GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru Public Health Wales	**Name of Meeting** Quality, Safety and Improvement Committee **Date of Meeting** 06 May 2026 **Agenda item:** 3.2

Public Health Wales Annual Emergency Preparedness, Resilience & Response Report 2025/26	
Executive lead:	Professor Fu-Meng KHAW, National Director of Health Protection and Screening Services, Executive Medical Director
Author:	Huw Williams, Head of Emergency Preparedness, Resilience & Response

Approval/Scrutiny route:	Public Health Wales Emergency Preparedness Resilience & Response Group - 24/03/2026 Health Protection & Screening Services Directorate Management Team – 14/04/2026 Public Health Wales Business Executive Team – 06/05/2026 Quality Safety Improvement Committee – 04/06/2026 Public Health Wales Board – 30/07/2026

Purpose:

This paper provides the Quality, Safety and Improvement Committee with a summary of the 01 Public Health Wales 2025-26 Annual EPRR Report (V1), ensuring that Public Health Wales continues to meet its statutory obligations under the Civil Contingencies Act 2004 (CCA) in maintaining arrangements which are fit for purpose.

Recommendation:

APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
☒	☐	☐	☐	☒

The Committee is asked to:

- Receive **ASSURANCE** that Public Health Wales is compliant with statutory emergency planning duties and is maintaining effective preparedness and resilience arrangements.
- **APPROVE** submission of the Public Health Wales Annual EPRR Report 2025/26 to Welsh Government by the required deadline of 31 July 2026.

• **NOTE** the key organisational risks and 2026/27 priority areas that will guide the forthcoming EPRR work programme.
Link to Public Health Wales Strategic Plan Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives. This report contributes to the following:

Strategic Priority / Wellbeing Objective	4 - Delivering excellent public health services

Summary impact analysis	
Equality and Health Impact Assessment	An Equality Health Impact Assessment has not been undertaken.
Risk and Assurance	This report provides assurance relevant to ensuring the organisation is prepared to respond to the hazards and threats of the National Security Risk Assessment.
Health and Social Care (Quality and Engagement) (Wales) Act	EPRR activity supports and/or takes into account the Health and Care Standards for NHS Wales Quality Themes, and in particular, Theme 02.
Financial implications	There are no financial implications arising from this report.
People implications	There are no people implications arising from this report.

1. Purpose / Situation

This paper provides the Quality, Safety and Improvement Committee with a summary of the 01 Public Health Wales 2025-26 Annual EPRR Report (V1), ensuring that Public Health Wales continues to meet its statutory obligations under the Civil Contingencies Act 2004 (CCA) in maintaining arrangements which are fit for purpose.

Public Health Wales (PHW), as a Category 1 responder under the Civil Contingencies Act (2004), is required to provide annual assurance to Welsh Government on its emergency preparedness, resilience, and response (EPRR) arrangements.

The PHW Annual EPRR Report for 2025/26 has been completed and outlines organisational compliance, progress, risks, and priorities.

The report is due for submission to Welsh Government by 31 July 2026, following review through the scheduled internal governance pathway.

2. Background

PHW maintains statutory duties for emergency planning, business continuity, and multi-agency cooperation.

The 2025/26 reporting period included significant operational activity, major incident responses, participation in national exercises (including Exercise Pegasus), and internal developments such as the update to the Emergency Response Plan (ERP) Version 4.0 and the completion of the new PHW Pandemic Arrangements Version 1.0.

Key governance:

- Executive Lead: Professor Fu-Meng Khaw, National Director HPSS & Executive Medical Director
- Operational EPRR Lead: Huw Williams, Head of EPRR
- EPRR Team: Deputy Director, Manager, Officers, and Support Officers

The report was reviewed or is scheduled for review by:

- EPRR Group: 30.03.26
- HPSS Directorate Management Team: 14.04.26
- Business Executive Team (BET): 06.05.26
- QSIC: 04.06.26
- PHW Board: 26.06.26 or 30.07.26

3. Assessment

Compliance and Organisational Assurance

PHW continues to fulfil statutory duties under the Civil Contingencies Act (2004) and NHS Wales Emergency Planning Core Guidance (2015).

Key assurance findings include:

- Updated Emergency Response Plan (ERP v4.0) reflecting lessons from COVID-19, Exercise Pegasus, and multi-agency feedback.
- Business Continuity Strategy (V2) embedded; all directorates undertaking refreshed BIAs and BCP updates (March 2026).
- Robust engagement with Local Resilience Forums and national EPRR structures across the UK.
- Active participation in exercises across all hazards, including mass casualty, CBRN, cyber, severe weather, and digital disruption.

Major Achievements 2025/26

- Delivery and testing of Pandemic Response Arrangements (Version 01), including Exercise ANADL.
- Strengthened cyber preparedness via new Cyber Incident Response Plan aligned to emergency response and business continuity processes.
- Delivery of national and local training, including Wales Gold/Silver, Strategic/Tactical/Operational, Loggist, Business Continuity and Mass Casualty arrangements.
- Completion of extensive multi-agency training programme (117 live incidents managed; numerous exercises).
- Continued leadership in national (Wales and 4 Nations) and international preparedness work (CBRN, IANPHI principles).
- Significant organisational participation in Exercise Pegasus, the UK's largest multi-phase pandemic preparedness exercise in over a decade.
- PHW contributed across all three phases—containment, emergence, and mitigation—testing national command structures, situational reporting, scientific advisory processes, data integration, and the operationalisation of PHW's revised Emergency Response Plan and Pandemic Response Arrangements.
- Lessons from Pegasus directly informed updates to PHW's revised Emergency Response Plan and Pandemic Response Arrangements, strengthening decision making, multidisciplinary working, and internal coordination processes.

Risks Identified

Key organisational risks include:

- Retention of corporate memory around pandemic response capability.
- Digital infrastructure limitations affecting surveillance, modelling, and analytics.
- Workforce capability and resilience for specialist mobilised roles.
- Anticipation that future pandemics may require fundamentally different models than COVID-19.
- Reliance on national and multi-agency processes for effective coordination (e.g., power outage preparedness, countermeasures)

Whilst NOT included in the Annual report (as it is primarily a lookback paper):

- Global instability and Business Continuity: Ongoing conflicts in the Middle East and Ukraine may disrupt supply chains, energy availability, and digital resilience, with potential impacts on PHW's critical functions. PHW will convene a small cross-organisational group to maintain shared situational awareness and assess any emerging risks to service continuity.

Key Service Implications

During 2025/26 PHW supported significant multi-agency major incidents including:

- Multi-vehicle RTCs (A55, Denbighshire, Holywell)
- Suspicious device incidents (Llanelli, Abergwynfi)
- Major fires (Ferndale, Conwy Tunnel impacts)
- Flooding (Whitland)

PHW support included SCG/TCG participation, public health risk assessment, coordination with health protection and environmental public health experts, and communication support.

2026/27 Priorities

- Maturing PHW's Pandemic Response Arrangements and embedding Exercise Pegasus lessons.
- Fully implementing refreshed Business Continuity Plans across all PHW Directorates.
- Delivering Wales HMP Outbreak Exercise with multi-agency partners.
- Completing Health Inequalities in EPRR project.
- Leading national Four Nations CBRN preparedness exercise.
- Contributing to the publication and adoption of national pandemic principles.

- Maintaining organisational readiness for emerging hazards.

Refer to Appendix A for a full copy of the report.

3.1 Well-Being Of Future Generations (Wales) Act 2015

The **Annual EPRR Report 2025/26** aligns strongly with the principles and five ways of working set out in the **Well-being of Future Generations (Wales) Act 2015**.

Emergency Preparedness, Resilience and Response (EPRR) is, by its nature, a core contributor to long-term population well-being, supporting Wales' ability to prevent, withstand, and recover from major incidents and public health threats.

The report outlines key developments including the revised Emergency Response Plan, updated Business Continuity arrangements, and strengthened pandemic preparedness which contribute to the long-term resilience of Public Health Wales and the wider system.

These arrangements ensure that risks are anticipated early and mitigated proactively, supporting sustained population health protection in the years ahead.

PHW's EPRR activities support the prevention of harm by identifying and mitigating vulnerabilities and ensuring readiness for a broad range of hazards - from infectious diseases and CBRN risks to digital disruption and severe weather.

The organisation's participation in national exercises (e.g., Exercise Pegasus) and investment in strengthened cyber and pandemic arrangements directly contribute to preventing avoidable impacts during future emergencies.

EPRR responsibilities are integral to the delivery of PHW's strategic priorities, particularly Strategic Priority 4: Delivering excellent public health services. The work described within the Annual Report supports national security risk priorities,

Health and Care Standards, and Wales-wide emergency planning policy, ensuring alignment across organisational and national objectives.

PHW continues to work closely with Local Resilience Forums, NHS organisations, Welsh Government, UK-wide partners, and international networks.

This collaborative approach ensures shared situational awareness, coordinated decision making, and integrated preparedness across multiagency systems that are critical for effective response during major incidents.

EPRR activities involve a wide range of stakeholders across the organisation, including directorates and specialist teams. Extensive training and exercising programmes have strengthened capability at all levels including strategic, tactical, operational and specialist mobilised roles; ensuring that staff are informed, engaged, and able to contribute effectively to emergency preparedness.

Overall, the EPRR programme makes a demonstrable contribution to a more resilient, healthier, and safer Wales, supporting several national well-being goals including *A Healthier Wales*, *A More Resilient Wales*, and *A Globally Responsible Wales*.

4. Recommendations

The Committee is asked to:

- Receive **ASSURANCE** that Public Health Wales is compliant with statutory emergency planning duties and is maintaining effective preparedness and resilience arrangements.
- **APPROVE** submission of the Public Health Wales Annual EPRR Report 2025/26 to Welsh Government by the required deadline of 31 July 2026.
- **NOTE** the key organisational risks and 2026/27 priority areas that will guide the forthcoming EPRR work programme.

Appendices

Appendix 01: Public Health Wales 2025-26 Annual EPRR Report (V1)

NHS WALES EMERGENCY PLANNING, RESILIENCE & RESPONSE ANNUAL REPORT 2025/26

Name of NHS Organisation	Public Health Wales	**Date**	20th March 2026
Signature of Chief Executive Officer			

Purpose

The NHS Wales Emergency Planning Resilience and Response Annual Report is a mechanism for providing assurance to NHS organisations, the NHS Executive and Welsh Government of the emergency planning arrangements, preparedness and resilience within organisations across NHS Wales. The NHS Executive will review reports from across the system, seeking assurance that organisations:

- Mitigate where possible against the risks identified within the NSRA and Wales Risk Register.
- Have a robust emergency plan in place for major incidents (CBRN, terrorist attacks, major power outages, high consequence infectious disease outbreaks, cyber-attacks etc).
- Have appropriate business continuity management arrangements in place.
- Regularly test the efficacy of organisational plans through training and exercise; and
- Ensure staff have the appropriate training in command-and-control processes and maintain their skills and knowledge including through CPD opportunities.

Governance

1. **Please provide the name and position of your nominated Executive level lead for civil contingency/emergency preparedness arrangements.**

   Professor Fu-Meng Khaw National Director, Health Protection and Screening Services Executive Medical Director

2. **Please provide the name and position of your nominated Executive level business continuity lead if different from the above.**

   As above

3. **Please provide the name and position of your officer(s) who has lead day to day responsibility for your civil contingencies/emergency preparedness arrangements.**

- Tom Fowler: Deputy National Director of Health Protection and Screening Service
- Huw Williams: Head of Emergency Preparedness Resilience and Response (EPRR)
- Daniel Rixon: EPRR Manager
- Cameron Muir: EPRR Officer
- Katie Austin; EPRR Officer
- Samantha Smith: EPRR Support Officer
- Holly Jones, EPRR Support Officer

4. **Please provide the name and position of your officer(s) with day-to-day responsibility for your business continuity arrangements.**

As above

5. **Please provide the name and position of the officer in your organisation responsible for PREVENT activities (normally delivered as part of Safeguarding).**

Claire Birchall: Executive Director of Nursing, Quality & Integrated Governance.

Donna Newell: Named Lead for Safeguarding based in Nursing, Quality & Integrated Governance.

6. **Is there a mechanism for discussing and co-ordinating health emergency planning arrangements internally within your organisation?**

YES ☒ **NO** ☐

7. **Please provide details of your internal mechanism for co-ordinating your emergency planning arrangements – for example: contingency/risk group structure, emergency preparedness strategy, EP work plan etc.**

The EPRR function manages the day-to-day resilience activity for Public Health Wales. This includes maintaining core PHW plans and procedures and delivering training for key roles required to respond to emergencies.

Public Health Wales also has a long-established Emergency Preparedness, Resilience and Response (EPRR) Group. This cross-organisational group is chaired by Professor Fu-Meng Khaw, National Director HPSS and Executive Medical Director.

Its purpose is to collectively deliver an agreed annual action plan covering planning, training, and exercising, to address identified risks and lessons. The group provides assurance and reports to the HPSS DMT, with onward reporting to BET, QSIC, and the Board.

The Terms of Reference (ToRs) for the EPRR Group were last reviewed, updated, and agreed by members on 10 April 2025. They are scheduled for further ratification on 19 May 2026.

8. **If applicable, who represents your organisation at the Local Resilience Forum meetings?**

The EPRR Team represents Public Health Wales at Local Resilience Forum (LRF) meetings across Wales, supported where necessary by subject-matter experts from within the organisation, as outlined below.

Each LRF area has an identified Communicable Disease Consultant, along with nationally agreed subject-matter leads, providing PHW with consistent capability across the country. A similar arrangement is in place for environmental public health support.

The EPRR Team is fully engaged with multi-agency partners across Wales and the wider UK resilience structures, including LRFs, partner Public Health Institutes, and Government. This

involvement spans all hazards and all elements of the resilience agenda, including planning, training, and exercising.

As the national public health institute for Wales, Public Health Wales is a core member of the following regular EPRR-related groups and is represented accordingly:

Group	Representation	Frequency
UKHSA/DG Board	National Director, HPSS, Executive Medical Director.	**Quarterly**
UK Health Protection Committee	National Director, HPSS, Executive Medical Director.	**Quarterly**
UK Health Protection Oversight Group	Deputy National Director, HPSS.	**Quarterly**
UK 4 Nations EPRR Public Health Group	EPRR Team*	**Quarterly**
Wales Resilience Forum	National Director, HPSS, Executive Medical Director.	**Quarterly**
Wales Resilience Partnership	Head of EPRR.	**Quarterly**
Wales CONTEST Protect & Prepare Group	Head of EPRR.	**Quarterly**
Wales CBRN Countermeasures Group	EPRR Team.	**Quarterly**
Wales Risk Group	EPRR Manager.	**Quarterly**
Wales Learning & Development Group	EPRR Manager	**Quarterly**
NHS Wales Health & Social Services Group	Head of EPRR.	**Weekly**
NHS Wales Emergency Planning Advisory Group	EPRR Team.	**Quarterly**
Multiple EPAG Operational (T&F) Groups	EPRR Team.	**As required**
4no. LRF Strategic Groups	Head of EPRR.	**Quarterly**
4no. LRF Coordination Groups	EPRR Manager.	**Quarterly**
Multiple LRF Operational (T&F) Groups	EPRR Team.	**As required**

*This group is chaired by the Head of EPRR, PHW.

9. When were your business continuity arrangements for maintaining critical services last reviewed and adopted by your Board.

Please provide detail of your business continuity management arrangements.

The revised PHW Business Continuity Strategy (V2), Impact Analysis and Plan Templates were approved by the Emergency Preparedness Resilience & Response Group on the 16th of July 2024.

Coordinated across PHW by the EPRR team; all Services are currently undertaking a review of their Impact Analyses and Business Continuity Plans (March 2026) – specifically considering supply chain and energy resilience in relation to the organisation's critical services.

Coordinated across Public Health Wales by the EPRR Team, all Services are currently undertaking a systematic review of their Impact Analyses and Business Continuity Plans (as of March 2026).

This review places particular emphasis on supply chain dependencies and energy resilience, reflecting the significant global disruptions arising from the ongoing conflicts in both the Middle East and Ukraine.

Given these combined geopolitical pressures, Services are assessing potential vulnerabilities and ensuring that critical Public Health Wales functions remain resilient to disruptions in essential supplies, energy availability, and logistical continuity.

Activity is reported through the PHW EPRR Group and Business Executive Team. As part of the programme's annual assurance, the 2025/26 annual report detailing the EPRR activity at PHW will be received via the following governance route:

Group	Date
Emergency Preparedness Resilience & Response Group (EPRR) Group:	**30.03.26**
Health Protection Screening Services Directorate Management Team (HPSS DMT):	**14.04.26**
Business Executive Team (BET):	**06.05.26**
Quality, Safety and Improvement Committee (QSIC)	**04.06.26**
PHW Board	**26.06.26 or 30.07.26**

10. Does your organisation's corporate risk register include any business continuity or emergency planning risks? If yes, please provide details of these specific risks and how they are managed within the organisation.

Yes. Public Health Wales has a Strategic Risk Register (SRR) and EPRR features heavily in the context of Strategic Risk 03.

The Strategic Risk Register (SRR) is the vehicle through which the Board takes assurance that it has a clear understanding of the strategic risk facing the organisation in the delivery of its strategic objectives, together with an understanding of the likelihood and the impacts if the risks are realised.

It provides assurance that any necessary actions required to mitigate those risks have been identified and are being suitably managed. The Strategic Risk Register details the six current Strategic Risks (approved by the Board) which are the highest-level risks that could prevent the organisation from delivering on its strategic priorities.

Strategic Risk 03

Risk of: Failure to deliver our contribution to excellent public health services in population health screening, infection, health protection and emergency response.

Caused by:

1. Weakness in clinical governance, clinical and administrative systems and digital processes, service planning and operational delivery.
2. Inability to maintain capacity and capability of the specialist workforce.
3. Absence of innovation and continuous quality improvement.
4. Exceedance in unplanned activities arising from unexpected acute threats to health.

Resulting in: Poor quality and unsafe services, sub-optimal population health outcomes for population screening and health threats, and a breach of legal duties on Civil Contingencies and Duty of Quality.

Executive sponsorship for this risk is provided by Meng Khaw, National Director of Health Protection and Screening Services.

The EPRR Team also contribute significantly to…

Strategic Risk 06

Risk of: The organisation suffering loss of sensitive information and/or disruption to services.

Caused by:

1. Cyber incidents
2. other external factors,
3. weaknesses in digital resilience,
4. silo working and lack of strategic oversight of digital and data outputs.

Resulting in: Poorer Public Health Outcomes, disrupted services and loss of trust in Public Health Wales

Executive sponsorship for this risk is provided by Iain Bell, Director of Data, Knowledge and Research.

Key Areas of Progress 2025/26

11. Please provide details of the key areas of progress against your organisation's EPRR priorities detailed in your 2024-25 Emergency Planning Annual Report.

In the 2024/25 report, Public Health Wales noted its priorities as.

Equalities in EPRR

Short summary: Work to understand and reduce inequalities within emergency preparedness and response across Wales, with research, engagement, and evidence-based recommendations.

EPRR Progress: There were delays to the project due to reprioritised workload associated with Exercise PEGASUS. Workshops are now scheduled to take place in Q1 2026/27 (29th April), with the academic article/research paper containing evidence-based recommendations to reduce inequities linked with EPRR to follow by Q3.

Enhanced Digital Resilience within Business Continuity Arrangements

Short summary: Strengthening organisational digital resilience, improving business continuity structures, and supporting cyber-incident preparedness.

EPRR Progress: Work continues in this area, with strengthened relationships across Divisions and Directorates. Work has accelerated with Digital Services on a cyber incident response plan for Public Health Wales, now aligned to the organisation's Emergency Response Plan (ERP) and Business Continuity (BC) plans and procedures. Outstanding actions will be carried over.

Pandemic Arrangements

Short summary: Preparation for national (PEGASUS) and Welsh pandemic (SOLARIS) exercises, updating PHW pandemic arrangements, and validating internal major incident response capability.

EPRR Progress: Public Health Wales successfully delivered all scheduled elements and showcased its arrangements in Exercise ANADL in March 2026.

Recommendations from COVID Inquiry Modules

Short summary: Ongoing review of emerging COVID-19 Inquiry recommendations to identify improvements to Public Health Wales' processes.

EPRR Progress: Public Health Wales continues to review Inquiry module reports and recommendations as they are published to identify areas for process enhancement. A full review of Module Two has been completed, with work now progressing to Module Three.

Health Promotion in Emergency Planning, Response and Recovery

Short summary: International project identifying health-promotion principles to strengthen resilience and community engagement in emergencies.

EPRR Progress: There have been delays to project delivery from IANPHI and partner organisations. Project timelines have been realigned, with most of the work now scheduled for 2026/27 and early 2027/28.

Major Incident/Emergency Plan

12. When was your Major Incident/Emergency Plan last reviewed and considered by your Board?

The PHW Emergency Response Plan sets out the organisation's roles and responsibilities during an emergency or major incident. It provides the overarching framework for activation and deactivation procedures, command and control arrangements, and recovery processes.

In September 2022, the EPRR team completed a comprehensive review of the Emergency Response Plan, incorporating lessons identified from PHW's response to COVID-19. Version 3.0 of the Plan was subsequently approved during a private session of the Public Health Wales Board in May 2023.

Rapid internal annual reviews were undertaken in 2024 and 2025, resulting in minor amendments. These included updated cross-references to recommendations and transferable lessons identified from a range of internal and external sources.

The revised versions were approved by the PHW Business Executive Team and QSIC and were noted by the PHW Board in summer 2024 and summer 2025 respectively.

13. When was your Major Incident/Emergency Plan last updated to reflect any organisational changes and essential plan contacts?

In January 2026, an overview of the project to review the Emergency Response Plan was presented to, and approved by the Emergency Preparedness, Resilience and Response (EPRR) Group.

The EPRR team undertook a comprehensive review of the plan, incorporating lessons identified from a range of sources, including the COVID-19 Inquiry Reports (01 & 02), Public Health Wales' response to recent emergencies, and the organisation's participation in Exercise PEGASUS.

Feedback on the current plan was sought by engaging with key internal contributors via the Executive Team, the EPRR Group, Consultants in Environmental Health Protection, Consultants in Communicable Diseases teams including CDSC/VPDP/Micro and HPSS DMT.

The review also drew upon the valuable experiences of external stakeholders across Wales and the UK as part of the process, with feedback from a cross-section of partners including the emergency services, local government, university health boards, Welsh Government, the Public Health Agency Northern Ireland, the UK Health Security Agency and Public Health Scotland.

The review of the Public Health Wales Emergency Response Plan has led to several significant enhancements in Version 4.0, summarised as follows:

- Integration of Red Team Thinking
- Alignment with the Cyber Incident Response Plan
- Clear principles for chairing multi-agency meetings
- Redesigned situational reporting (SitRep) processes
- Strengthened approach to health inequalities
- New and updated definitions, tools and references

Overall, these changes make Version 4.0 more practical, easier to navigate and better aligned with Public Health Wales' current operating environment and risks.

Exercise PEGASUS highlighted several important areas for improvement which have now been incorporated into Version 4.0:

- Need for a consistent internal position before attending UK-wide or Welsh Government meetings
- Late arrival of national documents limiting proactive analysis
- Early SitRep versions lacked essential epidemiological and inequalities detail
- Over-reliance on individual staff rather than system-wide processes

Collectively, the lessons from Exercise PEGASUS have directly informed many of the improvements within Version 4.0, particularly in relation to decision-making, multidisciplinary integration, situational reporting and the resilience of internal processes.

The Public Health Wales Emergency Response Telephone Directory which supports the arrangements was last updated in Q3 of 2025/26.

14. Do you have resilient activation systems, action cards and suitably trained and equipped staff to provide for a 24-hour emergency response to support your Major Incident/Emergency Plan?

YES ☒ **NO** ☐

15. If NO, what are the gaps and how are these being addressed?

As above.

National Security Risk Assessment (NSRA)

The following sections focus on preparedness and risks in relation to some of the highest rated risks within the NSRA and Wales Risk Register.

Your organisation's responses to these questions will inform the NHS Executive's programme of work in these areas with a view to improving assurance and resilience across NHS Wales. Please provide any supplementary information in support of your responses below.

Threat Mitigation/Security

16. Does your organisation have written procedures that may be needed to respond to a change in threat level to critical?

YES ☒ **NO** ☐

17. When was your organisation's Lock Down arrangements last worked through or tested?

Dates	Details of what was undertaken
	In Q3 of 2024/25, EPRR working with Infection Services (at UHW) delivered a series of lone worker training events to for staff to support PHW polices including 'lone worker and 'lockdown'. This formed part of a wider collaboration to implement recommendations from an internal security review which was jointly undertaken by Estates, Infection Services and supported by EPRR in at UHW during Q1-Q3 of 2024/25 advocating. • Staff training to influence and change behaviours. • Review of risk assessments. • Audit of the sites existing security and baselining against minimum standards. • Additional physical security (CCTV & TDSI) which was successfully granted funding for completion in Q4 of 2024/25.
09.01.25	In Q4 of 2024/25, EPRR working with Estates and Communications delivered and information brief to all staff. To help ensure the safety and security of our workplace, colleagues are asked to adhere to the following guidelines: • **Be Aware:** Always be mindful of your surroundings when entering or exiting the building. If you notice someone attempting to follow you without proper

	identification, do not hesitate to report it to our 3rd floor reception or to the ground floor security desk. • **ID Pass (Access card):** All staff are asked to ensure they are wearing and displaying their PHW issued ID pass. • **Use Your ID Pass (access card):** Ensure that you use your access card every time you enter the building and our floors, even if the door is already open. This helps maintain an accurate record of who is in the building at any given time. • **Do Not Hold Doors Open:** Whilst this is seen as courteous to hold the door open for others, please refrain from doing so unless you are certain they are authorised to enter. • **Report Suspicious Activity:** If you observe any suspicious behaviour or individuals attempting to gain unauthorised access, please report it immediately to our 3rd floor reception and the ground floor security desk. **Support New Employees:** Line managers and colleagues should ensure that new employees are aware of the need for vigilance and understand the importance of preventing tailgating both into the building and across our four floors.
27.01.25	In Q4 of 2024/25, Estates reviewed and updated its security processes linked to receiving visitors at CQ2 and other primary office locations. The revised measures also tightened up on staff attending premises without an approved ID badge and documented the processes to be followed in both situations. **NB.** It also reinforced the messages shared on 09.01.25.
29.01.26	Arrangements were last worked through as part of the wider review initiated by Estates in Q4 of 2025/26, which included an assessment of organisational threat and response procedures, as well as bomb and suspect package protocols. This work is currently being finalised to ensure all procedures reflect the latest standards. In addition, updates are being aligned with emerging best-practice guidance associated with Martyn's Law, which is being incorporated across all relevant processes.

18. Were any issues identified as a result and if so how has / is your organisation addressing these?

Work is always ongoing to develop and strengthen arrangements. As stated above, the focus this time will be to ensure emerging best-practice guidance associated with Martyn's Law, which is being incorporated across all relevant processes.

Power Outage

19. Do your business continuity arrangements include response arrangements for maintaining critical services in the event of a major power outage?

YES ☒ **NO** ☐

20. Please describe the preparedness actions the organisation has undertaken over the last 12 months (e.g. protocols, guidance, exercising etc) to respond to a major power outage?

As noted in the 2025 report, PHW issued National Power Outage Grab Bags for key 'identified' staff to hold, with a procedure to deploy to the nearest SCG and to ECCW in the event of an NPO.

Each bag contains the:

- PHW Emergency Response Plan, PHW Threat Response Procedure, Countermeasures Plan, PHW Emergency Response Handbook, Provision of Scientific & Technical Advice in Wales 2019 (STAC) and UK (CMO) agreed Public Health advice and guidance for a national power outage.

Practically – they also hold:

- Contact Details, Aide Memoire, PHW Log Decision Log x 2, First Aid kit (St John Ambulance small workplace kit - BS 8599-1:2019), Solar Charge/Wind-up Radio, Wind-up Flashlight, Power bank, Multi charger lead, Laptop charger, Notebook, Pen, Ruler, Water bottle, Spare Zip tag x 4

Grab bags have also been issued to infection services facilities:

- Glangwilli Hospital
- Singleton Hospital
- Gwynedd Hospital
- Wrexham Maelor Hospital
- UHW
- Wales Genomic Health Centre (Pengu)
- Llandough Hospital
- Bronglais

As part of regular maintenance, the EPRR team 'check in' with key 'identified' staff to ensure the bags are still fully stocked and ready for use.

The EPRR team at PHW also reached out to UHBs (via EPAG) to ascertain whether its Infection services located on hospital sites across Wales could be included in power outage exercises (as per the CVUHB series – Operation POET).

NB. Regular checks and maintenance of generators are undertaken at Key PHW sites across Wales as part of Estates BAU activity.

21. What are the key risks to your organisation in respect of a major power outage and how are you mitigating these? Please provide details of key vulnerable sites / facilities, how these have been assessed and dates of last assessments.

As reported in 2025…

Exercise Mighty Oak - the Tier 1, national exercise exploring the impacts, response and recovery from a national power outage (NPO) in Great Britain which aimed to support the development of the national response and recovery to an NPO.

The exercise clarified the critical activities which PHW must continue to deliver - mainly microbiology services at hospitals to support lifesaving activity and some frontline health protection services. It also highlighted the importance of being co-located with multi-agency partners in this scenario.

As a result, PHW undertook work with critical services including Microbiology and Health Protection to understand and mitigate the impacts where practicable. This was initially focussed on UHW in Cardiff, with engagement a site exercise (Operation POET September 2023).

Importantly, the learning has now been shared with laboratory sites across Wales for implementation. It has also been incorporated into business continuity plans for Microbiology and Health Protection.

As part of regular maintenance, the EPRR team 'check in' with key 'identified' staff to ensure the bags are still fully stocked and ready for use.

The EPRR team at PHW also reached out to UHBs (via EPAG) to ascertain whether its Infection services located on hospital sites across Wales could be included in power outage exercises (as per the CVUHB series – Operation POET).

NB. Regular checks and maintenance of generators are undertaken at Key PHW sites across Wales as part of Estates BAU activity.

Mass Casualty Incidents

22. Please describe how your emergency planning arrangements ensure your organisation can appropriately respond to a Mass Casualty incident in line with extant Mass Casualty guidance.

Public Health Wales is a member of the Wales Pre-Hospital Group and the Mass Casualty Subgroup in the development of the Mass Casualty Arrangements for Wales.

Public Health Wales' role in response confirms that the organisations responsibilities to assess impact on population health to inform the multi-agency response and recommend measures to protect public health and mitigate the effects of the incident.

Depending on scenario, the response could also include seeking preliminary advice from specialists regarding likely symptoms of those exposed (both immediate and delayed) and the need for immediate countermeasures such as decontamination, mass chemoprophylaxis and further guidance (e.g., anti-microbial prophylaxis).

The commitment is also clearly documented in the PHW Emergency Response Plan and details the role of the PHW Medical Director (Strategic Response Director initially out of hours).

Cyber Attack

23. Do your business continuity arrangements include written procedures for responding to a cyber-attack / ICT incident impacting across the organisation?

YES ☒ **NO** ☐

24. Has your organisation assessed the risk of a Cyber-attack and identified mitigating actions for the vulnerabilities highlighted? Please provide details.

Yes. Public Health has an ongoing program of development. It has a full time Lead Cyber Security Manager and a Principal Data Security Specialist as part of the Digital Services Team to coordinate activity in this area.

This is complimented by work undertaken (coordinated by the EPRR Team) with business continuity preparedness across PHW.

Work has accelerated with Digital Services on a cyber incident response plan for Public Health Wales. This is now aligned to the organisation's Emergency Response Plan (ERP) and Business Continuity (BC) plans and procedures.

25. Please describe the preparedness activity the organisation has undertaken in the previous 12 months (e.g. protocols, guidance, exercising etc) to build its cyber resilience.

During 2025/26, activities/achievements included.

- Delivery of a new Cyber Incident Response plan for Public Health Wales.

  NB. This is now fully aligned to the organisation's Emergency Response Plan (ERP) and Business Continuity (BC) plans and procedures.

- Regular exercising of some aspects of business continuity and recovery e.g. restoration of information using Exercise ERIS as the team/Divisional/Directorate level for awareness and resilience.
- Cyber security training is mandated across all staff, and regular phishing tests are continuously conducted across the organisation.

Communicable Diseases and Pandemics

26. Do your business continuity arrangements include plans to respond to a new pandemic?

Business Continuity Management (BCM) process at Public Health Wales provides a strategic framework for improving organisational resilience to disruption and supports the delivery of prioritised services during incidents.

The BCM Strategy adopts the Plan-Do-Check-Act Model (PDCA) which is identified as best practice in ISO 22301 and 22313. All Directorates and Divisions are required to complete a Business Impact Assessment (BIA), consider their activities and impacts from a loss of people, loss of information, loss of critical systems and a denial of access to premises.

Business Continuity Plans (BCPs) then draw the in key information from the BIAs to ensure plans are shaped to cover the key response activities required to mitigate the areas identified above. BCPs cover all hazards (including pandemic), and Directorates and Divisions are expected to consider this as part of their business continuity preparedness.

Pandemic Response Arrangements

Public Health Wales (PHW) has fundamentally redesigned its pandemic preparedness and response arrangements following extensive learning from COVID-19, structured debriefs, and the national multi-agency Exercise Pegasus. A draft framework was first tested through Pegasus to expose weaknesses and refine the eventual model. The final Version 01 represents a deliberately matured, evidence-based set of arrangements.

The new Pandemic Response Arrangements provide a clear organisational framework describing PHW's roles, responsibilities, activation thresholds, command and control structures, operational Cells, and recovery processes. The structure is aligned with PHW's Emergency Response Plan and wider multi-agency systems.

Learning from Pegasus and PHW's comprehensive internal COVID-19 Lookback activities (including staff surveys, workshops and debriefs) directly informed improvements. This process revealed issues around decision making, communication routes, data integration, digital tools, workforce sustainability, and organisational culture, all of which are addressed in the updated arrangements.

Version 01 significantly strengthens command and coordination through clearer relationships between the Strategic Response Group, Tactical Response Group and specialist operational Cells. The Incident Coordination Centre has been enhanced with robust tasking, decision logging and a defined Single Point of Contact.

Workforce readiness has been modernised through clear surge roles, safe staffing thresholds, mobilisation processes and rest-and-rotation principles. Situational reporting has been integrated across operational, epidemiological and surveillance functions to support consistent, high-quality decision making. Digital requirements for case management, dashboards, decision logging and data integration are now explicitly defined.

Overall, Version 01 represents a substantial improvement in PHW's pandemic readiness. It embeds organisational learning, strengthens resilience, modernises systems, and provides a coherent, operationally credible model for preparing for, responding to and recovering from future public health emergencies.

27. What are the major risks in terms of your organisation's resilience / capabilities to be able to respond to a new pandemic?

In 2025, the major risks were identified as.

- Retention of corporate memory (as staff move and/or retire) on systems and process utilised in response to the COVID-19 pandemic.
- Pace of improvement in digital infrastructure, data quality & governance processes preventing robust monitoring / analysis / modelling / epidemiology etc.
- Maintenance of key skills for staff mobilised to support critical functions across the organisation in the COVID-19 Pandemic.
- Risk that the next pandemic requires a completely different response from the organisation, requiring only a very limited reach-back to the skill sets, systems and processes adopted for COVID-19.

Public Health Wales sought to address these risks via its Pandemic Preparedness Task & Finish Group, the Public Health Wales Pandemic Response Arrangements and an internal Pandemic Preparedness Assessment. Work to finalise the preparedness assessment will continue throughout 2026/27.

28. Following the preparedness activity colleagues across NHS Wales undertook during 2024, please describe the organisation's (Continued) priorities in relation to HCID preparedness.

As reported in 2025…

Public Health Wales was a key contributor in relation to the preparedness activities for HCID. In particular - the organisation established and jointly chaired the Wales High Consequence Infection Disease Preparedness Group (MPOX) with the NHS Executive in September 2024.

Its purpose was to provide a strategic national forum to support the development of a consistent, resilient and coordinated level of planning and preparedness across NHS Wales in preparedness for confirmed Mpox clade 01case(s) in Wales.

In jointly leading, coordinating and support the delivery of activities such as the development of MPOX pathway action cards, public information posters and IPC advice and guidance for the system in Wales.

Upon agreement to stand the group down in March 2025 in line with the national derogation of MPOX as a HCID; Public Health Wales committed working with the NHS P&I and wider system to.

- *Update MPOX IPC advice to reflect the changes in its classification.*
- *Review the MPOX pathway action cards with a view to amendment for use as a more generic HCID pathway action card.*
- *Completing work being undertaken by the HCID task and finish group for HCID (separately commissioned by Welsh Government).*

CBRN

29. Do your business continuity arrangements include plans to respond to a chemical, biological or radiological incident?

Yes. Public Health Wales maintains comprehensive arrangements to respond to chemical, biological, radiological, and nuclear (CBRN) incidents.

Public Health Wales holds detailed responsibility for activating Chemical, Biological, Radiological and Nuclear Countermeasures as set out within the Welsh Government's *Guidance on Access to UK Reserve Stock for Major Incidents*.

In line with this responsibility, Public Health Wales maintains a **Countermeasures Protocol for Activation**, which has recently been updated alongside revisions to the *NHS Wales Emergency Planning Guidance: Guidance on Access to UK Reserve Stock for Major Incidents*.

Public Health Wales has been fully engaged in the recent NHS P&I - led review and update of this national guidance.

The purpose of the PHW Countermeasures Protocol is to clearly describe the authorisation process for accessing the UK stockpile of countermeasures. It details only those countermeasures for which Public Health Wales is responsible and outlines the arrangements for deployment in the event of a deliberate or accidental chemical, biological, radiological, or nuclear release.

30. Please describe the actions undertaken over the previous 12 months to ensure the organisation can respond to a CBRN incident.

Over the past 12 months, Public Health Wales has undertaken several key actions to ensure the organisation remains prepared to respond effectively to a CBRN incident:

Contributed to national guidance updates:

- Throughout 2025/26, Public Health Wales (PHW) actively participated in work led by NHS P&I to review and update the *NHS Wales Emergency Planning Guidance: Guidance on Access to UK Reserve Stock for Major Incidents*. This ensured that PHW remains aligned with UK-wide arrangements for accessing critical countermeasures during CBRN and other major incidents.

Maintained strategic engagement in national countermeasures planning:

- PHW continued to play a central role in the *Wales Countermeasures Oversight Board*, which provides assurance to Welsh Ministers and senior officials that Wales' countermeasures planning is robust, up to date, and capable of supporting an effective response to emergencies requiring the deployment of national stockpiles.

Strengthened chemical incident response procedures across Health Boards:

- Following PHW-led updates to the *NHS Wales Chemical Decontamination Guidance for Health Boards (V.2)*—a joint effort between the EPRR and Environmental Public Health teams in 2024/25—the revised guidance was re-circulated to Health Boards in early 2026. This re-issue was used to prompt a review and validation ('check') of local procedures for managing chemically contaminated patients, helping ensure frontline preparedness.

31. What are the key risks / vulnerabilities for your organisation and how are you addressing these?

A key organisational risk relates to ensuring that Consultants in Communicable Disease Control, Consultants in Health Protection, Consultant Epidemiologists, and the National Director of Health Protection and Screening Services/Executive Medical Director remain fully briefed on the document and clearly understand both their individual responsibilities and those of Public Health Wales in responding.

To address this, Public Health Wales continues to manage the risk proactively through joint work between the EPRR and Environmental Public Health teams. This includes embedding the requirements into routine consultant engagement, training, and professional development. The Health Protection Training & Guidance Team ensures that expectations and responsibilities remain an integral and regularly reinforced part of training, awareness sessions, and ongoing guidance.

Training and Exercise

32. Does your organisation have robust arrangements for reviewing emergency plans that take account of lessons from incidents and exercises (including following the process set out in the NHS Wales Lessons Identified Register)?

YES ☒ **NO** ☐

Please describe these below and provide a copy of your lessons identified register if one is held locally.

Public Health Wales has robust arrangements in place for the systematic review of emergency plans, ensuring that learning from incidents and exercises is fully incorporated, including alignment with the NHS Wales Lessons Identified Register process.

The Emergency Preparedness, Resilience and Response (EPRR) function leads the organisation's day-to-day resilience activity. This includes maintaining core Public Health Wales emergency plans and procedures and delivering training for key response roles. These activities are designed to ensure that learning from real incidents, exercises, debriefs and assurance processes is regularly captured, reviewed and used to strengthen organisational preparedness.

A key mechanism for this is the long-established EPRR Group. This is a cross-organisational group chaired by Professor Fu-Meng Khaw, National Director HPSS and Executive Medical Director. The Group oversees an agreed annual action plan covering planning, training and exercising, with a specific focus on addressing identified risks and lessons learned.

The EPRR Group provides structured assurance on progress and learning through established reporting routes: HPSS DMT → BET → QSIC → Board.

33. Please provide the dates during 2025/26 when your organisation tested its Major Incident / Emergency Plan, through:

a. Carrying out a communications/activation test every six months. Please provide details below

	Details Of Communications/Activation Test Undertaken
04.04.25	**Gwent Police –** Test all contact details – SCG Activation
23.04.25	**Multi Vehicle RTC, Denbighshire:** 'Live' Incident Response
30.04.25	**NRW:** Testing Flood Advisory Service Telecon – In Hours
11.06.25	**Suspicious Device, Llanelli:** 'Live' Incident Response
17.06.25	**WAST Major Incident Notification:** Major Incident Test
19.06.25	**Fire, Conwy Tunnel:** 'Live' Incident Response
16.07.25	**Gwent Police –** Gov.notify test
28.07.25	**Fire, Ferndale:** 'Live' Incident Response
29.07.25	**Clinical Capacity Group –** Via team's link
09.08.25	**Multi Vehicle RTC, A55, NW:** 'Live' Incident Response
16.08.25	**WAST Major Incident Notification:** Major Incident Test
30.08.25	**NRW:** Testing Flood Advisory Service Telecon – OOH
20.10.25	**A55 Conwy tunnel closure:** 'Live' Incident Response
30.10.25	**Gwent Police –** Activation arrangements
05.11.25	**Flooding, Whitland:** 'Live' Incident Response
26.11.25	**WAST Major Incident Notification:** Major Incident Test
29.01.26	**A55 RTC (Closure):** 'Live' Incident Response

	Details Of Communications/Activation Test Undertaken
03.02.26	**Gwent Police –** Test all contact details – SCG Activation
16.02.26	**Suspicious Items, Abergwynfi:** 'Live' Incident Response
19.03.26	**Wales Environment Group (WEG)**
Weekly	**PHW Alert System Test:** Conduct internal EPRR system test every Monday morning, checking pagers, email and text notification (Started 18.03.24)
Summary	**A total of 117 'Live' incident notifications were received in 2025/26, categorised as follows.** • Fire (43), Carbon Monoxide (19), Severe Weather (15), Civil Disorder (30), Gas Leak (2), HCID (2), Vehicle Accident (4), DCWW/Water Leak (4), Train Derailment (1), Civil Disorder (3), Holyhead Port (3), Misc. (19)

b. Carrying out a tabletop training exercise within the last year. Please provide details below

Dates	Details Of Tabletop Training Exercise
09.04.25	**Exercise Solaris (Gwent LRF)**: Multi-agency pandemic exercise for pandemic response arrangements and plans at LRF level in preparation for Exercise Pegasus.
30.04.25	**Exercise Solaris**: Multi-agency pandemic exercise for pandemic response arrangements and plans at LRF level in preparation for Exercise Pegasus.
08.05.25	**DPLRF:** Annual Digital Infrastructure Group tabletop exercise.
22.05.25	**Exercise Ventus: MAHP.** The aim is to test and validate South Wales Resilience Team Major Accident Hazard Pipeline Plan.
28.05.25	**Exercise Pwll Ddu: COMAH (VPOT)** aim is to test the Valero Pembrokeshire Oil Terminal (VPOT) Emergency Response arrangements
06.06.25	**Exercise Flow**:
23.06.25	**Exercise Eris: Internal Health Protection Directorate** Exploring the response to and recovery from a significant digital disruption affecting the Health Protection Directorate.
23.06.25	**Exercise Eris: Internal Policy & International Health Directorate** Exploring the response to and recovery from a significant digital disruption affecting the Policy & International Health Directorate.
13.08.25	**DCWW Exercise: Water Outage** To provide the opportunity for delegates from responding agencies to take part in a tactical coordination group and associated subgroup cells taking learning from the recent Bryn Cowlyd Water Outage Incident in January 2025. Delegates will need to consider their roles and responsibilities at a tactical level
17.09.25	**Exercise Beagle: COMAH** aim of validating the Emergency Plan (COMAH) for Impala Terminal, Milford Haven
15.09.25-23.09.25	**Exercise Pegasus (Phase 01, Containment)**: The UK's largest pandemic preparedness simulation in nearly a decade, led by DHSC with support from UKHSA

Dates	Details Of Tabletop Training Exercise
	and direction from the National Security Council (Resilience). It modelled a novel infectious disease outbreak to test the nation's strategic and operational response capabilities.
06.10.25-14.10.25	**Exercise Pegasus (Phase 2, Emergence):** The UK's largest pandemic preparedness simulation in nearly a decade, led by DHSC with support from UKHSA and direction from the National Security Council (Resilience). It modelled a novel infectious disease outbreak to test the nation's strategic and operational response capabilities.
27.10.25-04.1125	**Exercise Pegasus (Phase 3, Mitigation):** The UK's largest pandemic preparedness simulation in nearly a decade, led by DHSC with support from UKHSA and direction from the National Security Council (Resilience). It modelled a novel infectious disease outbreak to test the nation's strategic and operational response capabilities.
18.11.25	**Exercise Bite Back:** Multi-agency exercise event. The aim of the exercise was to explore Wales's readiness to respond to the public health risks associated with invasive mosquitos.
26.11.25	**Exercise Contain: COMAH** aim of validating the WCBC External Emergency Plan (COMAH) for Kronospan in Chirk.
02.12.25	**Mass Rescue Maritime, NW:** This exercise will walk through a Mass Rescue Maritime Incident in North Wales and test the newly completed Maritime Incident Response Framework
11.12.25	**Exercise Stikstof: COMAH.** Multi-agency exercise to test the external (off-site) Multi-agency Response Plan for BOC Gases Margam and to test multi-agency interoperability
29.01.26	**Exercise Rosa: COMAH** purpose is to validate the Draft Barry Chemical Complex Off-site Emergency Plan and will test how the local off-site agencies respond to the incident as well as the site operators.
05.03.26	**Exercise Anadl:** The aim of the exercise was to strengthen Public Health Wales' organisational readiness by showcasing the Public Health Wales Pandemic Response Arrangements and the Emergency Response Plan.
26.03.26	**Exercise Pendleton Spirit:** To understand the tactical considerations required in response to a Large Passenger Vessel Accident (LPVA) occurring at sea.

c. Carrying out a major live or simulated exercise within the last three years. Please provide details below

Dates	Details Of Major, Live Or Simulated Exercises Undertaken
28-30.02.23	**Exercise Mighty Oak:** Exercise Mighty Oak was a Tier 1, national exercise exploring the impacts, response and recovery from a national power outage (NPO) in Great Britain. The aim of the exercise was to support the development of the national response and recovery to an NPO.
10-11.07.23	**Exercise Doll House:** Multi-agency event involving a 'live' national Police Counter Terrorism Exercise largely run in the Gwent LRF area (scene was at a venue in

Dates	Details Of Major, Live Or Simulated Exercises Undertaken
	Newport), that Gwent LRF tested and exercised the Gwent LRF SCG arrangements as part of the event.
21.09.23	**Exercise Astral Bend:** Exercise Astral Bend was a Ministry of Defence-led Level 1 Nuclear Emergency Organisation (NEO) multi-agency exercise assessing MOD operational activity and focuses on the interface between the RAF Brize Norton Immediate Response Force and the Civilian Emergency Services at scene. Gwent LRF tested and exercised the Gwent LRF SCG arrangements as part of the event.
29.11.23	**Exercise Pen Y Darren:** Exercise Pen-y-Darren was a hybrid table-top NHS Wales exercise based on a derailment of a passenger train into a static caravan park that took place on the 17th of October 2023. The aim of the exercise was to test the response to a Mass Casualty Incident using the Mass Casualty Incident Arrangements for NHS Wales.
06.11.24	**Exercise Keep Safe:** A Monmouthshire County Council (& delivery partners) exercise testing survivor reception centre processes at Caldicot Leisure Centre.
24.11.24	**Exercise VIPER 'Live':** Multi-agency exercise event. The aim was to test the response to an incident in the A55 Tunnels (North Wales) involving hazardous substances.
2020 - 2024	**MERIT Training:** The PHW EPRR team are core faculty members supporting the delivery of MERIT training in Wales supporting 5no. 'passport' courses 2022-23. The team also facilitated volunteer casualty coordination to MERIT recertification 6no. exercises at St Athan, Vale of Glamorgan in 2022.
04.02.25	**Exercise Tendley:** Dyfed Powys LRF areas multi-agency 'live' exercise involving a train crash. The aim of the exercise was to ensure, that the emergency services are aware of each other's specialist capabilities to address recommendation 51 of the Manchester Arena Inquiry.
24.03.25	**Exercise Grey Metal:** A Cardiff Council (& delivery partners) exercise to validate Cardiff Council Rest Centre Guidance Document and the Fairwater Leisure Centre Rest Centre Plan.
08.10.25	**Operation Tendley 2:** South Wales LRF area multi-agency 'live' exercise involving a road traffic collision.

34. Has your organisation had to initiate your major incident / emergency plan between April 2025 to March 2026?

YES ☒ **NO** ☐

a. If YES, what was the nature of the incident?

23.04.25	**Multi Vehicle RTC, Denbighshire:** 'Live' Incident Response Public Health Wales (PHW) was notified by the Welsh Ambulance Service (WAST) of a Major Incident Standby following a multi-vehicle road traffic collision on the A451 near Bodfari, Denbighshire, involving a car fire and multiple casualties. The PHW EPRR Duty Officer disseminated details after liaising with senior PHW leaders, confirming multi-agency attendance by WAST, North Wales Police, North Wales Fire

	and Rescue Service and EMRTS. The incident was quickly stabilised, with WAST standing down the Major Incident status within 40 minutes. Casualty updates confirmed seven patients triaged as four P1, two P2 and one P3, and no public-health issues requiring PHW intervention were identified.
11.06.25	**Suspicious Device, Llanelli:** 'Live' Incident Response During this incident, a Major Incident was declared following the discovery of a viable improvised explosive device at a residential property in Llanelli. Police, ambulance and specialist Explosive Ordnance Disposal teams attended, confirming the device was live and later made safe, with additional hazardous materials also removed. Public Health Wales EPRR coordinated closely with the Executive On-Call and UKHSA Chemical On-Call to ensure appropriate public health oversight, delivering joint briefings to Health Protection, Communications and senior leadership. A cordon was established and nearby residents were evacuated to a rest centre until the area was confirmed safe for return. Emergency services remained on standby until all risks were mitigated, after which the incident was formally stood down, with Dyfed-Powys Police maintaining a presence to continue their investigation.
19.06.25	**Fire, Conwy Tunnel:** 'Live' Incident Response A notification was received at 14:59 regarding an ongoing vehicle fire within the Conwy Tunnel, with limited initial detail due to difficulties establishing contact with North Wales Fire and Rescue Service and the Environmental Duty Desk. Public Health Wales' EPRR Duty Officer escalated internally, consulted with senior colleagues, and coordinated with the Environmental Public Health team while preparing to attend the scheduled Tactical Coordinating Group. Given the constrained information available and following discussion with the Strategic Response Director, Public Health Wales subsequently withdrew from both the TCG and SCG structures, while remaining on standby to re-engage should the situation escalate or require public health input.
28.07.25	**Fire, Ferndale:** 'Live' Incident Response Public Health Wales was notified at 03:06 by South Wales Police of a suspected arson incident involving a terraced property in Ferndale. PHW provided representation at SCG meetings at 03:30 and 06:00 alongside multi-agency partners. A Major Incident was declared by SWP at 01:48 and later stood down once the fire was fully extinguished. Significant fire damage occurred to one property, with further damage to neighbouring homes. 15 properties were evacuated, and a rest centre was opened to support displaced residents. Three individuals were treated on scene for smoke inhalation and two firefighters sustained minor injuries; no hospital admissions occurred. SWP detained four individuals in connection with the incident. A Strategic Assessment and Management Meeting was scheduled to support ongoing recovery planning.
09.08.25	**Multi Vehicle RTC, A55, NW:** 'Live' Incident Response A major incident was declared on the westbound A55 near Holywell following a multi-vehicle RTC in which an HGV crossed the central reservation, resulting in four casualties—two conveyed to Stoke Hospital (one by air), and two to Glan Clwyd, including the HGV driver, who was later arrested for dangerous driving. Multi-agency response involved North Wales Police, NWFRS, WAST, the Trunk Road Agency, Traffic Wales, Flintshire County Council, DCWW and BCUHB. No hazardous materials risks were identified, although approximately 36 metres of central reservation and lighting were damaged, requiring temporary traffic management and repairs. Traffic management and recovery operations were coordinated jointly, with agencies issuing public communications to avoid the area. Healthcare impacts were managed within BAU, and no wider system pressures were reported. The road partially reopened overnight, full repair works commenced the following day, and the TCG formally stood down at 08:30 on 10.08.25.

20.10.25	**A55 Conwy tunnel closure:** 'Live' Incident Response On 24 March 2026, Public Health Wales EPRR was alerted by North Wales Police to a major incident following a full system failure within the A55 Conwy Tunnel, resulting in its closure in both directions. A TCG confirmed significant operational impacts, including unsafe tunnel conditions due to loss of communication systems, substantial traffic disruption, and risks to emergency service access. Diversion route works were halted, a traffic management group was convened, and multi-agency communications were coordinated by NMWTRA. The closure caused service disruption, including cancellations of DESW screening in Colwyn Bay and WAAASP clinics. An SCG and subsequent TCGs were held, and WAST declared—then later stood down—a critical incident. By late afternoon, the PEAT confirmed the Police had stood down the major incident and the tunnel had reopened, though evening repair works were planned with contingency arrangements in place should issues reoccur.
05.11.25	**Flooding, Whitland:** 'Live' Incident Response In November 2025, Public Health Wales (PHW) EPRR supported the multi-agency response to a Major Incident declared in Whitland/St Clears following severe overnight flooding that impacted approximately 50 properties and required the evacuation of 44 residents, many with complex needs. The PHW EPRR Duty Officer attended Strategic and Tactical Coordinating Groups to obtain public-health clarity and briefed the On-Call Consultant in Communicable Disease Control. Multi-agency partners, including Mid and West Wales Fire and Rescue Service, Carmarthenshire County Council, Hywel Dda University Health Board and Dyfed-Powys Police, coordinated rescue, welfare, medication access and rest-centre support while river levels stabilised. As the incident transitioned from emergency response to social-care-led recovery, and in agreement with senior PHW colleagues, PHW formally withdrew from the TCG with the assurance that it would re-engage if the situation changed.
29.01.26	**A55 RTC (Closure):** 'Live' Incident Response Public Health Wales (PHW) engaged with multi-agency partners following a Major Incident declared by North Wales Police in response to a serious road traffic collision on the A55 near Conwy. The PHW EPRR Duty Officer attended the Tactical Coordination Group (TCG) to assess public health implications, including potential indirect impacts on urgent care access and wider health-system pressures, noting that no immediate public health actions were required. After confirmatory discussion with PHW's AWARe Consultant and Strategic Response Directors, PHW withdrew from ongoing TCG participation while remaining on standby to re-engage should the situation escalate or a requirement for public health advice arise.
16.02.26	**Suspicious Items, Abergwynfi:** 'Live' Incident Response Public Health Wales (PHW) supported the multi-agency response to a Major Incident declared by South Wales Police following the discovery of weapons, suspected explosive materials and hazardous items at a residential property in Abergwynfi. Approximately 40–80 residents were evacuated within a 100-metre cordon, and a rest centre was established to support those displaced. The PHW EPRR Duty Officer monitored public health risks and wider system impacts while strategic partners assessed threats related to potential explosion, infrastructure damage and responder safety, with BRAG ratings remaining Amber for police and Green for other agencies. By 15:00 the situation had been safely resolved, the Tactical Coordination Group was stood down, and South Wales Police lifted the Major Incident declaration.

b. Were post-event reports produced for these incidents? YES ☒ NO ☐

c. If post incidents reports were produced, have these been shared with the health emergency planning network and any lessons identified uploaded on the Wales NHS Lessons Identified Register?

As per point c, both actions will take place once the reports have been formally approved via PHW governance process.

At PHW, recommendations are recorded on the PHW EPRR Lessons Identified Register. These are monitored by the PHW EPRR Team and progress reported through the EPRR Group.

Identified learning which is outside of the remit of Public Health Wales or has wider impact on NHS Wales is shared with partners through the agreed Governance arrangements of the NHS Wales Lessons identified database or shared with the wider Wales civil contingencies network.

NB. As reported in previous years, the NHS Wales Lessons Identified Register was created by Daniel Rixon, EPRR Manager at PHW, and adopts the PHW process for identification and monitoring. Dan is also now Chair of the All-Wales (Civil Contingencies) Lessons Management group as a direct result of the 'best practice' work demonstrated in this discipline.

35. Have you undertaken an assessment of staff training needs in relation to your Major Incident /Emergency Plan?

YES ☒ **NO** ☐

Please provide further information

Yes. Based upon the analysis undertaken, Public Health Wales have issued an EPRR Learning and Development Prospectus which lists.

- The internal and external training opportunities available from a strategic, tactical and operational context across a range of subject areas. The current version maps training for 2026/27.
- The training requirements of staff to undertake identified roles detailed in the PHW Emergency Response Plan (V4.0). All roles are mapped against the National Occupational Standards for Civil Contingencies.

The EPRR Team also work directly with Directorates to offer bespoke training packages for teams aimed at improving preparedness in key areas such as Health Protection, Communication, Estates, Environmental Public Health, Prisons and Substance Misuse.

36. Do you have a staff training programme to support your Major Incident/Emergency Plan?

YES ☒ NO ☐

If YES, please provide further details e.g., number of staff trained in strategic, tactical & operational roles etc;

EPRR figures reference related to training undertaken within the past 3yrs (1st April 2023 – 31st March 2026):

Role	Internal	External	2023	2024	2025	2026	Total
Wales Gold		✓	18		16	9	**43**
Strategic*	✓		7			5	**12**
Wales Silver		✓	4	1	7	1	**13**
Tactical*	✓		12		1	1	**14**
Operational*	✓		22		2		**24**
Loggist*	✓		10	07	15	12	**44**
Watchkeeper*	✓		8		13	3	**24**
Business Continuity*	✓			24	1	45	**70**
Introduction to Emergencies (in person)	✓						**0**
Introduction to Emergencies (online)	✓		59				**59**
EPRR Response Awareness	✓		123				**123**
Wales Mass Casualty Arrangements Awareness		✓				350	**350**
							776

*Internally delivered and specifically aligned to PHW Emergency Response Plan (mapped against the National Occupational Standards for Civil Contingencies and business continuity processes.

37. Please provide details of any training and exercise undertaken during 2025/26 to embed the Charter for Bereaved Families within your organisation.

During 2025/26, Public Health Wales continued to embed the principles of the Charter for Bereaved Families across its preparedness, response, and recovery activities.

Building on the organisation's formal adoption of the Charter in December 2024 and collective signing in March 2025, several practical steps have been taken to ensure the Charter's ethos is reflected in operational practice, staff training, and multi-agency exercising.

Integration of the Charter into Real-World Incident Response (2025/26)

The organisational response to the recent Sexual Health continuity incident provided a timely opportunity to test and apply the Charter's principles in practice. During this event, PHW is emphasising:

- Timely, compassionate, and transparent communication, ensuring individuals potentially affected were provided with clear information pathways and support.
- Consideration of psychological impact and the need for sensitivity in how messages were crafted, reflecting the Charter's expectations around dignity, respect, and openness.
- Cross-organisational learning processes that will actively capture the views and experiences of those indirectly affected, reinforcing our duty to place people at the centre of our response.

These considerations will subsequently inform internal debriefs and future continuity planning approaches.

Embedding within Training and Exercising (2025/26)

The Charter has been explicitly incorporated into training and exercising delivered through PHW's Emergency Preparedness and Response (EPRR) programme.

Key activity during the year included:

- Exercise PEGASUS (2025) – a major multi-agency exercise designed around a high-impact public health scenario.
- EPRR training sessions and staff development have been updated to reference the Charter explicitly—particularly modules on incident coordination, risk communication, and consequence management. This ensures PHW staff are familiar with their obligations during complex and sensitive events.

Embedding in Governance, Plans, and Pandemic Frameworks

Throughout 2025/26, PHW continued aligning the Charter's expectations with corporate emergency planning arrangements:

- The Public Health Wales Emergency Response Plan (ERP) v4.0 includes explicit references to the Charter as a core principle guiding communication and ethical decision-making (as noted last year).
- The Public Health Wales Pandemic Response Arrangements also incorporate Charter-aligned principles such as:
    - A commitment to clear, honest, and accessible public messaging, even amid uncertainty.
    - Recognition of the unique needs of bereaved families following large-scale loss or public health emergencies.
    - Processes to ensure post-incident reviews are transparent and designed to support families seeking answers.

These mechanisms ensure the Charter is not treated as a stand-alone commitment but is integrated into PHW's wider preparedness ecosystem.

Continued Pan-Wales Collaboration

PHW has remained engaged with national partners—through Local Resilience Forums, NHS Wales EPRR networks, and the Welsh Government—to promote consistent understanding and application of

the Charter across Wales. This includes sharing learning from PHW incidents and exercises, ensuring alignment and mutual reinforcement across the public sector.

Communication

38. Have relevant NHS organisations and partner agencies been consulted about any role they may have in your Major Incident/Emergency Plan?

YES ☒ **NO** ☐

Please provide details.

In the last 12months, relevant NHS organisations and partner agencies been consulted as follows:

Public Health Wales Response Plan (V4.0)

In January 2026, the Emergency Preparedness, Resilience and Response (EPRR) Team completed a comprehensive review of the Public Health Wales Response Plan to ensure continued compliance with statutory duties under the Civil Contingencies Act 2004 (CCA). The review confirmed that the plan remains fit for purpose and aligned with PHW's responsibilities.

Although the document does not directly require support from external agencies, effective response relies on significant interdependencies across the wider system. To inform the review, PHW drew upon the experience and insight of partners across Wales and the UK, gathering feedback from a broad range of stakeholders including emergency services, local government, university health boards, Welsh Government, the Public Health Agency Northern Ireland, the UK Health Security Agency, and Public Health Scotland.

Public Health Wales Pandemic Response Arrangements (V1.0)

Throughout the development of the Public Health Wales Pandemic Response Arrangements, PHW engaged proactively with key partners—such as other UK Public Health Agencies and Welsh Government—to clarify roles, responsibilities, and interfaces across the wider NHS and the broader public health system. This early engagement has supported alignment with national expectations and ensured that the emerging arrangements can integrate effectively with existing multi-agency structures.

PHW recognises that further engagement is required to fully embed the arrangements across the wider NHS in Wales and with Local Resilience Forum (LRF) partners. This broader programme of engagement is planned for 2027 and will ensure that all relevant organisations understand their respective roles and that the arrangements are fully integrated within Wales' wider emergency preparedness framework.

Assurance

39. Are you satisfied your organisation is fulfilling the principles required by the Civil Contingencies Act 2004 as described below?

	YES	NO	Please provide any further relevant information to support your answer
1) Assess risks to inform your contingency arrangements	x		
2) Put in place Emergency Plans	x		
3) Put in place Business Continuity Management arrangements	x		
4) Share information with other organisations to enhance co-ordination and efficiency	x		
5) Cooperate with other organisations to enhance co-ordination and efficiency	x		
6) Have appropriate arrangement to warn, inform and advise the public/others, including in an emergency	x		
7) Do you have an EPRR lessons identified and lessons learned procedure within your organisation that feeds into EPAG?	x		

Priorities

40. What are your priorities for 2026/27 to strengthen your organisation's emergency planning, resilience and preparedness arrangements?

1. Pandemic Preparedness and Response Arrangements

Public Health Wales (PHW) will continue to strengthen pandemic readiness by embedding and maturing the new **Pandemic Response Arrangements (Version 01)**.

Key areas of focus for 2026/27 include:

- Incorporating lessons identified from **Phase 4 of Exercise Pegasus**.
- Reviewing the **national debrief report** on Exercise Pegasus (expected winter 2026/27).
- Responding to the publication of **national pandemic principles, frameworks and other best-practice guidance**, including relevant recommendations emerging from the UK COVID-19 Inquiry.

2. Strengthening Business Continuity Management

A key organisational priority for 2026/27 is the continued strengthening and full implementation of **Business Continuity Plans (BCPs)** across all PHW directorates.

This includes:

- Ensuring BCPs are current, operationally credible and able to respond to a wide range of disruption scenarios.
- Increasing organisational resilience through regular exercising, assurance reviews and embedding BCP ownership within directorate and local management structures.
- Protecting critical PHW services during periods of high operational pressure, service disruption or major emergencies.

3. Wales HMP Outbreak Exercise

PHW will work with the Disease Inclusion Health Programme and multi-agency partners to design and deliver the **Wales HMP Outbreak Exercise**.

This work will:

- Test outbreak control procedures within the prison estate—an environment characterised by operational complexity and vulnerability.
- Strengthen system-wide capability for managing outbreaks in high-risk settings.
- Improve interoperability between PHW, HMPPS, local health boards and wider partners.

4. Health Inequalities in EPRR

PHW will conclude the **Health Inequalities in EPRR** project, which assesses how emergency preparedness and response arrangements impact different population groups.

Completion of this project will:

- Provide evidence-based recommendations to ensure EPRR practices actively reduce—rather than unintentionally widen—health inequalities.
- Support the integration of equity considerations across preparedness, response and recovery activities.

5. National CBRN Preparedness (Four Nations Work)

PHW will continue to lead on the delivery of a **Four Nations national CBRN event**, helping to strengthen UK-wide preparedness for high-impact chemical, biological, radiological and nuclear incidents.

Key objectives include:

- Enhancing interoperability and assurance across the four nations.
- Aligning PHW's CBRN capabilities with evolving national expectations.
- Strengthening Wales' preparedness and response posture for rare but severe emergencies.

6. Completion of Exercise Pegasus (Final Phase)

PHW will participate in the final phase of **Exercise Pegasus**, scheduled to conclude in June 2026.

For 2026/27, PHW will:

- Capture and apply the final lessons identified through this UK-wide programme.
- Translate learning into strengthened pandemic preparedness, command and control arrangements, workforce mobilisation processes, surveillance capability and operational coordination.

7. International Collaboration – IANPHI Good Practice Principles

PHW will continue to provide international leadership through the **IANPHI Good Practice Principles** project.

In 2026/27, this will involve:

- Advancing work on integrating health promotion, prevention and equity into emergency preparedness and response systems globally.
- Sharing learning internationally and contributing to the development of global public health preparedness standards.

8. Maintaining Readiness for Emerging Hazards and Threats

PHW will maintain continual readiness to respond to emerging and evolving threats, including infectious diseases, environmental hazards, extreme weather events and high-impact incidents.

Ongoing deliverables include:

- Monitoring national and global risk landscapes.
- Maintaining readiness across on-call, incident coordination and specialist response functions.
- Ensuring PHW can respond rapidly and effectively to protect population health whenever emergencies arise.

Summary

Across 2026/27, PHW's emergency planning, resilience and preparedness work programme focuses on eight strategic pillars:

1. Consolidating pandemic preparedness arrangements
2. Strengthening business continuity management
3. Delivering the Wales HMP outbreak exercise
4. Addressing health inequalities in EPRR
5. Advancing national CBRN preparedness
6. Completing the final phase of Exercise Pegasus
7. Driving international good practice through IANPHI
8. Maintaining readiness for all emerging threats

Together, these priorities represent a maturing EPRR system characterised by strengthened organisational resilience, a focus on equity, enhanced partnership working, improved digital and data capability, and continued national and international leadership.

When submitting the completed report, please include an electronic copy of the following:

- Your current Major Incident /Emergency Plan.
- a copy of your local EPRR risk register where available.
- An organisational chart setting out your organisation's emergency preparedness structure.
- An organisational chart setting out your organisation's emergency response structure.
  and…
- Any additional information you wish to share which demonstrates your organisation's preparedness for the risks described above.

Whilst organisations are not required to submit Board approved reports, please provide confirmation of the date the report will be considered by your Board within your submission.

Completed and signed report forms with any attachments to be returned by 31st July 2026 by email to:

nhspi.eprr@wales.nhs.uk

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