programme.

Cyfarwyddwr Cenedlaethol (Cymru)/National director (Wales):

Rachel Podolak

Cofrestrwyd yn Gwmni Cyfyngedig trwy Warant. Rhif Cofrestredig: 8848 Lloegr
Swyddfa gofrestrdig: BMA House, Tavistock Square, Llundain, WC1H 9JP.
Rhestrwyd yn Undeb Llafur o dan Ddeddf Undebau Llafur a Chysylltiadau Llafur 1974.
Registered as a Company limited by Guarantee. Registered No. 8848 England.
Registered office: BMA House, Tavistock Square, London, WC1H 9JP.
Listed as a Trade Union under the Trade Union and Labour Relations Act 1974.



This awareness raising, including enhancing knowledge of the 'Four Ts', cannot be realised by GPs alone. We would suggest that a sustained, properly-resourced awareness campaign featured in schools, community and healthcare settings – targeting parents and carers, teachers, school pupils of all ages, and wider health and social care professionals - is necessary.

Our members working in primary care have informed us that certain GP practices have introduced various systems that encourage early diagnosis of type 1 diabetes. For instance, in one practice young people who could be at risk of type 1 diabetes, particularly those under 16 displaying feverish symptoms or otherwise unwell, are prompted to provide urine samples. This allows for the practice to check for abnormal glucose and ketone levels, and follow-up with further testing if necessary. This example appears to support the spirit of the petition and we would gladly provide further details.

In conclusion, our membership agrees with the intention of the petitioner in seeking to heighten the understanding of type 1 diabetes and its symptoms in order to encourage earlier diagnosis. Therefore, we suggest that investment should be prioritised towards raising awareness of the condition's symptoms.

Yours sincerely



Dr David Bailey
Chair, BMA Welsh Council

6 September 2017

David J Rowlands AM
Chair of Petitions Committee
National Assembly for Wales
Ty Hywel
Cardiff
CF99 1NA

Dear David Rowlands AM

Re: Petition P-04-682 Routine Screening for Type 1 Diabetes in Children and Young People

Thank you for your letter regarding the above petition and the opportunity for the Royal College of Nursing Wales to provide evidence in relation to the different areas specified in the letter. Please note our responses to the three areas below:

1. The role of primary care clinicians in improving early diagnosis of type 1 diabetes, and any barriers or opportunities that you identify

1.1 Opportunities

Nurses are key primary care clinicians who provide care across the lifespan of individuals and communities. Midwives are present throughout the antenatal and early post-natal period, where diabetes is pertinent to both mother and baby. Health Visitors are involved with the health and care of children right from the start of their lives and the wider family, whilst School Nurses are involved in the health care of children and young people of school age. Practice Nurses may see people of all ages for a range of interventions, within General Practice. Hence, nurses are uniquely placed to play a role in preventative healthcare and the promotion of public health amongst children and young people.

Continued...

Nurses are already involved in a number of existing initiatives and schemes which could be strengthened or enhanced in order to incorporate the principles of early diagnosis. For instance, 'Making Every Contact Count' is centred on using every opportunity to ask individuals the right questions to find out about their underlying health needs and deliver advice to improve health and wellbeing. Health care staff should feel empowered to promote healthy lifestyles, supporting behaviour change and contribute to reducing the risk of chronic disease. The Committee may want to consider the extent to which the 'Making Every Contact Count' initiative is helping to achieve those aspirations. Similarly, an assessment of the Healthy Child Wales Programme and its success in delivering evidence based preventative and early intervention measures, and support on parenting and healthy lifestyle choices, could also be considered.

Over a number of years the care provided for people with diabetes has been quantified via primary care audits, which have consistently highlighted the quality of care and variation in practice across Wales. New initiatives such as the Primary Care Measures are attempting to evaluate patient outcomes within areas such as measuring obesity in children.

The Welsh Government also have the [Diabetes Delivery Plan 2016 – 2020](#) and that has included special considerations for children and young people, including targets for paediatric peer audit and the paediatric diabetes network. The impact and effectiveness of the delivery plan should be monitored carefully, with in-depth consideration of whether or not it is achieving the best possible outcomes from children in Wales.

1.2 Barriers

A fundamental barrier to improving early diagnosis of type 1 diabetes in primary care relates to staffing resource. Workforce planning for this aspect of health care provision has not been robust, with very little data to inform and build a sustainable nursing workforce for the future.

Additionally, the accessibility and opportunity to uptake education and training related to diabetes is hugely variable, as is the financial support for, and release of, General Practice Nurses to undertake education.

Currently, there are no agreed national standards for primary care education relating to diabetes. According to the Welsh Government's Diabetes Delivery Plan, Health Boards should ensure they have appropriate numbers of staff with the right skills set in relation to population health needs assessment and that healthcare professionals are sufficiently knowledgeable to identify, refer and manage, as appropriate, children and young people with diabetes. For General Practice and the independent sector however, there can be significant variation in the identification of the educational

Continued...

needs of nursing staff within these settings.

Similarly, the Delivery Plan also states that having the right skills set in relation to population health needs assessment is essential, and that the paediatric diabetes network should work through primary care clusters to raise awareness and support identification of symptoms of type 1 diabetes. However, this is not yet evident within the primary care 'Pace Setter' or 'Emerging Model' programmes.

2. Whether patients and parents/carers should be routinely asked about the 'Four Ts' symptoms of type 1 diabetes when unwell children present in primary care settings

The 'Four Ts' should be asked routinely as part of a history taking exercise. However, one or more of them, if present, are symptoms that can be associated with a range of illnesses, especially in children and young people. If these symptoms are presented together then they would be considered red flags and alert the clinician immediately to a diagnosis of diabetes. However, the symptoms rarely present in uniformity and the highly skilled art of history taking during a nurse consultation is imperative in securing an accurate diagnosis.

3. The scope for point of care blood glucose testing to be carried out more routinely when unwell children present in primary care settings

In principle, there would be no reason why blood glucose testing of children and young people shouldn't be carried out more routinely in primary care settings, but the feasibility of doing so will depend on the availability of equipment, staff and facilities. Devices are portable which provides flexibility about where the test can be carried out, but staff have to be adequately trained, and the resources available to carry out the test and any follow-ups.

Thank you again for the opportunity for the Royal College of Nursing to provide evidence for this petition. We hope the above is helpful to you and the wider Committee. Please do not hesitate to contact my office if any further information is required.

Kind regards

Yours sincerely



**TINA DONNELLY, CBE, TD, DL, FRCN
DIRECTOR, RCN WALES**

Agenda Item 3.2

P-04-628 Access to BSL for All

Petition wording

We call on the National Assembly for Wales to urge the Welsh Government to improve access to Education and services in British Sign Language to improve the quality of life for Deaf people of all ages.

Improve Access for families to learn BSL: When a child is diagnosed as being Deaf/hard of hearing parents should be offered free/subsidised BSL lessons (BSL level one costs approximately £300 per person). By using speech alone, Deaf children struggle/fail to develop communication skills missing important milestones. Learning other languages through BSL (English/Welsh) will improve the child's understanding and comprehension.

Introduce BSL on the National Curriculum: Deaf Children and young people who are taught BSL at an early age will have better access to their education and an improved wellbeing. BSL should be available in schools and taught by qualified Deaf teachers, for all to learn as this would achieve better access for all in society. We believe that BSL should be offered as a language for all learners as a qualification. GCSE Welsh (and other modern languages) are not always offered to Deaf students: this also needs to be improved.

Improving access to Education in BSL for Deaf Children and Young People: currently they have limited access to Education in BSL, and often experience under qualified support. There is a massive gap in the education of Deaf children, as many are wrongly treated as having a Learning Disability. This has a negative impact on their development in life, reducing independence with poor education, resulting in under-employment. They need adequately qualified Communication Support Workers available in school.

Making Services and resources accessible in BSL for Deaf young people: enabling BSL users to access information in their preferred language via digital resources to services such as Education, Health care, Social Services and public transport, giving them equality to access as an equivalent to Welsh Language access.

Organisation: Deffo!

Lead petitioner: Cathie Robins-Talbot

First considered by the Committee:

Number of signatures: 502 online signatures. 660 paper signatures . total
=1162 signatures

Agenda Item 3.3

P-05-760 Stop Compulsory Welsh Language GCSE

This petition was submitted by Emma Williams having collected 128 signatures.

Petition text:

We call on the National Assembly for Wales to urge the Welsh Government to change their policy and allow children to drop the Welsh language at GCSE (Key stage 4). Give our children back their choice, do not make the Welsh Language compulsory.

Assembly Constituency and Region.

- Carmarthen West and South Pembrokeshire
- Mid and West Wales

Kirsty Williams AC/AM
Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref P-05-760
Ein cyf/Our ref KW/01624/17
David John Rowlands AM
Chair - Petitions committee.
National Assembly for Wales
Cardiff Bay
Cardiff Bay
CF99 1NA

government.committee.business@wales.gsi.gov.uk

16 October 2017

Dear David

I am replying to your letter of 5 October 2017 regarding additional issues raised by the petitioner, Emma Williams, in response to Petition P-05-760 Stop Compulsory Welsh Language GCSE, issued by your predecessor, Mike Hedges AM.

Welsh language learning forms part of a wide and integrated curriculum, as is fully appropriate to its legal status as an official language of Wales. I respect the petitioner's right to disagree with this long standing policy but, as outlined in my previous response, the study of Welsh remains a key element in the curriculum in Wales to age 16 and there are no plans to change this position. There should be ample opportunities for all learners to develop their core skills while learning Welsh, and learning Welsh should broaden rather than narrow the curriculum.

Being able to understand and speak the language is becoming an increasingly important part of our direction as a nation. In future, organisations in the public and private sector will, increasingly, require staff that can use Welsh confidently for a range of purposes in their jobs. Such developments have implications for the curriculum.

It is against this backdrop that the new GCSE Welsh Second Language (full course) qualification has been introduced. Very few learners following the short course Welsh Second Language GCSEs developed transferable language skills that could be used beyond the classroom. Essentially, the new GCSE will place greater emphasis on speaking and listening skills so young people are better equipped to become more competent and confident Welsh speakers in the future. To clarify, irrespective of whether or not an examination is undertaken in Welsh Second Language, schools must ensure that learners have access to the whole curriculum programme of study. This is a mandatory requirement.

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Kirsty.Williams@llyw.cymru
Correspondence.Kirsty.Williams@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

I understand the pressures that can come into play when considering course options and the specific concern raised over accommodating the study of the three separate sciences and MfL. I should note however, the double science GCSE option introduced in September does cover chemistry, physics and biology content and (subject to suitable results) would also allow progression to study science at A level. That said, it is for individual schools to decide how they can accommodate pupil's subject preferences, including modern foreign languages, at GCSE. We do however encourage schools to work together to help deliver provision, as appropriate.

Funding for statutory age education in schools in Wales, as for other services delivered by Local Government, is provided in the main by the Welsh Government through the Local Government Revenue Settlement Revenue Support Grant (RSG). The funding is not ring-fenced, as the Welsh Government considers that Local Authorities are best placed to judge local needs and circumstances and to fund schools accordingly. Local Authorities are accountable to their electorates for the decisions they make.

Once the RSG has been distributed to Local Authorities, it is the responsibility of individual Authorities to set budgets for their schools which are determined by a local funding formula. The School Funding (Wales) Regulations 2010 require 70% of funding for schools' budgets to be distributed on the basis of pupil numbers. Authorities have discretion to distribute the remaining 30% on the basis of a range of factors so that they can take account of individual school circumstances.

In accordance with the regulatory framework, Local Authorities may take into account in their funding formula whether a pupil is being educated through the medium of Welsh and fund schools accordingly, taking into account the costs involved with delivering the same service through the medium of the Welsh language. This is in recognition that it may cost more to provide the same service in the Welsh language than it does through the English language. For example, there may be additional costs to Welsh Medium Education because there are fewer off the shelf learning resources and pupils may require more intensive language tuition if Welsh is their second language. This is a local consideration for the Authority in supporting the needs of its schools and community. A difference in per pupil funding does not mean that Welsh language pupils are being treated more favourably than their English language counterparts rather it is in recognition that it costs more to provide the same service in the Welsh language than it does through the English language.

For information, the internal Skills Audit we held in 2015 found that around three-quarters of the staff members that the Assembly Commission employs consider themselves to be Welsh learners, to have some bilingual skills or to be fully bilingual. I attach a link to the *Welsh language use survey* report, published in 2015, which provides information on surveyed numbers able to speak Welsh and their use of it:

<http://gov.wales/statistics-and-research/welsh-language-use-survey/?lang=en>.

Yours sincerely



Kirsty Williams AC/AM

Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education

Agenda Item 3.4

P-04-688 TATA Steel Port Talbot Power Plant

This petition was submitted by Peter Bamsey, having collected 531 signatures.

Text of the Petition

We the undersigned call upon the Welsh Government to use all levers at its disposal, including financial levers, to support the completion of a new power plant planned for Port Talbot steels works. The construction of this plant will create jobs and when it is operational it will reduce emissions, reduce Tata's running costs and help to safeguard vital jobs in the area.

Assembly Constituency and Region

- Aberavon
- South Wales West

Ken Skates AC/AM
Ysgrifennydd y Cabinet dros yr Economi a'r Seilwaith
Cabinet Secretary for Economy and Infrastructure



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref P-04-688
Ein cyf/Our ref KS/03562/17

David John Rowlands AM
Chair - Petitions Committee
National Assembly for Wales

government.committee.business@wales.gsi.gov.uk

14 October 2017

Dear

Thank you for letter of 5 October asking for an up-date on discussions involving the Welsh Government over a new power plant at Port Talbot.

At the end of last year, we announced £8m of funding towards an £18m investment by Tata in the improvement of the power plant at Port Talbot to reduce energy costs and cut carbon emissions. We are continuing to discuss a potential package of support with Tata. The detail of those discussions is commercially confidential.

Yours ever,

Ken Skates AC/AM
Ysgrifennydd y Cabinet dros yr Economi a'r Seilwaith
Cabinet Secretary for Economy and Infrastructure

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Ken.Skates@llyw.cymru
Correspondence.Ken.Skates@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Agenda Item 3.5

P-05-738 Public Petition for the Dinas Powys By-Pass

This petition was submitted by V P Driscoll, A R Robertson and R T Harrod, having collected 3,305 signatures – 2,572 on paper and 733 on-line.

Text of the Petition

We the undersigned, call on the National Assembly for Wales to urge the Welsh Government to provide the necessary funding and support for the construction of a Dinas Powys By-Pass.

Assembly Constituency and Region.

- Vale of Glamorgan
- South Wales Central

Date/Dyddiad: 11 October 2017

Ask for/ Gofynwch am: Councillor John Thomas

Telephone/Rhif ffôn: 01446 709469

Fax/Ffacs:

Your Ref/Eich Cyf:

My Ref/Cyf: JWT/ER/JCC/47949

e-mail/e-bost: JWThomas@valeofglamorgan.gov.uk

The Vale of Glamorgan Council
Civic Offices, Holton Road, Barry, CF63 4RU
Tel: (01446) 700111

Textphone/Ffôn Testun: (01446) 709363
www.valeofglamorgan.gov.uk

Cyngor Bro Morgannwg
Swyddfeydd Dinesig, Heol Holton, Y Barri CF63 4RU
Ffôn: (01446) 700111



Mr D J Rowlands
Chair
National Assembly for Wales Petitions Committee
Cardiff BayCardif
CF99 1NA

Dear Mr Rowlands

Petition P-05-738 Public Petition for the Dinas Powys By-Pass

Thank you for your letter dated 5th October 2017 in respect of the above matter.

I can confirm that on 9th October 2017, Cabinet agreed to progress to Stage 2 WeITAG report four options as follows:

- (1) Do minimum
- (2) By-Pass
- (3) Multi-modal
- (4) By-pass and multi-modal options

The link to the Council's website where the Cabinet Report can be viewed is [http://www.valeofglamorgan.gov.uk/Documents/ Committee%20Reports/Cabinet/2017/17-10-09/Reports/Improving-Strategic-Transport-for-Dinas-Powys.pdf](http://www.valeofglamorgan.gov.uk/Documents/Committee%20Reports/Cabinet/2017/17-10-09/Reports/Improving-Strategic-Transport-for-Dinas-Powys.pdf)

It is envisaged that the results of the Stage 2 WeITAG will be presented to Cabinet for consideration in spring 2018.

Please do contact me if you require any further information.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'John W Thomas', written over a white background.

John W Thomas
Leader of the Council

P-05-738 Public Petition for the Dinas Powys By-Pass – Correspondence from the Petitioner to the Committee, 20.10.17

Dear Chair,

P-05-738 – Pwyllgor Deisebau / Petitions Committee

Thank you for your correspondence of today's date, attaching a copy of the latest communication from Vale Council Leader Cllr John Thomas.

On behalf of the petitioners I'd like to put a little more flesh on the bone of how we've arrived at the current situation:

July 31 Arcadis Consulting and Vale Officials present reports to Vale Cabinet suggesting three options to proceed to Stage 2 WeITAG. The original three were: 1.) Minimal Change 2.) By-Pass 3.) Multi Modal.

The Cabinet referred the matter to their Scrutiny Committee for Environment and Regeneration.

September 18 Scrutiny Committee for Environment and Regeneration heard detailed submissions from four members of Dinas Powys By-Pass Steering Group and discussed the matter at length.

They recommended to Cabinet the Options for Stage 2 be extended from three to four, to include the option of 'By-Pass and Multi Modal.'

The Committee further recommended the Cabinet invite Dinas Powys Community Council appoint someone from the local community onto the WeITAG Review Group to oversee the development of Stage 2 and beyond.

October 9 Cabinet ratified the recommendations of the Scrutiny Committee.

October 12 Roger Pattenden B.Sc MICA, a member of the Dinas Powys By-Pass Steering Group, was elected by the Community Council to represent the Community on the Review Group and the Vale Cabinet was duly informed.

Regards,

Rod Harrod, Petitioner,
Dinas Powys By-Pass

Agenda Item 3.6

P-05-748 School Buses for School Children

This petition was submitted by Lynne Chick, having collected 1,239 signatures – 502 on paper and 737 on-line.

Text of the Petition

We call on the National Assembly for Wales to urge the Welsh Government to ensure every child's safety is put first when traveling to and from school.

We want designated school buses so children can travel safely to and from school, each with a seat and seat belt, with no child forced to travel on overcrowded public buses. Children's safety must come first.

Our children have a right to feel safe. Public buses can become over crowded. We have no clue who may board a public bus. Public buses are for public use not school transport. We are not asking for this service to be free, We don't want something for nothing, Just peace of mind that our children are safe when traveling to and from school. We teach our children about stranger danger yet we are expected to send them on a public bus full of strangers daily.

Having lost my daughter under the wheels of a public bus she had travelled home from school in, I feel it's only a matter of time before another parent lives my nightmare if something isn't done to ensure children have a safe means of transport to and from school.

Additional Information

A lot of people will remember my Daughter Louise and the horrific way she lost her life. For those that don't, Louise was 11 years old and had not long started high school. Because of the distance to get to school my children relied on using a public bus. On the 19th March 2001 Louise was due home from Connah's Quay High school at her normal time, only this day the bus was late. I started to worry as I headed out the door I was greeted by Louise's friends telling me she had been run over. I ran to the end of my street to find my beautiful Daughter clinging to life in the road, distressed school children all around. I couldn't understand what had happened. Over months it emerged the bus Louise had travelled home from had been over crowded, adults had stood talking to the driver, there was an alleged push, also a mention her bag had got caught in the door or wheel causing her to be

dragged under the bus she had just alighted from, it was proven the mirrors had blind spots that had been a contributing factor.

After the decision to close a local school, John Summers High School, a lot of parents have spoken to me with concerns for their Child's safety travelling on public buses to and from school. Points have been raised that totally alarm me, So I'm heading a campaign in my Daughter's name to make sure no Child is forced to use public transport buses as school transport.

Assembly Constituency and Region.

- Alyn and Deeside
- North Wales

Agenda Item 3.7

P-05-758 Statue to Honour Billy Boston

This petition was submitted by CIAC's RFC having collected 151 signatures.

Petition text:

We call on the National Assembly for Wales to urge the Welsh Government to honour British & Welsh sporting legend Billy Boston with a statue in Cardiff Bay.

He was born & raised in the docks area of Cardiff and it is about time that his sporting achievements were recognised by his home town & country.

At the beginning of his rugby career he was ignored by his home town club Cardiff RFC and as a result he never achieved his dream of playing at the arms. Cardiff & Wales loss was Wigan's gain as Billy went on to score 478 tries in 487 appearances for the club, some of the other highlights of his career are:

- Three Challenge Cups and an RFL Championship title in 1960
- 24 tries in 31 appearances for Great Britain and he was a member of the team that won the 1960 World Cup

Wigan have recently honoured him with a statue and there is also a statue at Wembley stadium highlighting his impact and status within rugby league.

CIAC's RFC (Billy's first club) are willing to help in way we can with fundraising etc., and we have a current player who is a sculptor who would be more than happy to be involved in the project.

It is time previous wrongs are put right and Billy is given the respect and honour he deserves from Cardiff and Wales, and what better to do that than with a statue in the area of Cardiff where he was born and raised.

Assembly Constituency and Region.

- Cardiff North
- South Wales Central

**P-05-758 Statue to Honour Billy Boston – Correspondence from the
Petitioner to the clerking team, 17.10.17**

Hi Kayleigh,

Apologies for responding sooner, I don't check my Hotmail account very often.

We have approached the Arts Council to ask for their support but they advised that they don't have the resource or capacity to support the project. Based on the advice they provided we are going to set up a charity/trust to start fundraising for the project.

Once we have done this they have suggested that we approach Cardiff County Council and Heritage Lottery for funding support as they believe they provided support for Ivor Novello statue in Cardiff Bay.

Please could you use this email address going forward and please don't hesitate to contact me if you need any more updates.

Thanks

Tom

Agenda Item 3.8

P-05-776 To recognize the three hundredth anniversary of Williams Pantycelyn

This petition was submitted by Aled Gwyn Job, having collected 545 signatures online.

Petition text:

We call on the Welsh Government to recognize and commemorate the three hundredth anniversary of the birth of William Williams, Pantycelyn this year (1717-2017). We believe that Williams Pantycelyn has laid the foundations for the modern Wales through all his hymns (over 900), his various literary works (90), and his tireless mission work for the gospel through the whole of Wales for 40 years. The Methodist Reformation of the 18th century, in which Williams played such a key part, led to the establishment of the first national organization in the history of Wales in 400 years, namely the Welsh Calvinistic Methodists (1811). That in turn triggered a series of further educational, social and political reforms which were instrumental in creating the Modern Wales. Pantycelyn therefore is more than just one of the major figures of the faith tradition in Wales. He is one of the major figures of our national story as Welsh people. It is incumbent upon the Welsh Government to recognize his immense contribution to our nation and we call on the Government to arrange an appropriate celebration once the members have returned to Cardiff in September.

Additional information:

We note that the Welsh Government has organized similar celebrations to mark the contributions of two other prominent Welshmen recently. Last year, the contribution of the children's novelist Roald Dahl was celebrated, and the previous year, the contribution made by the poet Dylan Thomas. Vast sums of Welsh tax payers' money was spent on these events.

With this precedent having been set twice recently, we believe that it would be inexcusable for our national government to refuse to recognize the contribution of Williams Pantycelyn in the same manner.

With all due respect to Dylan Thomas and Roald Dahl, and their individual contributions in the appropriate fields – their contributions to Welsh life cannot be compared with that of the Sweet Songster, William Williams.

There has been fierce public reaction to the recent fiasco of "The Iron Ring" and the idea of spending £400,000 to celebrate the conquest of Wales by Edward I with a piece of art at Flint Castle. The complaint repeatedly expressed by members of the public was how on earth the Welsh Government could be so ignorant and insensitive in relation to Wales's own history?

The celebration and commemoration of the life and work of Williams Pantycelyn in an appropriate manner would indicate that the Welsh Government is sympathetic to our nation's history.

One idea that we would like you to consider is to transfer the funding allocated to the Iron Ring and erect a majestic piece of art in Llandovery to commemorate the Sweet Songster.

Assembly Constituency and Region

- Arfon
- South Wales West



Cyngor Celfyddydau Cymru
Arts Council of Wales

Friday, 20 October 2017

David J Rowlands AM
Chair
Petitions Committee
National Assembly for Wales
Cardiff Bay
Cardiff CF99 1NA

Dear Mr Rowlands

Petition P-05-776:

To recognize the three hundredth anniversary of Williams Pantycelyn

Thank you for your letter of 18 October on the above.

I was interested to read the submission from your petitioner. It is a most eloquent testimonial on behalf of a significant figure in Welsh history.

You asked for information on three matters and I'll respond to each in turn.

1. *Were there any events or activities held during 2017 to commemorate the 300th anniversary of the birth of William Williams?*

I'm not aware of any events held during 2017. Commemorative events are not usually supported by the Arts Council as these tend to fall within the remit of the museums sector or activities funded by the Heritage Lottery Fund in Wales.

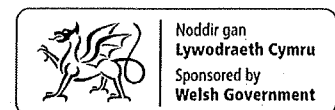
We have, in exceptional circumstances, supported commemorative projects, but these are always in response to major projects either initiated by the Welsh Government or undertaken in partnership with them. (See 2 below.)

2. *If not, what consideration was given to marking this milestone during the year?*

I'm not aware of any discussions about marking the milestone. The Arts Council has been involved in a small number of commemorative projects. Our remit is principally to encourage people to enjoy and take part in the living arts. In other words, work which is current and of the moment.

Plas Bute, Caerdydd CF10 5AL
Ffôn: 0845 8734 900
Ffacs: 029 2044 1400
SMS: 07797 800504
E-bost: gwybodaeth@celf.cymru
Gwefan: www.celf.cymru

Bute Place, Cardiff CF10 5AL
Tel: 0845 8734 900
Fax: 029 2044 1400
SMS: 07797 800504
Email: info@arts.wales
Website: www.arts.wales



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Rydym yn croesawu gohebiaeth yn y Gymraeg a'r Saesneg a'r iaith genedlaethol eraill. We welcome correspondences in Welsh and English, corresponding in Welsh will not lead to a delay.

Examples of the type of project we support would include:

- the plays, projects and events that we helped to commission as part of the Dylan Thomas 100 Festival
- Cardiff's record-breaking public celebration of Roald Dahl's "James and the Giant Peach" (promoted by the Wales Millennium Centre and National Theatre Wales)
- National Theatre Wales' production of Owen Sheers' "Mametz" as part of the First World War Commemorations

I notice from the Committee meeting transcript that it was suggested that:

"...these matters are governed by the Arts Council of Wales, and it's up to them to submit funding requests if they feel it's appropriate."

This isn't quite correct. We don't submit funding requests to the Welsh Government for individual projects or events. We do receive annual grant-in-aid funding from the Welsh Government for our overall activities, as well as funding from the National Lottery.

We support artists and arts organisations through our funding programmes, but any applications for support would have to meet our overall criteria. We wouldn't initiate commemorative events ourselves. However, we would work with the Welsh Government, where appropriate, to assist in their promotion of cultural events that have ambitious cultural, social and economic objectives. The three projects highlighted above are examples of that approach.

3. *My views on the proposals made by the petitioner*

I offer no additional comment on the significance and cultural standing of William Williams. This is amply covered in the petitioner's submission.

I'm aware that major commemorative events take a considerable amount of organisation. (Both the Dylan Thomas and First World War Commemorations were some three years in the planning.) It would therefore be challenging, I fear, to mount any event of significance in what remains of 2017.

I'm not able to comment on the proposal to reallocate any funds that might have been set aside for the so-called "Ring of Iron" public art project. Funds were identified from within specific Welsh Government budgets, and I'm not sure how easily these could be reallocated.

*Yours sincerely,
Nick Capaldi*

Nick Capaldi
Chief Executive



Agenda Item 3.9

P-05-742 Stop Forsythia Closing!

This petition was submitted by Forsythia Youth Centre, having collected 74 signatures. The petition has also collected 533 signatures on an alternative e-petition website.

Text of the Petition

Forsythia Youth Centre is at risk of closing due to the uncertainty surrounding Welsh Government's Communities First funding. Forsythia Youth Centre is a FREE access youth provision which is open: –

- 4 nights a week for 51 weeks of the year;
- Open during the day and the evenings throughout school holidays;
- Open on the weekend if completing project work.

Without fail, Forsythia has a minimum of 50 young people aged 11–20 from across Gurnos, Galon Uchaf, Pant, Dowlais and Penydarren, attending every night. Without Forsythia Youth Centre, young people would not have a safe place to access within their community and they would not have anywhere else to go due to a lack of other provision aimed at young people.

Forsythia Youth Centre offers young people the opportunity to take part in youth projects, such as 'Commit to Quit' with Ash Wales, Erasmus+ project on 'Attitudes and Values of Youth Work', and the 'Agenda Project' with Cardiff University. Young people are also provided the opportunity to access organisations such as Drug Aid, Sexual Health projects, Smoking Cessation, Mental Health and Confidence Building, Skills and Qualifications and receive in house support from qualified youth workers.

Young people and the workers are very concerned about the uncertainty surrounding the Communities First funding, as without this funding, Forsythia will have to close down.

We call on the National Assembly for Wales to urge the Welsh Government to ensure that potential changes to the Communities First programme do not cause the closure of Forsythia Youth Centre.

Additional Information

1. The young people involved with Forsythia Youth Centre have been part of a campaign to improve community safety, which resulted in having a zebra crossing installed outside of the Youth Centre, lighting installed on the hospital pathways and the dangerous subway closed which was always full of drug paraphernalia.
2. The young people are involved with going into local schools and Merthyr Tydfil College to deliver peer education on Smoking Cessation.
3. The young people of Forsythia have been involved with the National Assembly for Wales Health and Social Care Committee during the Forth Assembly, where young people took part in a focus group meeting with Assembly Committee Members on the new Psychoactive Substances Inquiry.
4. The Forsythia Youth Centre has won 18 awards over the past 13 years both locally, nationally and internationally.
5. Young people at Forsythia have collected 533 signatures using change.org to support this petition.

Assembly Constituency and Region.

- Merthyr Tydfil and Rhymney
- South Wales East

Carl Sargeant AC/AM
Ysgrifennydd y Cabinet dros Gymunedau a Phlant
Cabinet Secretary for Communities and Children



Llywodraeth Cymru
Welsh Government

Eich cyf/Your ref P-05-742
Ein cyf/Our ref CS/01065/17

David John Rowlands AM
Chair - Petitions committee.
National Assembly for Wales
Cardiff Bay
Cardiff Bay
CF99 1NA

4 August 2017

Dear David,

Thank you for your letter of 24 July in which you have requested an update on the developments of the Welsh Government's new approach to building resilient communities.

The Welsh Government is taking a whole-government approach to building resilient communities and will be focusing this work on the three key areas of early years, employability and empowerment.

My officials are currently working with colleagues inside and outside government to determine those areas that we feel will have the greatest impact on the resilience of our communities, using them as key "building blocks" to focus our action. We will work with those areas across government that have an influence on these key building blocks to support, strengthen, and where appropriate build on what they and their delivery partners do, using the Wellbeing of Future generations Act's five Ways of Working as an underpinning.

A key part of this work will be centred on looking at "empowerment" as a crucial underpinning to both improving the wellbeing of our communities and helping the effectiveness of our service delivery.

As part of this work, over the coming months, we will be working with partners across all sectors, including community organisations, to create consensus around the approaches we should be adopting; the things we need in place; and the roles we all need to play in order to create an environment that empowers our communities.

To inform our approach we will also be working with our colleagues in the academic world, drawing on the evidence and learning from past programmes and models as well as using

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Carl.Sargeant@llyw.cymru
Correspondence.Carl.Sargeant@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

current programmes like the Valleys Task Force as an opportunity to test new ways of working.

Yours sincerely,

A handwritten signature in cursive script that reads "Carl Sargeant". The signature is written in a dark ink and is positioned above the printed name and title.

Carl Sargeant AC/AM

Ysgrifennydd y Cabinet dros Gymunedau a Phlant
Cabinet Secretary for Communities and Children

Agenda Item 3.10

P-05-715 A Ban on the Manufacture, Sale and Use of Snares in Wales.

This petition was submitted by the League Against Cruel Sports, having collected 1,405 signatures.

Text of the Petition

We call on the National Assembly for Wales to urge the Welsh Government to ban the manufacture, sale and use of snares in Wales.

Additional information

Snares are thin wire nooses designed to trap 'predator' species. The nature of their design means that – despite supposedly being used as a restraining device – they cause severe injuries to those animals they catch. These injuries include limb amputation, strangulation and often death.

According to Defra, up to two thirds of those animals caught are not even the target species. Most frequently snares are set to catch foxes, but in reality, they catch badgers, deer, and domestic pets. In Wales, some 370,000 animals are snared every year. That's more than 1,000 a day.

In 2015, the Welsh Government introduced a Code of Best Practice on the use of snares, but compliance with the Code is voluntary and there are no checks in place or penalties for those who do not comply. Even a Code-compliant snare is a crude, indiscriminate device, more likely to cause injury or death than to restrain an animal.

The Welsh Assembly has the power to end this practice, and lead the way for animal welfare in the UK by banning the manufacture, sale and use of snares in Wales.

Constituency and Region

- Gower
- South Wales West

Response by the League Against Cruel Sports to the National Assembly for Wales' Petitions Committee's request for feedback on the response of the Welsh Government to the report by the National Assembly for Wales' Climate Change, Environment and Rural Affairs Committee report on the use of snares in Wales, October 2017

The League Against Cruel Sports broadly welcomes the Government response to Climate Change, Environment and Rural Affairs Committee report on the use of snares in Wales, which we feel is a comprehensive and thorough report which recommended a ban on the use of snares should it be proven that the current code of practice, which we argue is not effective, is failing, and also called for measure to address the lack of data on snare use in Wales. The Welsh Government's response highlights the challenge of gathering this data. The response also references the recent 'Taking Forward Wales' Sustainable Management of Natural Resources' consultation which the League has responded to.

- *Recommendation 1 : The Committee recommends that The Welsh Government should undertake an annual review of the Code and publish a report of that review.*

Response: Accept

The League is pleased to see that Welsh Government will publish a report of the findings of each of these annual stakeholder events on the Welsh Government website from September 2018.

When producing these reports we urge Welsh Government not to rely solely on information provided by snare operators (and the organisations which represent them), as it would be in their interest to mislead the Government into believing that the code is fully complied with and that not further restrictions of the use of snaring are necessary. Therefore, we expect that the conclusions of the reports would be mainly based on information from independent and objective sources, and if such sources cannot be found it should be concluded that the current code of practice regime is no longer viable.

The League would also like to see data collected and published annually on major landowners in Wales who do not use snares to manage their land.

- *Recommendation 2: The Committee recommends that if the annual review of the Code shows that it is not working then the Welsh Government should tighten the law on the use of snares in Wales, including the introduction of sanctions for non-compliance with the Code.*

Response: Accept in principle

The League welcomes this acceptance in principle. We would add that any future Order making power should allow for a total ban on the manufacture, sale and use of snares in Wales. It remains our view that this is the only way to effectively prevent the harm that snares do to wildlife. We would also remind Welsh Government that the following EU countries have already banned the use of snares: Austria, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Germany, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia and Slovenia.¹

- *Recommendation 3: The Committee recommends that: If evidence shows the voluntary approach has not succeeded, we recommend that the Welsh Government should prepare draft legislation. In preparing that legislation, the following options should be considered: – the introduction of similar requirements to those in Scotland, for training and identification and exploring a licensing system to be funded by users; – whether the liability for prosecution should be placed on the landowner where snares are found; this could reduce the problems of determining ownerships of snares and the difficulty of gaining successful prosecutions.*

Response: Accept in principle

It remains our view that a total ban on the manufacture, sale and use of snares this is the only way to effectively prevent the harm that snares do to wildlife and despite the tighter regulation of snare use in Scotland, the League continues to press for a total ban there too, as their regulation proved to be insufficient to prevent the animal welfare and conservation problems that snaring generates.

Under the Wildlife and Natural Environment Act (Scotland) 2011 any person who sets a snare in position must have an identification number, which can only be obtained from a police station on the production of a certificate indicating they have received approved training from an authorised provider and that they have shown competence to use snares. Any person who sets in position a snare must ensure that a tag is fitted on the snare in such a manner that it is not capable of being easily removed from the snare; that there is displayed on the tag the identification number of the person who set the snare in position; and that where the snare is intended to catch brown hares, rabbits or foxes there is displayed on the tag a statement that it is intended to catch the type of animal in question.

However, this system has not worked as it should, and it is unlikely to work. The League Against Cruel Sports & OneKind's 2016 report 'Cruel and Indiscriminate: Why Scotland must become snare-free' report ² details how the Scottish licensing system has operated to date and includes key points such as:

¹ pp37-38, 'The Problems of Snaring in the UK, and its alternatives', League Against Cruel Sports (2017) <http://bit.ly/2xgbdSF>

² Cruel and Indiscriminate: Why Scotland must become snare-free', League Against Cruel Sports and OneKind, (2016) <http://bit.ly/2gvVMPr>

- the number of accredited snare operators in Scotland is 1438, considerably lower than the 5000 users estimated by the shooting industry when the 2011 legislation was being developed;
- since 2013, the Scottish SPCA has received 63 complaints of snaring offences requiring investigation; and
- many of Scotland's most important land-owning conservation organisations manage land without using snares, including Scottish Natural Heritage, RSPB Scotland, Forestry Commission Scotland, the Scottish Wildlife Trust, the John Muir Trust, the Woodland Trust, and Plantlife Scotland. A survey of Scottish local authorities in 2008 found that no councils used snares for management purposes at that time.

It appears that in Scotland, as in England in Wales, snaring is predominantly associated with game-bird shooting interests. This is demonstrated, as in England and Wales, by the degree of engagement of shooting interests with the snaring issue

- *Recommendation 4 : The Committee recommends that: If it is shown that the reformed enforcement measures listed in Recommendation 3 do not increase the humaneness and efficacy of pest control by snaring, then the Welsh Government should consider legislating to ban the use of snares.*

Response : Accept

We welcome Welsh Government's clarification in this part of the response that 'the Consultation (referred to above) includes a proposal for the Welsh Ministers to take a power to ban by Order any type of snare (in addition to self-locking snares, which are already illegal) and/or to make requirements in relation to the use of a snare. Such an Order could provide a legal mechanism to ban snaring completely.'

However, we would like to make two important points regarding this question. Firstly, the term "pest control" used in the question is not accurate as foxes, the most common targeted victim of snaring, are not pests, nor are they officially classified as pests by either the UK Government or the Welsh Government. On the contrary, they are native wild mammals which play a vital role in the UK natural ecosystems, especially given that many other predator mammals have now become extinct in the British Isles. In contrast, game birds, such as common pheasants and red-legged partridges, are not native and are captive bred and released into the wild in great quantities, posing an ecological threat. Most of the snares operators use snares to try to kill foxes to protect these birds for commercial reasons, and therefore such activity cannot be considered "pest control". Consequently, banning snaring cannot be considered detrimental to the Welsh countryside.

The second point is that for snaring to be considered truly humane, there must be evidence that no animal has experienced pain or suffering as a result of snares being used. This must be the goal and measure of efforts to improve the humaneness of snares if a ban on their use is not in place. Snares must be made truly humane, and not simply more humane than they were previously. If that cannot be achieved then the reformed enforcement measures

listed in Recommendation 3 should be deemed not to have increased the humaneness of snaring to the minimum level required. Therefore, we urge the Welsh Government to include in their assessment of the humaneness of snaring an assessment of whether any individual animal experienced, at any time, pain, suffering or discomfort for being caught by a snare in Wales, and if it is proven that this happened at least once, then the Welsh Government should consider legislating to ban the use of snares.

- *Recommendation 5 : The Committee recommends that: The Welsh Government should undertake a gap analysis of the data available and takes urgent steps to obtain the information it needs to assess the efficacy of its policy.*

Response: Accept

We request that such analysis includes how reliable data can be if it is provided by snaring operators and their representatives, and the steps taken to obtain information not only cover data that is absent, but also data that is not reliable for not coming from independent sources.

- *Recommendation 6: The Committee recommends that: The Welsh Government should report by the end of September 2018 and thereafter on an annual basis, on the extent of the use of snares in Wales. As part of that reporting process, the Welsh Government should work with stakeholders to devise a mechanism to determine the number and species of animals caught in snares.*

Response: Accept

We welcome the acceptance of this recommendation and urge the Welsh Government to undertake independent research to cover this part of the work on snares. A sound evidence based is a must. In the absence of any other official sources of data on snare use, the 2012 Defra report statistics is a starting point, but more up to date research is needed, and it must be independently conducted. We maintain that it is the game sector which is the heaviest user of snares in Wales, as evidenced by the extent of engagement of that sector with the policy issue of snaring and with the development and promotion of the Code of Practice to those within the sector. We urge Welsh Government not to rely solely on evidence submitted by the snare using sectors when assessing and compiling data on snare use in Wales, and as DEFRA did in 2012, conduct its own independent scientific research on this issue.

- *Recommendation 7: The Committee recommends that: The use of non-Code compliant snares should be banned on Welsh Government owned land.*

Response: Accept

The League welcomes the Minister's clarification on this issue in Plenary. The Government should make public the mechanism in place to monitor a ban on the use of non-Code compliant snares on Welsh Government owned land.

- *Recommendation 8: The Committee recommends that: The Welsh Government's review of the Code should report on: – enforcement action in relation to the Code and the numbers of successful prosecutions, if any; – the cost and availability of Code compliant snares; and – the numbers of people being trained to use snares according to the Code and the methods used to assess the effectiveness of that training.*

Response: Accept

The League welcomes the involvement of stakeholders listed.

The League is confused by some aspects of this recommendation from the Climate Change, Environment and Rural Affairs Committee and would like to highlight that no standalone prosecutions are allowed under the current Code as it is a non-statutory Code and compliance with it by snare users is totally voluntary. Therefore we believe that reporting should be on number of breaches of the code and corrective measures applied, rather than prosecutions, relative to the number of incidents investigated. We would also highlight that training on snare use is provided largely by those who promote and support the use of snares, as opposed to those whose focus is animal welfare or who are independent of the snare using sectors, and this is a problem.

On the availability of Code-compliant snares, we question what further measures Welsh Government could take beyond writing to manufacturers and retailers across Wales 'to urge them to make/stock only Code compliant snares.'

Other:

The Welsh Government's response does not address the following points from the Climate Change, Environment and Rural Affairs Committee's report which the League feels merit further comment from Welsh Government:

- Alternatives to snaring (p.23)

The League feels that while animal welfare and conservation must be the main driver of snaring policy, any policy must consider the alternatives to snaring, the experiences of landowners who manage their land successfully without the use of snares, and the extent to which fox control is necessary. Any policy should promote non-lethal wildlife management methods first and snaring should not be allowed if such methods have not been fully tried.

- Compliance with a voluntary Code (p.11)

While we welcome Welsh Government's openness to legislating to ban snares should the Code of Practice prove ineffective, even if strengthened, we reiterate the problem of the total lack of enforceability of a voluntary, non-statutory Code. A lack of sanctions for non-compliance with the snaring Code, coupled with the current lack of monitoring of snares, it is easy to see how snare users may feel and act as a law unto themselves, however strongly worded and clear a Code may be.

- Tagging and licensing (p.12)

The League believes that due attention should be paid to the Scottish experience of operating a licensing system for snare use and to the ongoing animal welfare issues despite stricter control of snare use in Scotland. Our 2016 report 'Cruel and Indiscriminate: Why Scotland must become snare-free'³, details our ongoing concerns including the continued suffering caused by legally set snares to target and non-target animals, the continued disregard of the law, lack of enforcement, continued use of stink pits and superficial snaring training.

- Training (p.17)

There is still no clear record of how many people in Wales have been trained in setting Code-compliant snares, and as training is not mandated by the Code of Practice and is simply 'recommended' instead, we question the efficiency of such training, especially if most of the training on snaring in Wales is provided by non-independent experts or bodies.

For more information please contact:

Bethan Collins, Senior Public Affairs Officer, Wales, League Against Cruel Sports

bethancollins@league.org.uk

³ 'Cruel and Indiscriminate: Why Scotland must become snare-free', League Against Cruel Sports and OneKind, (2016) <http://bit.ly/2gvVMPr>

P-05-773 Don't Fill Landfill!

This petition was submitted by Claire Perrin, having collected 33 signatures online and 139 on paper – a total of 172 signatures.

Petition text:

We call on the National Assembly for Wales to urge the Welsh Government to either issue new black wheelie bin stickers ([see example included*](#)) or printed wheelie bins which urge households across Wales to consider the bin's contents before leaving it on the kerbside for collection.

We feel that by explicitly describing the bin as a 'landfill' bin, this will serve to reinforce consideration for the items contained within it. We have included some factual information about the amount of time certain everyday items will stay in landfill if not recycled. We think this is very powerful and may improve Wales' commitment to recycle and therefore meet our targets for the future.

Ultimately, we want to encourage people to recycle more as well as help to reduce the amount of recyclable goods that end up in landfill.

*The graphic was submitted as part of the petition and is available in English only.

Additional information:

My name is Claire Perrin and I am a teacher at Celtic English Academy. At the start of this term, I started a class project on recycling and encouraged my 10 students to identify the possible options residents have in the capital. We also discovered that Wales is exceeding its commitment to reduce landfill by 2025 and is leading the rest of the U.K in terms of improving access to recycling centres and household collections in general.

However, my students began to notice that many residents weren't recycling correctly. We have included photographic examples of green recycle bags in black wheelie bins, food in kerbside green and black bags and recyclable items in black bags. We held class discussions about the possible reasons behind these errors. We also conducted a survey which asked people to identify recyclable goods from the following list: pet food pouches; personal hygiene items; Aluminium sheets; take away trays; magazines; crisp packets; egg boxes; plastic carrier bags; clothing

We found that a lot of people simply did not know which items could be recycled. We also discovered that people did not contemplate how long landfill items would take to biodegrade. When we informed them, they were shocked and wanted to do more to recycle. This encouraged us to come up with a possible solution to the amount of items placed incorrectly in black/green bags which could be rolled out across Wales, thus encouraging people to take more responsibility for their waste management and in the process, preventing recyclable items from going straight to landfill.

Assembly Constituency and Region

- Cardiff North
- South Wales Central

P-05-773 Don't Fill Landfill – Correspondence from the petitioner to the Committee.

Re: Response to committee hearing petition: “Don't Fill Landfill.” Heard 3.10.17

Thank you for considering my petition which was heard in the committee chamber on the above date. I very much appreciate the opportunity to respond to the decision by Lesley Griffiths AC/AM Cabinet Secretary for Environment and Rural Affairs.

I would like to note that whilst Lesley did not feel the “Landfill” sticker, which we designed for black wheelie bins, would be entirely appropriate at the moment, she did in fact agree (paragraph 1) that *there is a role for either stickers or printing on wheeled bins* but was concerned that the wording of any such sticker ought not risk containing too much information.

I have written to Lesley personally in light of her response and have asked her to consider engaging me to help on the Task and Finish Group of Welsh Government that is currently working on a separate initiative. My understanding is that this group is tasked with designing an initiative to affect positive behavioural change in relation to recyclable waste and to try to limit the amount of residual waste (including food waste) from being sent to landfill.

I have expressed concern that at present, information is printed on green and black bags but that it may be causing comprehension problems for speakers of other languages and non native speakers including all those who work and study in Cardiff who may be unaccustomed to the protocols of recycling in Wales. I have also pointed out that a significant proportion of Cardiff's 28,000 student population is made up of International students who may require additional help in understanding any written instructional material. This is important as it may be unwittingly contributing to the problem of poor recycling.

As a teacher of International students I can certainly attest to this. In fact, as a starting point, my class conducted a series of qualitative interviews with International students where we identified a duplicitous problem. Not only did many students arrive in Cardiff from countries where recycling was either different or non-existent, but the wording on the bags was unclear, ambiguous or too difficult to fully comprehend. (Please see addendum to illustrate)

The green plastic bags intended for recyclable goods (excluding food) currently reads in dual language with English first. Many of our second language learners were unaware that the Welsh wording was in fact a different language and many lower level students thought it was complicated vocabulary which they were unfamiliar with.

The second problem is that underneath text which reads **No textiles, broken glass or food waste** is a series of pictures with printed text underneath such as **plastics, paper, newspapers, mixed paper and card, mixed glass, food and drink cans, cardboard and aerosols.**

As a native speaker, it is more obvious that these are the items which should be placed into the bags. But since the items are listed following on from **No textiles**, the information is potentially ambiguous and could cause difficulty in comprehension. Thus, it could be resulting in poor recycling habits. I feel this is something that could be changed easily.

As an MA Forensic Linguistics student and as an active member of the Eco Linguistic Association as well as being a representative of Cardiff's student base, I feel I could assist the group with linguistic choices that are proven to be easier and non ambiguous as well as help re-write the wording on current and any potential new information to ensure that Wales is at the forefront of positive and inclusive instructional material which will go some way to ensuring that our targets for 2024–25 are met and perhaps even exceeded.

I would therefore like to ask the committee to consider using the printed sticker proposal in the future and to commit to the redesigning of it to ensure it is written unambiguously and is rolled out to both green and black bags as well. I would also like to ask the committee to support my offer of getting involved with the Task group initiative (on a voluntary basis) to help to not only serve my city in a positive and representative way, but to add value to the initiative by championing the engagement of the student voice and in demonstrating excellence in the language used to communicate change to residents.

I thank you all once again for your time and considerations.

Yours sincerely,

Claire L Perrin



Agenda Item 4.1

P-04-472 Make the MTAN law

Petition wording:

We call upon the National Assembly for Wales to urge the Welsh Government to make the MTAN Guidance Notes, notably those relating to a 500 metre buffer zone around open cast workings, mandatory in planning law for Wales.

Additional information:

On 20th January 2009, Jane Davidson, the Minister for the Environment, introduced newly published Coal Minerals Technical Advice guidance Notes (MTAN) for Wales, and stated: “.. the Coal MTAN will fulfil the pledges (in 2008) to introduce Health Impact Assessments for coal applications, together with buffer zones, and with an emphasis on working closely with local communities. It reaffirms the commitment (in 2008) to a 500m buffer zone.” In 2009 the Welsh Government did not have the power to make its planning guidelines law. It does now.

Petition raised by: Dr John Cox

Date petition first considered by Committee: 16 April 2013

Number of signatures: 680. Associated petition collected 330 signatures.

Agenda Item 4.2

P-04-575 Call in All Opencast Mining Planning Applications

Petition Wording

We call upon the National Assembly for Wales to urge the Welsh Government to call in all opencast mining planning applications over 10 years duration or over 350 hectares in size because the implications of these developments are far reaching and long standing with effects beyond the immediate locality.

Petition raised by: United Valleys Action Group

Date Petition first considered by Committee: 15 July 2014

Number of signatures: 130 – An associated petition relating to a specific planning application collected in excess of 6500 signatures

By virtue of paragraph(s) ix of Standing Order 17.42

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