

# Specialist Estates Services



## Introduction from Neil Davies, Director of Specialist Estates Services

First and foremost I must extend my heartfelt thanks to NHS Wales's estates and facilities staff for their incredible response to the coronavirus pandemic. The commitment across NHS Wales has been outstanding.

As well as the day job keeping NHS Wales's hospitals operational, estates and facilities colleagues fulfilled a critical role in helping to address the requirement to rapidly increase bed capacity across Wales, with the repurposing of many existing NHS buildings and the development of new field hospitals.

I must also pass on my thanks to private sector colleagues whose commitment and professionalism has been relentless in helping NHS Wales achieve solutions in timescales that in normal circumstances would beggar belief.

Who could have imagined that in just a few short weeks we could create 1,500 beds at Ysbyty Calon y Ddraig in the Principality Stadium; achieve a 75% increase in available oxygen flow provision across NHS Wales; or procure and deliver the 138,000 pieces of equipment provided to help support field hospitals, including beds, imaging equipment, syringe drivers and medicines – simply astonishing!

Not surprisingly therefore much of this newsletter is dedicated to the response to the pandemic with articles on the support provided by SES's specialist engineers, fire safety and property professionals. Well done to them all.

Notwithstanding the fantastic response by NHS Wales, there are, of course, lessons to be learnt from this crisis. Much of the NHS estate is aged and needs significant investment to address some of the challenges. Perhaps now is the time to be bold and adopt a more radical approach to the estate.

Staffing resources across NHS Wales are also variable with weaknesses in certain areas. Again, perhaps now is the time to be more ambiguous in how we make the NHS Wales's estates and facilities roles more attractive and an exciting alternative to employment in other sectors.

I would welcome your feedback on how the crisis has affected you and the key issues we now need to address moving forward.

And finally, just to thank you all once again, keep up the great work and stay safe.

**Regards, Neil**

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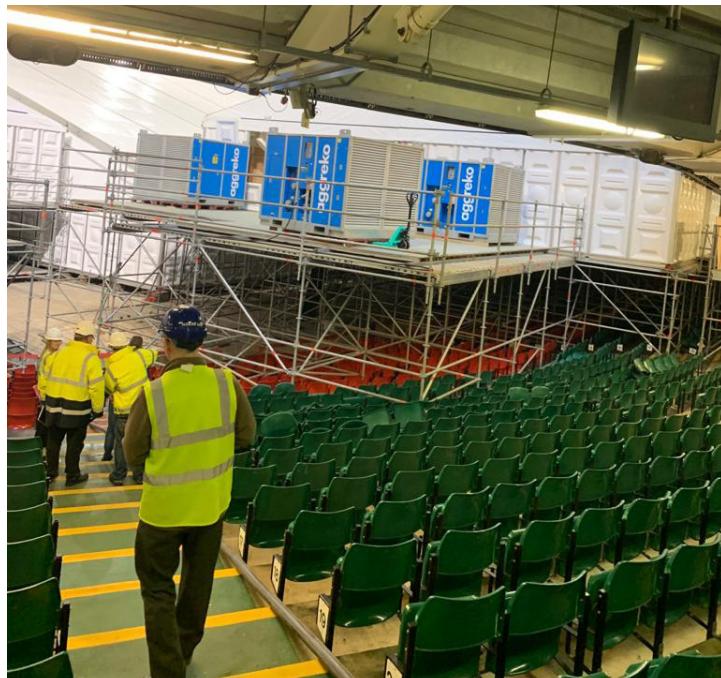
# COVID-19: field hospitals

With the onset of COVID-19 in the UK, NHS Wales and Welsh Government started planning for the creation of temporary hospitals to cover for the projected increase in patients likely to require specialist care.

To help provide this additional capacity temporary hospitals, or field hospitals, as is their more common name, were constructed across Wales. Field hospitals are designed to support the NHS during the coronavirus pandemic by providing extra bed capacity but they will also help normal hospital services restart and support social care services.

Nineteen new field hospitals were created in less than 8 weeks, providing an additional 6,000 beds throughout Wales. SES was involved in many of the processes throughout the acquisition and development of the new facilities.

Health boards repurposed existing buildings including two rugby stadiums, two rugby training venues, a holiday park, a theatre venue, industrial buildings and several leisure centres. In addition, Aneurin Bevan UHB accelerated the construction of the new Grange University Hospital near Cwmbran, to provide an additional surge capacity of 650 beds with SES again working closely with the contractor and colleagues in the Health Board.



Health boards quickly assembled construction team experts consisting of in house staff, building contractors, designers and SES to facilitate the building of the new hospitals. The biggest field hospital constructed in Wales was Ysbyty Calon y Ddraig, Dragon's Heart Hospital, in the Principality Stadium in Cardiff, with a potential to provide an additional 2000 beds.

The surveyors in the Property Section of SES advised health boards on the terms of occupation of the properties being acquired and assisted in documenting the occupational agreements which included leases, licences and tenancies at will. In many cases, the documentation had to be completed in an incredibly short period of time, with the surveyors working to ensure that the health boards had the necessary rights to occupy the properties and were not over exposed on costs wherever possible.

SES engineers and fire advisors initially provided technical scrutiny on the field hospitals designs taking a pragmatic approach in the application of Welsh Health Technical Memorandums (WHTMs) guidance documents to each specific site. Most of the field hospitals designs were based on a modular construction methods, such as modular wiring for the electrical infrastructure utilising the existing electrical infrastructure, backed up temporary generators.



Ysbyty Calon y Ddraig, Cardiff

A major problem they encountered was the provision of medical gas and in particular oxygen. With limited equipment available in the UK, the availability of bulk storage oxygen plant was scarce as was the availability of cylinders. This required SES, Welsh Government and the health boards working together to prioritise and select the most appropriate solution for each site.

#### 4 to 6 weeks

The time taken to nearly double hospital bed capacity in Wales, creating field hospitals across the nation.

#### 19 field hospitals in Wales

This includes the repurposing of Bluestone Holiday Park and Parc y Scarlets in west Wales and Venue Cymru in north Wales.

#### 1,500 beds at Ysbyty Calon y Ddraig

This makes it one of the largest field hospitals in the UK.

#### 5 days

The length of time it took to plan Ysbyty Calon y Ddraig, which overlapped with the build phase.

#### 3,000

The number of planning hours, involving more than 20 different disciplines, used to plan Ysbyty Calon y Ddraig.

#### £166m

Welsh Government funding for the set up, construction and equipment for field hospitals in Wales.

#### 138,000

Pieces of equipment provided to help support field hospitals, including beds, imaging equipment, syringe drivers and medicines.

#### *Enfys*

Three North Wales field hospitals have this name meaning rainbow – the symbol of hope and gratitude to the NHS during the pandemic.

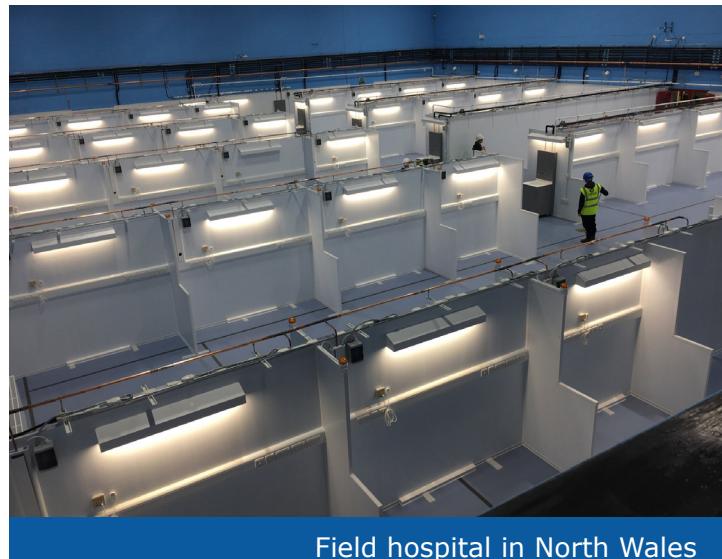
[Source: Welsh Government](#)

During construction SES worked closely with the health boards providing support on technical issues such as water quality, fire safety advice and ventilation regimes and philosophies.

Once the field hospitals were constructed, the hospital engineering systems had to be managed safely in accordance with the health boards' operational policies which required SES Authorising Engineers attending the field hospitals to assess and check the competency of the estates staff who would be managing these systems. The engineering systems were often very complex and the biggest task for the estates staff was to gain site familiarity and understanding of site engineering systems and their associated limitations. Credit must be given to the individual health board estates staff who all stepped up to the mark, were willing to gain site knowledge and were successfully appointed and authorised in a very short period of time.



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Field hospital in North Wales

# Oxygen provision at field hospitals

Chris East, our Authorising Engineer (Medical Gases) explains below the chaos that ensued as health organisations across Wales started to react to the respiratory organ affecting COVID-19 pandemic through the development of surge hospitals and the requirement for the provision of sufficient oxygen plant and capacity to support the expected influx of patients.

## ***What were those first few weeks of the pandemic like for you?***

The first few weeks of the surge came in like a whirlwind, there was little cohesion, co-ordination or information available in how to prepare for what was coming. Working very long hours without a day off for over 20 days did prove challenging, but through a combination of information sharing from site medical gas 'Approved Persons', UK-wide medical gas Authorising Engineer forums and several other UK groups, which included clinical input, we started to build up a picture of what we thought was required.

## ***How did you keep in touch with our customers and the rest of the SES staff?***

The use of technology especially Skype and Teams for communication was a challenge as I had little experience with these apps beforehand, and many early meetings were difficult and met with poor connections, or people joining in via phones with bad signals. Once everyone got to understand what they were doing, both systems were invaluable, and in some respects were better than the face to face meetings we're used to.

## ***What exactly were you involved in and what were the successes?***

It quickly became very clear that increased oxygen therapy was key in treating critically ill patients who had contracted COVID-19. What wasn't known was the quantity of oxygen and flow rates that would be required.

Early input from clinical/medical staff indicated that high flow rates of oxygen and/or medical air through ventilators and Continuous Positive Airway Pressure (CPAP)

would be needed. However the best method of treatment was unclear, as was an estimate of flow rates. These unknowns in conjunction with unknown patient numbers, and areas for treatment made accurate calculations on whether existing hospital medical gas pipelines would be able to cope with the suspected initial surge flows almost impossible.

What was clear however, was that there were many bulk liquid oxygen delivery systems that could benefit from upgrades to maximise available flow rates through existing control panels. Through a combination of health board requests, Welsh Government priority planning, British Oxygen Company (BOC) plant availability and our technical input, a plan for site upgrades was established. From the introduction of this plan, it can be seen in the table below there has been a 75%<sup>1</sup> increase in available oxygen flow provision from the bulk liquid plant achieved across Wales.

<sup>1</sup>VIE plant increases (does not account for pipeline system losses)



A VIE vaporiser upgrade in progress

	Initial oxygen provision (litres/minute)	Additional oxygen provision (litres/minute)	Final oxygen provision (litres/minute)	Comments
Acute hospitals	48,944	23,911	72,855	VIE plant, vaporiser upgrades and control panel adjustments
Community hospitals	8,586	100	8,686	VIE plant mainly providing additional bulk storage capacity
Field hospitals	0	18,950	18,950	VIE and cryogenic plant
Total	57,530	42,961	100,491	

**Table: NHS COVID sites with bulk storage systems – summary of oxygen flow rate improvements**

Through load testing of existing internal pipeline systems, it was clear that many sites could not actually deliver the substantial gains achieved (maximisation of oxygen flows from the VIE to 3000L/min) to where it was most needed or the areas highlighted for COVID-19 care. Whilst some sites improved their internal distribution by installing new pipework, there is a clear need to develop site infrastructures further, especially if we are to meet any future surge, or even a new virus in the future.

**How do you reflect on the early weeks of the pandemic and your key role in ensuring**

**that sufficient oxygen was made available for patients?**

Hindsight is a wonderful thing, whilst we significantly increased the available Oxygen flow from our bulk liquid oxygen systems in preparation for a surge, the reality was that we did not push any of our bulk oxygen systems past 65% of their capacity. Going forward there is a clear need to understand our internal pipework distribution systems, and strategically determine next steps to ensure we can make use of the additional capacity created and maximise oxygen delivery at the point of need.



**Chris East**

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## Fire safety at field hospitals

From the outset of the pandemic there was great urgency to create additional bed capacity for the anticipated influx of patients requiring hospital treatment. In addition to the countless alterations to existing hospitals, this also resulted in many other buildings, such as leisure centres and sports complexes, being converted into temporary 'Nightingale style' field hospitals.

None of these buildings were originally designed for this change of use and there was no existing guidance or regulations to fully support these improvised facilities. This presented many challenges in terms of achieving fire safe solutions which could meet the legislative requirements of the Regulatory Reform (Fire Safety) Order.

Since the outbreak of COVID-19, our fire team, Anthony Pitcher (Senior Fire Safety Advisor)

and Stuart Hanger (Fire Safety Advisor), have been providing support and guidance to the NHS across Wales addressing fire safety in these temporary facilities.

As the pandemic was proceeding at pace, there was inevitably a degree of confusion as to the anticipated patient acuity expected at these facilities. For example, would the majority of patients be independent, dependent or very highly dependent? Would oxygen therapy be required? If so, what ratio of patients would require oxygen? An understanding of these factors is critical for ensuring fire safe solutions, particularly regarding oxygen provisions, the presence of which can significantly enhance fire growth rates.

The fast changing situation, as more information became available and the COVID-19 modelling

projections updated, has necessitated a flexible adaptive approach from the team.

Two projects that Anthony and Stuart were instrumental in assisting the health board to achieve fire compliance are:

- **Bay Studio Field Hospital, Swansea Bay UHB**

From a fire safety perspective this was particularly challenging. A timber building constructed inside the shell of a former factory unit was very quickly converted into a surge hospital with capacity for 1,000 beds across 12 wards.

Means of escape was a particular issue. The principles of escape detailed in Firecode are based on limiting travel distances through the provision of compartmentation (i.e. fire walls/floors), the compartmentation arrangements are also intended to limit potential fire spread and the number of patients in any one area requiring evacuation.

In the simplest of terms, high ceilings such as that evident in large sports halls, are beneficial in terms of heat release and smoke venting often extending the time before untenable conditions arise. However, unlike these high cavernous volumes, the Bay Studio facility has a low ceiling throughout at a height of approximately 2.6m.

The team worked closely with Hoare Lea, consultant fire engineers, in the preparation of a fire engineering report demonstrating that, in the event of a fire, occupants would be able to escape before conditions become untenable. They also developed and witness-tested the cause and effect matrix for the fire alarm system.

- **Grange University Hospital, Aneurin Bevan UHB**

Whilst many of the Health Boards opted for creating field hospital capacity, Aneurin Bevan University Health Board (ABUHB) in conjunction with main contractors Laing O'Rourke took the opportunity to accelerate completion of the Grange University Hospital (GUH). The aim being for a partial handover of the ward blocks in readiness to accept patients at the end of April, whilst the remainder of the hospital was and still is a construction site.

Acknowledging the reality that not all of the hospital's fire safety systems, such as the sprinkler system, fire alarm system and evacuation lifts, would be fully functional throughout the building, the fire response and evacuation strategy required a coordinated approach. Not only did this present the challenge of developing a strategy that was safe for COVID-19 patients and healthcare staff but it also had to ensure the safe evacuation of construction site workers from fire and infection risks as well as the safety of fire fighters responding to incidents.

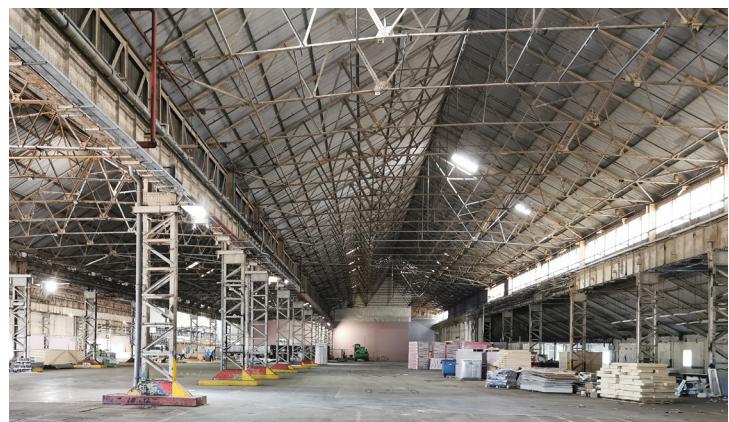
A further complication arose with discussions regarding the possibility of increasing bed capacity at GUH by doubling up patients in the single bedrooms, thankfully however this was not needed.

In addition to this, the fire team have been heavily involved in witnessing the various fire systems for the accelerated programme.

Now that the initial virus spike has passed, Anthony and Stuart are busy supporting the health boards on their reinstatement plans.



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Bay Studio Field Hospital, Swansea

# Our property team and COVID-19

## SES Property team assist new permitted development legislation to help with response to COVID-19

Following close collaboration between the Property team in SES and the Planning Directorate at Welsh Government, new planning regulations came into force on the 10 April that allow for the temporary building and changes of use for public health emergency purposes as permitted development by or on behalf of an NHS body in Wales. Hospitals, testing stations and mortuary facilities fall under these categories.

The new regulations allow the change of the use of a building or land falling within Class C2 (Residential Institutions) or Class D1 (Non-residential institutions) for development for the purpose of preventing controlling or mitigation the effects of, or taking other action in connection with, a public health emergency. The regulations also allow the provision on land of buildings, moveable structures, works,

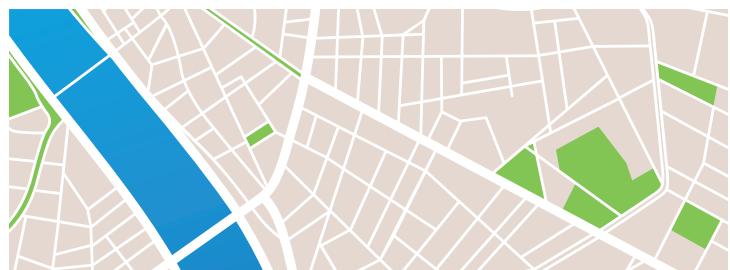
plant or machinery for the same purpose. A number of conditions and exclusions are set out in the legislation, including that a planning application would need to be submitted in the normal way where it is proposed to retain the development longer than 12 months.

Clive Ball, Head of Property at Specialist Estates Services, said: "*The issuing of these regulations remove a significant hurdle in the delivery of field hospitals and testing centres in Wales to help with the response to COVID-19.*"



**Clive Ball** | Head of Property

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## Our new look website

If you are a regular visitor to our website you might have noticed the site looks a bit different.

After months of development we're pleased to have launched our new look web page which is easy to navigate and has all the information you will need.

Our pages contain the latest and most up-to-date information regarding our services, publications, alerts and notifications and form part of the NHS Wales Shared Services Partnership's revamp of its web-hosting platform.

For now our old website address will remain operational for a short period of time but will not be updated. Any online searches and hyperlinks to our old webpages will redirect to their replacements.

If you haven't yet visited our new website our new web address is:

<https://nwssp.nhs.wales/ourservices/specialist-estates-services/>

Let us know what you think of our new site and if there is anything else you would like to see on our pages: [ses.info@wales.nhs.uk](mailto:ses.info@wales.nhs.uk).

Specialist Estates Services

Provides advice and support on all aspects of healthcare property management including acquisitions, disposals, landlord and tenant relations and the management of leases. The...

NWSSP - Specialist Estates Services provides advice and support to the Welsh Government and NHS Wales organisations on a wide range of issues related to the built environment in healthcare facilities.

**What We Do**

**FAQ's**

- General enquiry
- How do we add value for money?
- Our mission statement

**Our Services**

**Our People**

**Publications and Information**

# SES customer survey

We are keen to understand how satisfied you, our customers, are with different aspects of our services, such as how we respond to your needs and whether our staff behave in a professional manner when engaging with you. Identifying unhappy customers is as important to us as identifying extremely happy ones.

With this in mind, at the end of each calendar year we conduct a survey to assess your views on our services, our staff and the way we communicate with you – including your views on our websites and quarterly newsletter. You also get the opportunity to let us know if we could make any improvements or offer new services.

Although return rates are generally low, the feedback is vital to us. Some of the headlines from 2019 are as follows:

**90.3%** strongly agreed/agreed that: '*I am satisfied with the quality of the service provided*'

**90.3%** strongly agreed/agreed that: '*The staff (SES) are responsive to my needs*'

**93.9%** strongly agreed/agreed that: '*The management and organisation of the service is good*'

**93.9%** strongly agreed/agreed that: '*Our staff behave in a professional manner*'

**90.3%** strongly agreed/agreed that: '*The service is delivered in a timely manner*'

Opportunities for improvement presented themselves in relation to our websites and the distribution of this newsletter.

The comments received were also very useful; there was a lot of praise for what we do coupled with ideas that we intend to look into, such as developing a service to pick up areas such as asbestos, radon and health and safety. There may also be scope to expand our briefing offering in relation to standard specifications.

Many thanks to those of you that responded. Outside of this formal survey if you have any comments on our services, positive or negative, or ideas for improvements or new services then please email: [ses.info@wales.nhs.uk](mailto:ses.info@wales.nhs.uk).



**Martin Cooper** | Business Manager  
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## Success! Customer Service Excellence (CSE) award renewed

It's six years since we were initially successful in obtaining the CSE award which brings professional, high-level customer service concepts into common currency providing us with a unique improvement tool to help deliver services that put our customers, i.e. you, at the core of what we do.

The accreditation body assessor attended Companies House on the 27 and 28 January 2020 to put us through our paces in relation to the customer focus of our service approaches, the culture of the organisation, how we capture and act upon positive customer feedback and feedback that present opportunities to improve and to discuss with our customers how they perceive our service quality.

**CUSTOMER SERVICE EXCELLENCE**



Despite significant changes in personnel over the past 12 months, due by and large to planned retirements, the assessor was encouraged to hear how new staff have embraced our positive customer service culture.

He also waxed lyrical about the resilience we have managed to create within our environmental and facilities management team, the strides we've made in creating learning opportunities for customer estates and facilities staff through the provision of targeted workshops and seminars, our appetite to develop the next generation of engineers for NHS Wales via the Network75 scheme developed by the University of South Wales, our increasing social-media presence and the way that we use your valuable customer feedback to improve our services.

## Staff news



Jonathan Jones

In January we welcomed Jonathan Jones into our Framework Manager team. Jonathan is an architect with considerable experience working in the private sector and as a Consultant. He has more recently worked for Boyes Rees Architects in Cardiff.

On the leavers front, Mark Furmage, Decontamination Engineer, left us in May to take up the vacant Operational Estates Manager role at the Royal Glamorgan Hospital, part of Cwm Taf Morgannwg University Health Board. This is a fantastic opportunity for Mark and is testament to the hard work he has put in for our customers over the last four years. He will be sorely missed.

We were really pleased to see that the report from the assessor highlighted a quote from a customer at Velindre NHS Trust, "*SES are providing an excellent forum for solving the concerns and issues of the day. Always ready to respond*".

If you want to find out more about our CSE Award, have positive or negative feedback, or service improvement ideas for us to take forward, then please contact:



**Martin Cooper** | Business Manager  
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Mark Furmage

Our latest vacancies are: Principal Estates Advisor/Quantity Surveyor leading on the provision to Welsh Government (WG) of capital related business case scrutiny comments in order to inform capital investment decisions aimed at improving the NHS Wales estate.

Mark's replacement Decontamination Engineer role forms part of a small steriliser testing team and will also be responsible for supporting the Senior Decontamination Engineer in the provision of advice and guidance to the WG on decontamination issues and in the organization and completion of the annual programme of sterilizer testing across NHS Wales.

# History corner: Penley Hospital, North Wales



Through its various guises, SES has had a long association with the health estate in Wales. It's difficult to predict the future of hospital construction in Wales, but the past can be found in our archives. We hope you find the following article of interest.

## ***A former US military hospital became a thriving community for Polish refugees in North Wales for nearly 60 years***

Penley Hospital, along with two other sites – Llanerch Panna and Iscoyd Park – were gifted to Polish Resettlement Corps in 1946 following a decree from Sir Winston Churchill, to care for Polish ex-servicemen who fought alongside Allies in WWII.

The American Army left most of the equipment intact at the hospital so it was well equipped with its own X-ray department, physiotherapy, operating theatre and maternity unit.

At its peak the campus-style hospital was home to around 2,000 patients, staff and their families but by 2002 just six patients remained. Although it closed in 2002 with much of the site being redeveloped, its legacy is ingrained in North Wales and last year Wrexham Museum held an exhibition to mark the history of the site.

Speaking during the exhibition, curator Jonathon Gammond described the community as like a "Polish wonderland", with a cinema, a chapel and recreation club, with patients originally settling there after being displaced by the war. *"It was a unique place, like a pre-war Poland existing in the middle of Wales. It was a village within a village."*

The camp had its own nursery, entertainment hall, clubroom, a full-size snooker table and a well-equipped cinema with authentic cinema seats. One of the barracks was converted into a church, the same Polish cultural and religious traditions were observed and the family atmosphere benefited the patients in their recovery.

*"I thought this was an interesting example about how national, international and local history all entwine together in one site which is pretty unique, here in Wrexham"* said Mr Gammond.

In 1961, with an ageing Polish population, the hospital took on a new role of caring for the elderly in need of constant care. By the 21st century it was not economically viable to keep the 30 ward site open for six patients so a new single-storey unit with bungalow-style eight room accommodation was built close to the originally camp; it opened in 2004 and is still in operation today.

We hold an extensive picture library of Welsh hospital estates and we would welcome any photos which could expand our records. To submit photos or if you would like us to feature your hospital in a future edition of this newsletter, please contact:



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# Technical publications

## Welsh Health Building Notes (WHBNs)

Guidance documents for the planning and design of a range of healthcare buildings that provide specialist services in Wales.

Issued to date in 2020-21:

- [WHBN 04-01 – Adult In-Patient Facilities, Supplement 2 Negative Pressure Suites](#) (Published 24/06/19)

This document sets out practical guidance on how to provide safe, effective isolation facilities for infectious patients (source isolation) that are simple to use and meet the requirements of Welsh Government as outlined in WHC (2018) 033.

Documents in progress:

- WHBN 00-10 – Guidance on anti-ligature curtain rails
- WHBN 06-01 – Designing facilities for diagnostic imaging
- WHBN 10-01 – Surgical procedures
- WHBN 10-02 – Day Surgery
- WHBN 14-02 – Medicines management

## Welsh Health Technical Memoranda (WHTMs)

Documents providing technical guidance on a wide range of specialist systems within the healthcare estate in Wales.

No WHTMs issued to date in 2020-21.

Documents in progress:

- WHTM 03-01 – Specialist ventilation for healthcare premises

To view all of our previously published WHBNs and WHTMs, please visit our [Publications and Information](#) webpage.

For further information, please contact:



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## Contact Specialist Estates Services



Those working within NHS Wales can either use our [services directory](#) or [staff list](#) to find the right person for the job, and those outside NHS Wales can look at the staff list on our [website](#).



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# Gwasanaethau Ystadau Arbenigol

**Cyflwyniad gan Neil Davies,  
Cyfarwyddwr Gwasanaethau  
Ystadau Arbenigol**



Yn gyntaf oll, rhaid i mi estyn fy niolch twymgalon i staff ystadau a chyfleusterau GIG Cymru am eu hymateb anhygoel i bandemig y Coronafeirws. Mae'r ymrwymiad ar draws GIG Cymru wedi bod yn rhagorol.

Yn ogystal â'r gwaith dyddiol yn cadw ysbytai GIG Cymru yn weithredol, cyflawnodd cydweithwyr ystadau a chyfleusterau rôl hanfodol wrth helpu i fynd i'r afael â'r gofyniad i gynyddu capaciti gwelyau ledled Cymru yn gyflym, gydag addasu llawer o adeiladau presennol y GIG at ddibenion eraill a datblygu ysbytai maes newydd.

Ac mae'n rhaid i mi hefyd ddiolch i gydweithwyr yn y sector preifat y mae eu hymrwydd a'u profesiynoldeb wedi bod yn ddi-baid wrth helpu GIG Cymru i gyflawni datrysiau mewn amserlenni a fyddai mewn amgylchiadau arferol yn anghredadwy.

Pwy allai fod wedi dychmygu y gallem greu 1,500 o welyau yn Ysbyty Calon y Ddraig yn Stadiwm Principality mewn ychydig wythnosau yn unig; sicrhau cynnydd o 75% yn y ddarpariaeth llif ocsigen sydd ar gael ledled GIG Cymru; neu gaffael a danfon y 138,000 o ddarnau o offer a ddarperir i helpu i gefnogi ysbytai maes, gan gynnwys gwelyau, offer delweddu, gyrrwr chwistrell a meddyginaethau – rhyfeddol iawn!

Nid yw'n syndod felly bod llawer o'r cylchlythyr hwn wedi'i neilltuo i'r ymateb i'r pandemig gydag erthyglau ar y gefnogaeth a ddarperir gan beirianwyr arbenigol Gwasanaethau Ystadau Arbenigol, gweithwyr diogelwch Tân ac eiddo proffesiynol. Da iawn iddyn nhw i gyd.

Er gwaethaf yr ymateb gwych gan GIG Cymru, mae gwersi i'w dysgu o'r argyfwng hwn, wrth gwrs. Mae llawer o ystâd y GIG yn hen ac mae angen buddsoddiad sylweddol arno i fynd i'r afael â rhoi o'r heriau. Efallai nawr yw'r amser i fod yn feiddgar a mabwysiadu agwedd fwy radical tuag at yr ystâd.

Mae adnoddau staffio ar draws GIG Cymru hefyd yn amrywiol ac mae gwendidau mewn rhai meysydd. Unwaith eto, efallai nawr yw'r amser i fod yn fwy amwys o ran sut rydyn ni'n gwneud rolau ystadau a chyfleusterau GIG Cymru yn fwy deniadol ac yn ddewis arall cyffrous i gyflogaeth mewn sectorau eraill.

Byddwn yn croesawu eich adborth ar sut mae'r argyfwng wedi effeithio arnoch chi a'r materion allweddol y mae angen i ni fynd i'r afael â hwy nawr wrth symud ymlaen.

Ac yn olaf, diolch i chi i gyd unwaith eto, daliwch ati gyda'r gwaith gwych a chadwch yn ddiogel.

**Regards, Neil**  
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*Yn y rhifyn hwn...*

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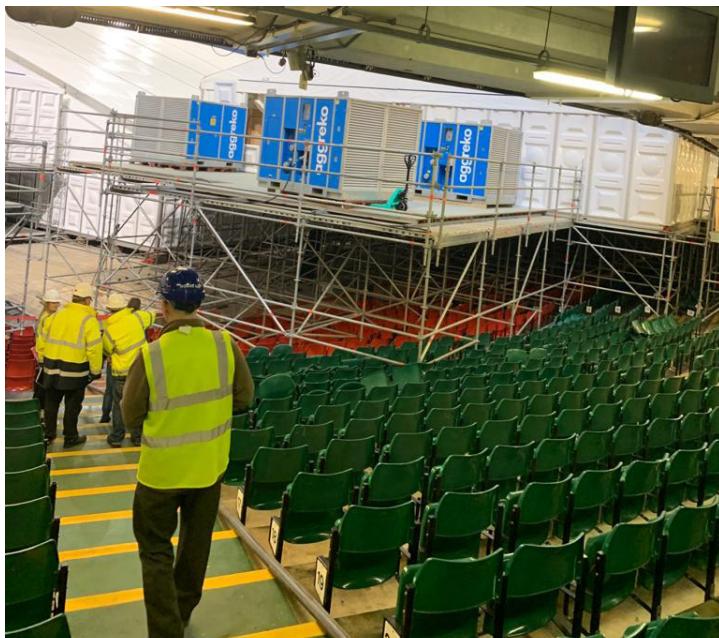
# COVID-19: ysbytai maes

Gyda dyfodiad COVID-19 yn y DU, dechreuodd GIG Cymru a Llywodraeth Cymru gynllunio ar gyfer creu ysbytai dros dro i gyflenwi ar gyfer y cynnydd a ragwelwyd mewn cleifion a fyddai'n debygol o fod angen gofal arbenigol.

Er mwyn helpu i ddarparu'r capaciti ychwanegol hwn, adeiladwyd ysbytai dros dro, neu ysbytai maes, fel yr adweinir hwy, ledled Cymru. Mae ysbytai maes wedi'u cynllunio i gefnogi'r GIG yn ystod pandemig y coronafeirws trwy ddarparu capaciti gwelyau ychwanegol ond byddant hefyd yn helpu gwasanaethau ysbyty arferol i ailgychwyn a chefnogi gwasanaethau gofal cymdeithasol.

Crëwyd 19 o ysbytai maes newydd mewn llai nag 8 wythnos, gan ddarparu 6,000 o welyau ychwanegol ledled Cymru. Roedd Gwasanaethau Ystadau Arbenigol yn ymwneud â llawer o'r prosesau trwy gydol caffael a datblygu'r cyfleusterau newydd.

Fe wnaeth byrddau iechyd addasu adeiladau presennol at ddibenion eraill gan gynnwys dau stadiwm rygbi, dau leoliad hyfforddi rygbi, parc gwyliau, lleoliad theatr, adeiladau diwydiannol a sawl canolfan hamdden. Yn ogystal, cyflymodd BIP Aneurin Bevan waith adeiladu Ysbyty Athrofaol newydd y Faenor ger Cwmbrân, i ddarparu capaciti ymchwydd ychwanegol o 650 o welyau gyda Gwasanaethau Ystadau Arbenigol unwaith eto'n gweithio'n agos gyda'r contractwr a chydweithwyr yn y Bwrdd Iechyd.



Fe wnaeth byrddau iechyd gasglu arbenigwyr tîm adeiladu ynghyd yn gyflym yn cynnwys staff mewnol, contractwyr adeiladu, dylunwyr a Gwasanaethau Ystadau Arbenigol i hwyluso'r gwaith o adeiladu'r ysbytai newydd. Yr ysbyty maes mwyaf a adeiladwyd yng Nghymru oedd Ysbyty Calon y Ddraig, Ysbyty Dragon's Heart, yn Stadiwm y Principality yng Nghaerdydd, gyda'r potensial i ddarparu 2,000 o welyau ychwanegol.

Cynghorodd y syrfewyr yn Adran Eiddo Gwasanaethau Ystadau Arbenigol fyrrdau iechyd ar delerau meddiannu'r eiddo sy'n cael eu caffael a'u cynorthwyo i ddogfennu'r cytundebau galwedigaethol a oedd yn cynnwys prydlesi, trwyddedau a thenantiaethau fel y mynnont. Mewn llawer o achosion, roedd yn rhaid cwblhau'r ddogfennaeth mewn cyfnod byr iawn, gyda'r syrfewyr yn gweithio i sicrhau bod gan y byrddau iechyd yr hawliau angenrheidiol i feddiannu'r eiddo ac nad oedd gorwario lle bynnag yr oedd hynny'n bosibl.

I ddechrau, darparodd peirianwyr Gwasanaethau Ystadau Arbenigol a chynghorwyr Tân graffu technegol ar ddyluniadau ysbytai maes gan ddefnyddio dull pragmatig wrth gymhwysog dogfennau canllaw Memoranda Technegol Iechyd Cymru (WHTMs) i bob safle penodol. Roedd y rhan fwyaf o ddyluniadau ysbytai maes yn seiliedig ar ddulliau adeiladu modwlau, megis gwifrau modwlau ar gyfer y seilwaith trydanol sy'n defnyddio'r seilwaith trydanol presennol, gyda generaduron dros dro wrth gefn.



Ysbyty Calon y Ddraig, Caerdydd

Problem fawr y daethant ar eu traws oedd darparu nwy meddygol ac ocsigen yn benodol. Gydag offer cyfyngedig ar gael yn y DU, prin oedd argaeedd offer storio ocsigen swmp ynghyd ag argaeedd silindrau. Roedd hyn yn gofyn i Wasanaethau Ystadau Arbenigol, Llywodraeth Cymru a'r byrddau iechyd weithio gyda'i gilydd i flaenoriaethu a dewis y datrysiad mwyaf priodol ar gyfer pob safle.

## 4 i 6 wythnos

Yr amser a gymerwyd i bron dyblu capaciti gwelyau ysbyty yng Nghymru, gan greu ysbytai maes ledled y wlad.

## 19 ysbytai maes yng Nghymru

Mae hyn yn cynnwys addasu Parc Gwyliau Bluestone a Pharc y Scarlets yng ngorllewin Cymru a Venue Cymru yng ngogledd Cymru at ddibenion eraill.

## 1,500 o welyau yn Ysbyty Calon y Ddraig

Mae hyn yn ei wneud yn un o'r ysbytai maes mwyaf yn y DU.

## 5 diwrnod

Yr amser a gymerwyd i gynllunio Ysbyty Calon y Ddraig, a wnaeth orgyffwrdd â'r cyfnod adeiladu.

## 3,000

Nifer yr oriau cynllunio, sy'n cynnwys mwy nag 20 o ddisgyblaethau gwahanol, a ddefnyddiwyd i gynllunio Ysbyty Calon y Ddraig.

## £166m

Cyllid Llywodraeth Cymru i sefydlu, adeiladu a chael offer ar gyfer ysbytai maes yng Nghymru.

## 138,000

Darnau o offer a ddarparwyd i helpu i gefnogi ysbytai maes, gan gynnwys gwelyau, offer delweddu, gyrwyr chwistrell a meddyginaethau.

## Enfys

Mae gan dri ysbyty maes yng ngogledd Cymru yr enw hwn – symbol gobaith a diolch i'r GIG yn ystod y pandemig.

[Ffynhonnell: Llywodraeth Cymru](#)

Yn ystod y gwaith adeiladu, gweithiodd SES yn agos gyda'r byrddau iechyd gan ddarparu cefnogaeth ar faterion technegol fel ansawdd dŵr, cyngor ar ddiogelwch Tân a chyfundrefnau a gwyddoniaeth awyru.

Ar ôl i'r ysbytai maes gael eu hadeiladu, roedd yn rhaid rheoli systemau peirianneg ysbytai yn ddiogel yn unol â pholisiau gweithredol y byrddau iechyd a oedd yn ei gwneud yn ofynnol i Beirianwyr Awdurdodi Gwasanaethau Ystadau Arbenigol sy'n mynchu'r ysbytai maes asesu a gwirio cymhwysedd staff yr ystadau a fyddai'n rheoli'r systemau hyn. Roedd y systemau peirianneg yn aml yn gymhleth iawn a'r dasg fwyaf i staff yr ystadau oedd cynefino â'r safle a deall systemau peirianneg y safle a'u cyfyngiadau cysylltiedig. Rhaid canmol staff ystadau'r byrddau iechyd unigol a oedd i gyd wedi ymateb i'r her, a oedd yn barod i ddysgu am y safle ac a benodwyd ac a awdurdodwyd yn llwyddiannus mewn cyfnod byr iawn o amser.



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Ysbyty maes yng Ngogledd Cymru

# Darpariaeth ocsigen mewn ysbtyai maes

Mae Chris East, ein Peiriannydd Awdurdodi (Nwyon Meddygol) yn egluro'r anhreft a ddilynodd isod wrth i sefydliadau iechyd ledled Cymru ddechrau ymateb i'r organ anadol a oedd yn effeithio ar bandemig COVID-19 trwy ddatblygu ysbtyai ymchwydd a'r gofyniad i ddarparu digon o offer ocsigen a chapasiti i gefnogi'r mewnlifiad disgwyliedig o gleifion.

## **Sut oedd yr wythnosau cyntaf hynny o'r pandemig i chi?**

Daeth wythnosau cyntaf yr ymchwydd i mewn fel corwynt, nid oedd llawer o gydlynau na gwybodaeth ar gael ar sut i baratoi ar gyfer yr hyn oedd i ddod. Roedd gweithio oriau hir iawn heb ddiwrnod i ffridd am dros 20 diwrnod yn heriol, ond trwy gyfuniad o rannu gwybodaeth o 'Bersonau Cymeradwy' nwy meddygol safle, fforymau Peirianwyr Awdurdodi nwy meddygol ledled y DU a sawl grŵp arall yn y DU, a oedd yn cynnwys mewnbwn clinigol, dechreuon ni ffurio darlun o'r hyn rodden ni'n meddwl yr oedd ei angen.

## **Sut wnaethoch chi gadw mewn cysylltiad â'n cwsmeriaid a gweddill staff Gwasanaethau Ystadau Arbenigol?**

Roedd defnyddio technoleg yn enwedig Skype a Teams ar gyfer cyfathrebu yn her gan nad oedd gen i fawr o brofiad gyda'r apiau hyn cyn hynny, ac roedd llawer o gyfarfodydd cynnar yn anodd ac yn cwrdd â chysylltiadau gwael, neu bobl yn ymuno trwy ffonau â signalau gwael. Ar ôl i bawb ddeall yr hyn yr oeddent yn ei wneud, roedd y ddwy system yn amhrisiadwy, ac mewn rhai agweddau roeddent yn well na'r cyfarfodydd wynab yn wyneb yr oeddem wedi arfer â hwy.

## **Beth yn union oeddech chi'n rhan ohono a beth oedd y llwyddiannau?**

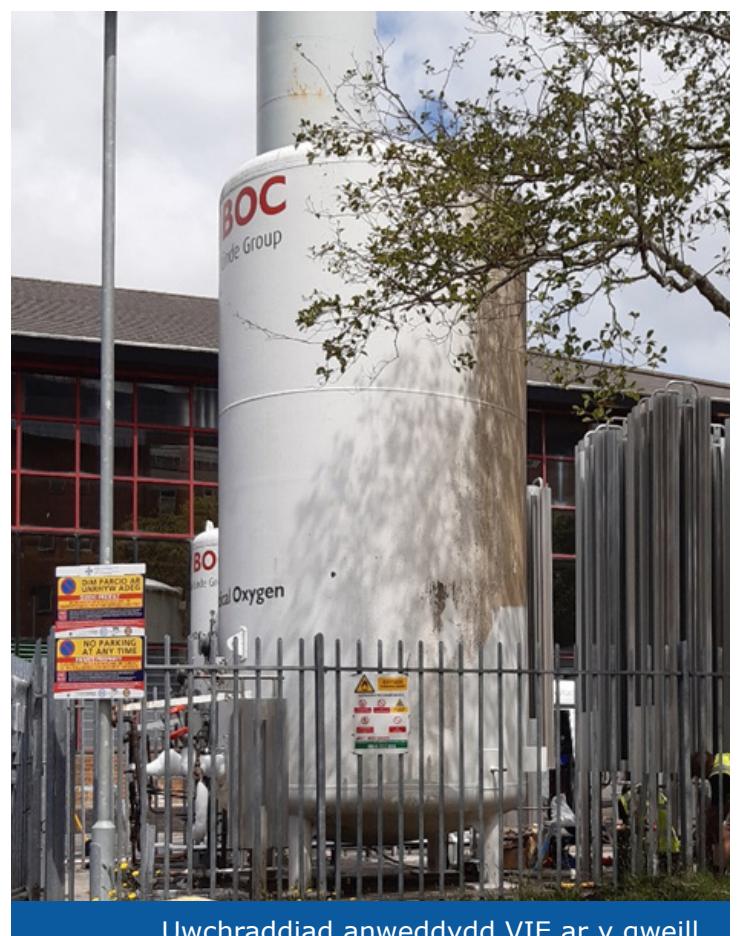
Daeth yn amlwg yn fuan iawn bod mwy o therapi ocsigen yn allweddol wrth drin cleifion difrifol wael a oedd wedi dal COVID-19. Yr hyn nad oedd yn hysbys oedd maint yr ocsigen a'r cyfraddau llif y byddai eu hangen.

Nododd mewnbwn cynnar gan staff clinigol/meddygol y byddai angen cyfraddau llif uchel o ocsigen a/neu aer meddygol trwy beiriannau

anadlu a phwysedd positif parhaus yn y llwybr anadlu (CPAP). Fodd bynnag, roedd y dull gorau o driniaeth yn aneglur, ynghyd ag amcangyfrif o gyfraddau llif. Gwnaeth y materion anhysbys hyn, ar y cyd â niferoedd anhysbys cleifion ac ardaloedd ar gyfer triniaeth, wneud cyfrifiadau cywir ynghylch a fyddai piblinellau nwy meddygol ysbtyai presennol yn gallu ymdopi â'r llif ymchwydd cychwynnol a amheuwyd bron yn amhosibl.

Yr hyn a oedd yn glir fod bynnag, oedd bod yna lawer o systemau dosbarthu ocsigen hylif swmp a allai elwa ar uwchraddio i wneud y mwyaf o'r cyfraddau llif sydd ar gael trwy'r paneli rheoli presennol. Trwy gyfuniad o geisiadau bwrdd iechyd, cynllunio blaenoriaeth Llywodraeth Cymru, argaeedd offer British Oxygen Company (BOC) a'n mewnbwn technegol, sefydlwyd cynllun ar gyfer uwchraddio safleoedd. O gyflwyno'r cynllun hwn, gellir gweld yn y tabl isod y bu cynnydd o 75% yn y ddarpariaeth llif ocsigen sydd ar gael o'r offer hylif swmp a gyflawnwyd ledled Cymru.

<sup>1</sup>Cynnydd mewn offer VIE (nid yw'n cyfrif am golledion system biblinell)



Uwchraddiad anweddyydd VIE ar y gweill

	Darpariaeth ocsigen cychwynnol (litr/munud)	Darpariaeth ocsigen ychwanegol (litr/munud)	Darpariaeth ocsigen terfynol (litr/munud)	Sylwadau
Ysbytai aciwt	48,944	23,911	72,855	Offer VIE, uwchraddio anweddyydd ac addasiadau panel rheoli
Ysbytai cymuned	8,586	100	8,686	Offer VIE yn bennaf yn darparu capaciti storio swmp ychwanegol
Ysbytai maes	0	18,950	18,950	VIE ac offer cryogenig
Cyfanswm	57,530	42,961	100,491	

## Tabl: Safleoedd COVID y GIG â systemau storio swmp – crynodeb o welliannau cyfradd llif ocsigen

Trwy brofi llwyth o'r systemau piblinellau mewnol presennol, roedd yn amlwg na allai llawer o safleoedd gyflawni'r enillion sylweddol a gyflawnwyd (cynyddu i'r eithaf llif ocsigen o'r VIE i 3000L/munud) i'r man yr oedd ei angen fwyaf neu'r ardaloedd a amlygwyd ar gyfer gofal COVID-19. Er bod rhai safleoedd wedi gwella eu dosbarthu mewnol trwy osod pibellau newydd, mae'n amlwg bod angen datblygu seilweithiau safleoedd ymhellach, yn enwedig os ydym am gwrdd ag unrhyw ymchwydd yn y dyfodol, neu hyd yn oed feirws newydd yn y dyfodol.

**Sut ydych chi'n pwysa a mesur wythnosau cynnar y pandemig a'ch rôl allweddol wrth**

## sicrhau bod digon o ocsigen ar gael i gleifion?

Mae ôl-ddoethinebu yn rhywbeth gwych, er i ni gynyddu'r llif ocsigen sydd ar gael o'n systemau ocsigen hylif swmp yn sylweddol wrth baratoi ar gyfer ymchwydd, y gwir amdani oedd na wnaethom wthio unrhyw un o'n systemau ocsigen swmp heibio i 65% o'u capaciti. Wrth symud ymlaen, mae'n amlwg bod angen deall ein systemau dosbarthu pibellau mewnol, a phenderfynu'n strategol ar y camau nesaf i sicrhau y gallwn ddefnyddio'r capaciti ychwanegol a grëir a sicrhau'r cyflenwad ocsigen mwyaf posibl lle mae'r angen.



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## Diogelwch Tân mewn ysbytai maes

Ers dechrau'r pandemig roedd brys mawr i greu capaciti gwelyau ychwanegol ar gyfer y mewnlifiad disgwyliedig o gleifion sydd angen triniaeth ysbyty. Yn ychwanegol at y newidiadau dirifedi i ysbytai presennol, arweiniodd hyn hefyd at droi llawer o adeiladau eraill, megis canolfannau hamdden a chyfadeiladau chwaraeon, yn ysbytai maes 'arddull Nightingale' dros dro.

Ni ddyluniwyd yr un o'r adeiladau hyn ar gyfer y newid defnydd hwn ac nid oedd unrhyw ganllawiau na rheoliadau yn bodoli i gefnogi'r cyfleusterau hyn a addaswyd yn llawn. Roedd hyn yn cyflwyno sawl her o ran cyflawni datrysiadau diogel rhag Tân a allai fodloni gofynion deddfwriaethol y Gorchymyn Diwygio Rheoleiddio (Diogelwch Tân).

Ers dechrau COVID-19, mae ein tîm Tân, Anthony Pitcher (Uwch Gynghorydd Diogelwch

Tân) a Stuart Hanger (Cynghorydd Diogelwch Tân), wedi bod yn darparu cefnogaeth ac arweiniad i'r GIG ledled Cymru gan fynd i'r afael â diogelwch Tân yn y cyfleusterau dros dro hyn.

Wrth i'r ymateb i'r pandemig fynd rhagddo'n gyflym, yn anochel, roedd rhywfaint o ddryswch o ran aciwtedd disgwyliedig y cleifion yn y cyfleusterau hyn. Er enghraift, a fyddai mwyafrif y cleifion yn annibynnol, yn ddibynnol neu'n ddibynnol iawn? A fyddai angen therapi ocsigen? Os felly, pa gymhareb o gleifion fyddai angen ocsigen? Mae dealtwriaeth o'r ffactorau hyn yn hanfodol ar gyfer sicrhau datrysiadau diogel rhag Tân, yn enwedig o ran darpariaethau ocsigen, y gall eu presenoldeb gynyddu cyfraddau ymlediad Tân yn sylweddol.

Mae'r sefyllfa sy'n newid yn gyflym, wrth i fwy o wybodaeth ddod ar gael ac wrth i ragamcanion

modelu COVID-19 gael eu diweddar, wedi gofyn am ddull addasol hyblyg gan y tîm.

Dau brosiect yr oedd Anthony a Stuart yn allweddol iddynt wrth gynorthwyo'r bwrdd iechyd i sicrhau cydymffurfiad Tân yw:

- Ysbyty Maes y Bae, Bwrdd Iechyd Prifysgol Bae Abertawe**

Roedd hyn yn arbennig o heriol o safbwyt diogelwch Tân. Addaswyd adeilad pren a godwyd y tu mewn i gragen hen uned ffatri yn gyflym iawn i fod yn ysbyty ymchwydd gyda lle i 1,000 o welyau ar draws 12 ward.

Roedd dulliau dianc yn fater penodol. Mae'r egwyddorion dianc y manylir arnynt yn y Cod Tân yn seiliedig ar gyfyngu pellteroedd teithio trwy ddarparu adrannau (h.y. waliau/lloriau Tân). Bwriad y trefniadau rhannu hefyd yw cyfyngu ar ymlediad Tân posibl a nifer y cleifion mewn unrhyw un ardal sydd angen gadael mewn argyfwng.

Yn y termau symlaf, mae nenfydau uchel fel y rhai a geir mewn neuaddau chwaraeon mawr yn fuddiol o ran rhyddhau gwres a gwyntyllu mwg. Yn aml mae hyn yn ymestyn yr amser cyn i amodau anghynaladwy godi. Fodd bynnag, yn wahanol i'r cyfeintiau mawr uchel hyn, mae nenfwd isel, ar uchder o oddeutu 2.6m, drwy gyfleuster Ysbyty Maes y Bae.

Gweithiodd y tîm yn agos gyda Hoare Lea, peirianwyr Tân ymgynghorol, wrth baratoi adroddiad peirianneg Tân yn dangos, pe bai Tân, y byddai preswylwyr yn gallu dianc cyn i'r amodau ddod yn anghynaladwy. Fe wnaethant hefyd ddatblygu a phrofi matrics achos ac effaith y system larwm Tân.

- Ysbyty Athrofaol y Faenor, BIP Aneurin Bevan**

Er bod llawer o'r Byrddau Iechyd wedi dewis creu capaciti ysbyty maes, manteisiodd Bwrdd Iechyd Prifysgol Aneurin Bevan ar y cyd â'r prif gontactwyr, Laing O'Rourke, ar y cyfle i gyflymu cwblhau Ysbyty Athrofaol y Faenor. Y nod oedd trosglwyddo'r blociau ward yn rhannol er mwyn derbyn cleifion ddiwedd mis Ebrill, tra bod gweddill yr ysbyty yn safle adeiladu ac mae'n dal i fod.

Gan gydnabod y realiti na fyddai pob un o systemau diogelwch Tân yr ysbyty, fel y system

chwistrellu, y system larwm Tân a lifftau gadael mewn argyfwng, yn gwbl weithredol ledled yr adeilad, roedd angen dull cydlynol ar gyfer y strategaeth ymateb i Tân a gadael mewn argyfwng. Nid yn unig y cyflwynodd hyn yr her o ddatblygu strategaeth a oedd yn ddiogel i gleifion COVID-19 a staff gofal iechyd ond roedd yn rhaid iddi hefyd sicrhau bod gweithwyr safleoedd adeiladu yn gallu gadael mewn argyfwng yn ddiogel rhag risgau Tân a heintiau yn ogystal â diogelwch diffoddwyr Tân sy'n ymateb i ddigwyddiadau.

Cododd cymhlethdod pellach gyda thrafodaethau ynghylch y posibilrwydd o gynyddu capaciti gwelyau yn Ysbyty Athrofaol y Faenor trwy roi dau wely yn yr ystafelloedd gwely sengl, ond, diolch byth, nid oedd angen hyn.

Yn ogystal â hyn, mae'r tîm Tân wedi chwarae rhan fawr wrth fod yn dyst i'r gwahanol systemau Tân ar gyfer y rhaglen garlam.

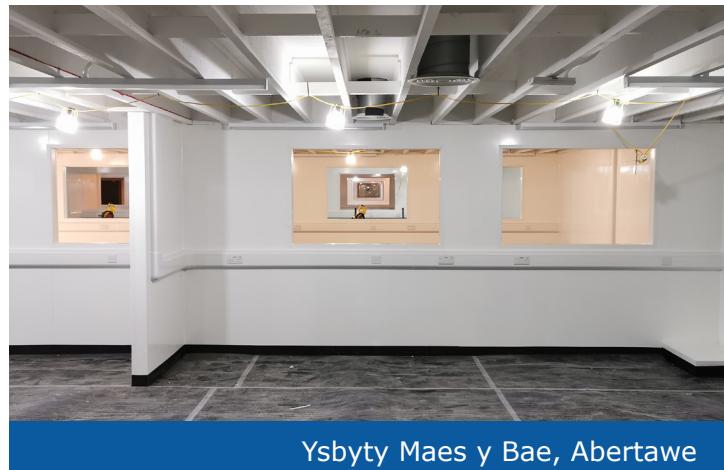
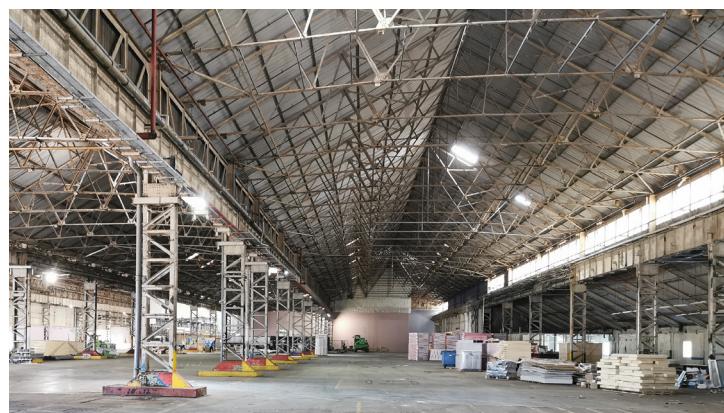
Nawr bod ton gychwynol y feirws wedi mynd heibio, mae Anthony a Stuart yn brysur yn cefnogi'r byrddau iechyd ar eu cynlluniau adfer.



**Anthony Pitcher**

Uwch Ymgynghorydd Diogelwch Tân

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Ysbyty Maes y Bae, Abertawe

# Ein tîm eiddo a COVID-19

## Mae tîm eiddo Gwasanaethau Ystadau Arbenigol yn cynorthwyo deddfwriaeth datblygu newydd a ganiateir i helpu gyda'r ymateb i COVID-19

Yn dilyn cydweithredu agos rhwng y tîm eiddo yng Ngwasanaethau Ystadau Arbenigol a'r Gyfarwyddiaeth Gynllunio yn Llywodraeth Cymru, daeth rheoliadau cynllunio newydd i rym ar 10 Ebrill sy'n caniatáu adeiladu dros dro a newid defnydd at ddibenion argyfwng iechyd cyhoeddus fel datblygiad a ganiateir gan neu ar ran corff y GIG yng Nghymru. Mae ysbytai, gorsafoedd profi a chyfleusterau corffdy yn dod o dan y categorïau hyn.

Mae'r rheoliadau newydd yn caniatáu newid y defnydd o adeilad neu dir yn Nosbarth C2 (Sefydliau Preswyl) neu Ddosbarth D1 (Sefydliau dibreswyl) i'w ddatblygu at y diben o atal, rheoli neu liniaru effeithiau, neu gymryd camau eraill mewn cysylltiad ag argyfwng iechyd cyhoeddus. Mae'r rheoliadau hefyd yn caniatáu darparu adeiladau,

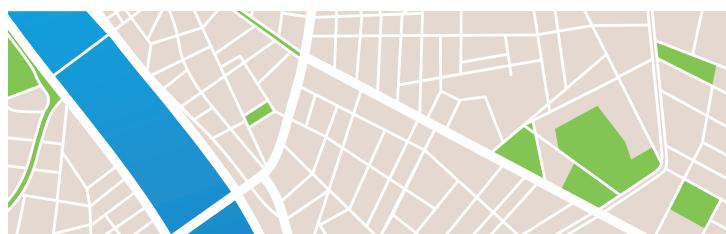
strwythurau symudol, gweithfeydd, offer neu beiriannau ar y tir at yr un diben. Mae nifer o amodau a gwaharddiadau wedi'u nodi yn y ddeddfwriaeth, gan gynnwys y byddai angen cyflwyno cais cynllunio yn y ffordd arferol lle cynigir cadw'r datblygiad yn hwy na 12 mis.

Dywedodd Clive Ball, Pennaeth Gwasanaethau Ystadau Arbenigol: "Mae cyhoeddi'r rheoliadau hyn yn cael gwared ar rwystr sylweddol wrth ddarparu ysbytai maes a chanolfannau profi yng Nghymru i helpu gyda'r ymateb i COVID-19".



**Clive Ball** | Pennaeth Eiddo

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## Ein gwefan ar ei newydd wedd

Os ydych chi'n ymwelydd rheolaidd â'n gwefan, efallai eich bod wedi sylwi bod y wefan yn edrych ychydig yn wahanol.

Ar ôl misoedd o ddatblygiad, rydym yn falch ein bod wedi lansio ein tudalen we ar ei newydd wedd sy'n hawdd ei gwe-lywio ac sydd â'r holl wybodaeth y bydd ei hangen arnoch.

Mae ein tudalennau'n cynnwys yr wybodaeth ddiweddaraf ynglŷn â'n gwasanaethau, cyhoeddiadau, rhybuddion a hysbysiadau ac maent yn rhan o blatfform lletya gwefan Partneriaeth Cydwlasanaethau GIG Cymru ar ei newydd wedd.

Am y tro, bydd ein hen gyfeiriad gwe yn parhau i fod yn weithredol am gyfnod byr, ond ni fydd yn cael ei ddiweddu. Bydd unrhyw chwiliadau ar-lein a hypergysylltiadau i'n hen dudalennau gwe yn ailgyfeirio i'r rhai newydd.

Os nad ydych chi wedi ymweld â'n gwefan newydd eto, ein cyfeiriad gwe newydd yw:

<https://nwssp.nhs.wales/ourservices/specialist-estates-services/>

Gadewch inni wybod beth yw eich barn am ein gwefan newydd ac os oes unrhyw beth arall yr hoffech ei weld ar ein tudalennau: [ses.info@wales.nhs.uk](mailto:ses.info@wales.nhs.uk).

**Gwasanaethau Ystadau Arbenigol**

Eiddo

Rydym yn darparu cyngor a chymorth i GIG Cymru a Llywodraeth Cymru yngylch pob gweidd ar dir ac eiddo. Mae hyn yn cynnwys: caffaeliadau a gwarediadau, prylesi a rheoli eiddo,...

**Yr Hyn a Wnawn**

**Gwasanaethau Ystadau Arbenigol**

- Am Wsasanaethau Ystadau Arbenigol
- Ein Gwasanaethau
- Ein Pobl
- Cyhoeddiadau a Gwybodaeth
- Cysylltwch â'r Gwasanaethau Ystadau Arbenigol

**Cwestiynau Cyffredin**

- Ymholiad cyffredinol
- Sut mae ychwanegu gwerth am arian?
- Ein datganiad cenhadaeth wv

**Ein Gwasanaethau** **Ein Pobl** **Cyhoeddiadau a**

# Arolwg Cwsmeriaid Gwasanaethau Ystadau Arbenigol

Rydym bob amseryn awyddus i ddeall pa morfodlon ydych chi, ein cwsmeriaid, â gwahanol agweddau ar ein gwasanaethau, megis sut rydym yn ymateb i'ch anghenion ac a yw ein staff yn ymddwyn mewn modd proffesiynol wrth ymgysylltu â chi. Mae adnabod cwsmeriaid anhapus yr un mor bwysig i ni ag adnabod rhai hapus iawn.

Gyda hyn mewn golwg, ar ddiwedd pob blwyddyn galendr rydym yn cynnal arolwg i asesu eich barn ar ein gwasanaethau, ein staff a'r ffordd yr ydym yn cyfathrebu â chi – gan gynnwys eich barn ar ein gwefannau a'n cylchlythyr chwarterol. Rydych hefyd yn cael cyfle i roi gwybod i ni a allem wneud unrhyw welliannau neu gynnig gwasanaethau newydd.

Er bod cyfraddau dychwelyd yn isel ar y cyfan, mae'r adborth yn hanfodol i ni. Mae rhai o'r penawdau o 2019 fel a ganlyn:

 Roedd **90.3%** yn cytuno/cytuno'n gryf eu bod: '*Yn hapus ag ansawdd y gwasanaeth a ddarperir*'

 Roedd **90.3%** yn cytuno/cytuno'n gryf bod: '*Staff yn ymatebol i'm hanghenion*'

 Roedd **93.9%** yn cytuno/cytuno'n gryf bod: '*Rheolaeth a threfniadaeth y gwasanaeth yn dda*'

 **93.9%** strongly agreed/agreed that: '*Ein staff yn ymddwyn mewn ffordd broffesiynol*'

 **90.3%** strongly agreed/agreed that: '*Y gwasanaeth yn cael ei ddarparu mewn modd amserol*'

Daeth cyfleoedd i'r amlwg i wella ein gwefannau a dosbarthiad y cylchlythyr hwn

Roedd y sylwadau a dderbyniwyd hefyd yn ddefnyddiol iawn; roedd llawer o ganmoliaeth am yr hyn a wnawn ynghyd â syniadau yr ydym yn bwriadu ymchwilio iddynt, megis datblygu gwasanaeth i edrych ar feysydd fel asbestos, radon ac iechyd a diogelwch. Efallai y bydd lle hefyd i ehangu'r briff a gynigir mewn perthynas â manylebau safonol.

Diolch yn fawr i'r rhai ohonoch a ymatebodd. Y tu allan i'r arolwg ffurfiol hwn, os oes gennych unrhyw sylwadau ar ein gwasanaethau, cadarnhaol neu negyddol, neu syniadau ar gyfer gwelliannau neu wasanaethau newydd, yna e-bostiwch: [ses.info@wales.nhs.uk](mailto:ses.info@wales.nhs.uk).



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## Llwyddiant! Adnewyddu gwobr Rhagoriaeth mewn Gwasanaethau Cwsmer

Mae'n chwe blynedd ers i ni lwyddo i ennill y wobr Rhagoriaeth mewn Gwasanaethau Cwsmer i ddechrau, sy'n dod â chysyniadau gwasanaeth cwsmeriaid proffesiynol, lefel uchel i gylchrediad cyffredin gan ddarparu teclyn gwella unigryw i ni i helpu i ddarparu gwasanaethau sy'n rhoi ein cwsmeriaid, h.y. chi, wrth wraidd yr hyn rydym yn ei wneud.

Mynychodd asesydd y corff achredu Dŷ'r Cwmnïau ar 27 a 28 Ionawr 2020 i roi prawf ar ein gallu mewn perthynas â ffocws cwsmeriaid ein dulliau gwasanaeth, diwylliant y sefydliad, sut rydym yn casglu ac yn gweithredu

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ar adborth cadarnhaol gan gwsmeriaid ac ar adborth sy'n cynnig cyfleoedd i wella ac i drafod â'n cwsmeriaid sut maent yn canfod ansawdd ein gwasanaeth.

Er gwaethaf newidiadau sylweddol mewn personél dros y 12 mis diwethaf, yn bennaf oherwydd ymddeoliadau a gynlluniwyd, anogwyd yr asesydd i glywed sut mae staff newydd wedi coleddu ein diwylliant gwasanaeth cwsmeriaid cadarnhaol.

Fe wnaeth hefyd ganu clodydd am y gwytnwch yr ydym wedi llwyddo i'w greu yn ein tîm rheoli amgylchedd a chyfleusterau, y camau yr ydym wedi'u cymryd wrth greu cyfleoedd dysgu i staff ystadau a chyfleusterau cwsmeriaid trwy ddarparu gweithdai a seminarau wedi'u targedu, ein hawydd i ddatblygu'r genhedlaeth nesaf o beirianwyr ar gyfer GIG Cymru trwy'r cynllun Network75 a ddatblygwyd gan Brifysgol De Cymru,

ein presenoldeb cynyddol ar y cyfryngau cymdeithasol a'r ffordd yr ydym yn defnyddio adborth gwerthfawr gan gwsmeriaid i wella ein gwasanaethau.

Roeddem yn falch iawn o weld bod yr adroddiad gan yr asesydd wedi tynnu sylw at sylw gan gwsmer yn Ymddiriedolaeth GIG Felindre, "Mae Gwasanaethau Ystadau Arbenigol yn darparu fforwm rhagorol ar gyfer datrys pryderon a materion y dydd. Bob amser yn barod i ymateb".

Os ydych chi am ddarganfod mwy am ein Gwobr Rhagoriaeth mewn Gwasanaethau Cwsmer, os oes gennych adborth cadarnhaol neu negyddol, neu syniadau gwella gwasanaeth i ni eu datblygu, yna cysylltwch â:



**Martin Cooper** | Rheolwr Busnes

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## Newyddion staff



Jonathan Jones

Ym mis Ionawr, gwnaethom groesawu Jonathan Jones i'n tîm Rheoli'r Fframwaith. Mae Jonathan yn bensaer sydd â chryn brofiad yn gweithio yn y sector preifat ac fel Ymgynghorydd. Yn fwy diweddar, mae wedi gweithio i Boyes Rees Architects yng Nghaerdydd.

O ran ymadawyr, gadawodd Mark Furmage, Peiriannydd Dadhalogi, ni ym mis Mai i ymgymryd â'r rôl wag y Rheolwr Ystadau Gweithredol yn Ysbyty Brenhinol Morgannwg, rhan o Fwrdd Iechyd Prifysgol Cwm Taf Morgannwg. Mae hwn yn gyfle gwych i Mark ac mae'n dyst i'r gwaith caled y mae wedi'i wneud i'n cwsmeriaid dros y pedair blynedd diwethaf. Bydd colled fawr ar ei ôl.



Mark Furmage

Ein swyddi gwag diwedd araf yw: PrifGynghorydd Ystadau/Syrfêwr Meintiau yn arwain ar ddarparu sylwadau craffu ar achosion busnes cysylltiedig â chyfalaf i Lywodraeth Cymru er mwyn llywio penderfyniadau buddsoddi cyfalaf gyda'r nod o wella ystâd GIG Cymru.

Mae'r rôl Peiriannydd Dadhalogi a fydd yn cymryd lle Mark yn ffurio rhan o dîm profi sterileiddio bach a bydd hefyd yn gyfrifol am gefnogi'r Uwch Beiriannydd Dadhalogi i roi cyngor ac arweiniad i Lywodraeth Cymru ar faterion dadhalogi ac wrth drefnu a chwblhau'r rhaglen flynyddol o brofi diheintwyr ledled GIG Cymru.

# Y Gornel Hanes: Ysbyty Penley, Gogledd Cymru



Ar wahanol ffurffiau dros y blynnyddoedd, mae Gwasanaethau Ystadau Arbenigol wedi bod â chysylltiad hirsefydlog â'r ystâd iechyd yng Nghymru. Mae'n anodd rhagweld dyfodol adeiladu ysbytai yng Nghymru, ond mae'r gorffennol wedi'i gofnodi yn ein harchifau. Rydym yn gobethio y bydd yr erthygl ganlynol o ddiddordeb ichi.

## ***Daeth cyn-ysbyty milwrol yr Unol Daleithiau yn gymuned lewyrchus i ffoaduriaid o Wlad Pwyl yng Ngogledd Cymru am bron i 60 mlynedd***

Rhoddwyd Ysbyty Penley, ynghyd â dau safle arall - Llanerch Panna a Pharc Iscoyd - i Gorfflu Ailsefydlu Pwylaidd ym 1946 yn dilyn dyfarniad gan Syr Winston Churchill, i ofalu am gyn-filwyr Gwlad Pwyl a ymladdodd ochr yn ochr â Chyngreiriad yn yr Ail Ryfel Byd.

Gadawodd Byddin America y rhan fwyaf o'r offer yn yr ysbyty felly roedd ganddo adnoddau megis adran pelydr-X, ffitiotherapy, theatr lawdriniaeth ac uned famolaeth.

Ar ei anterth roedd yr ysbyty ar ffurf campws yn gartref i oddeutu 2,000 o gleifion, staff a'u teuluoedd, ond erbyn 2002 dim ond chwe chlaf oedd ar ôl. Er iddo gau yn 2002 gyda llawer o'r safle'n cael ei ailddatblygu, mae ei waddol wedi'i wreiddio yng Ngogledd Cymru a chynhaliodd Amgueddfa Wrecsam arddangosfa y llynedd i nodi hanes y safle.

Wrth siarad yn ystod yr arddangosfa, disgrifiodd y curadur Jonathon Gammond y gymuned fel "rhyfeddod Pwylaidd", gyda cinema, capel a chlwb hamdden, gyda chleifion yn ymgartrefu yno'n wreiddiol ar ôl cael eu dadleoli gan y

rhyfel. "Roedd yn lle unigryw, fel Gwlad Pwyl cyn y rhyfel a oedd yn bodoli yng nghanol Cymru. Roedd yn bentref o fewn pentref."

Roedd gan y gwersyll ei feithrinfa ei hun, neuadd adloniant, ystafell glwb, bwrdd snwceraint llawn a sinema â chyfarpar da gyda seddi sinema go iawn. Troswyd un o'r barics yn eglwys, parchwyd yr un traddodiadau diwylliannol a chrefyddol Pwylaidd ac roedd yr awyrgylch teuluol o fudd i'r cleifion wrth iddynt wella.

"Roeddwn i'n meddwl bod hon yn enghraift ddiddorol o sut mae hanes cenedlaethol, rhyngwladol a lleol i gyd yn plethu gyda'i gilydd mewn un safle sy'n eithaf unigryw, yma yn Wrecsam" meddai Mr Gammond.

Yn 1961, gyda'r boblogaeth o Wlad Pwyl yn heneiddio, cymerodd yr ysbyty rôl newydd o ofalu am yr henoed sydd angen gofal cyson. Erbyn yr 21ain ganrif, nid oedd yn bosibl o safbwyt economaidd i gadw'r safle 30 ward ar agror i chwe chlaf felly adeiladwyd uned unllawr newydd gyda llety wyth ystafell ar ffurf byngalo yn agos at y gwersyll gwreiddiol; agrorodd yn 2004 ac mae'n dal yn gweithredu heddiw.

Mae gennym lyfrgell luniau helaeth o ystadau ysbyty yng Nghymru a byddem yn croesawu unrhyw luniau a allai ehangu ein cofnodion. I gyflwyno lluniau, neu os hoffech i ni gynnwys eich ysbyty mewn rhifyn o'r cylchlythyr hwn yn y dyfodol, cysylltwch â:



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# Cyhoeddiadau Technegol

## Nodiadau Adeilad Iechyd Cymru (WHBNs)

Dogfennau canllaw ar gyfer cynllunio a dylunio ystod o adeiladau gofal iechyd sy'n darparu gwasanaethau arbenigol yng Nghymru.

Cyhoeddwyd hyd yma yn 2020–2021:

- [WHBN 04-01 – Cyfleusterau i Gleifion Mewnol sy'n Oedolion, Atodiad 2: Ystafelloedd Pwysau Negyddol](#)  
(Cyhoeddwyd 24/06/19)

Mae'r ddogfen hon yn nodi canllawiau ymarferol ar sut i ddarparu cyfleusterau ynysu diogel ac effeithiol i gleifion heintus (ynysu ffynhonnell) sy'n syml i'w defnyddio ac sy'n cwrdd â gofynion Llywodraeth Cymru fel yr amlinellir yn WHC (2018) 033.

Dogfennau ar y gweill:

- WHBN 00-10 – Canllawiau ar reiliau llenni gwrth-rwymyn
- WHBN 06-01 – Dylunio cyfleusterau ar gyfer delweddu diagnostig
- WHBN 10-01 – Gweithdrefnau llawfeddygol
- WHBN 10-02 – Llawfeddygaeth Ddydd
- WHBN 14-02 – Rheoli meddyginaethau

## Memorandwm Technegol Iechyd Cymru (WHTMs)

Dogfennau sy'n rhoi arweiniad technegol ar ystod eang o systemau arbenigol yn ystâd gofal iechyd Cymru.

Ni chyhoeddwyd unrhyw Femoranda Technegol Iechyd Cymru hyd yma yn ystod 2020–21.

Dogfennau ar y gweill:

- WHTM 03-01 – Awyru arbenigol ar gyfer adeiladau gofal iechyd

I weld pob un o'n Nodiadau Adeilad Iechyd Cymru a Memorandwm Technegol Iechyd Cymru a gyhoeddwyd yn flaenorol, ewch i'n tudalen we [Cyhoeddiadau a Gwybodaeth](#).

Am ragor o wybodaeth cysylltwch ag:



**Jessica Morgan** | Swyddog Gwybodaeth  
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## Manylion Cyswllt Gwasanaethau Ystadau Arbenigol



Gall y rhai sy'n gweithio yn GIG Cymru ddefnyddio naill ai ein [cyfeiriadur gwasanaethau](#) neu [restr o staff](#) i ddod o hyd i'r person iawn i wneud y gwaith, a gall y rhai nad ydynt yn gweithio i GIG Cymru ddefnyddio'r rhestr o staff ar ein [gwefan](#).



Gwasanaethau Ystadau Arbenigol

3ydd llawr, Tŷ'r Cwmnïau

Ffordd y Goron

Caerdydd

CF14 3UB



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