Chief Executive Board Report
September 2026

1 Pippa Britton, Chairperson

Our very own Pippa Britton will be leaving us as Chairperson at the end of October to move on to her next exciting chapter. Pippa has been exceptional as our Chair for the just under two years, and has made a significant impact in that time across the breadth of our work and particularly in her passion for sports, physical activity and public health.

Pippa, we shall miss you and wish you the very best in your next touring-the-world chapter which of course we are all very jealous of and we hope you stay in touch with us in the future.

2 Executive Team and Other Organisational Changes

2.1 Professor Fu-Meng Khaw

I am pleased to announce that Professor Fu-Meng Khaw, our National Director of Health Protection and Screening Services/Executive Medical Director, has been offered the opportunity to undertake a one-year part-time secondment with the International Association of National Public Health Institutes (IANPHI) from the 1 October 2026. IANPHI is a global membership association that collectively builds public health capacity and capabilities by connecting, developing and strengthening national public health institutes worldwide.

During this period, Meng will be working with IANPHI for two and half days a week as a Senior Adviser. Meng is an Honorary Professor in Cardiff University, and for the remaining time, Meng will be working with Cardiff University to accelerate our focus on public health research and academic training and development, with a particular focus on screening and population health research. Once the secondment period is over, Meng will be leaving Public Health Wales and moving on to his next exciting chapter.

This appointment reflects Meng's considerable expertise and standing within the public health community and provides an opportunity to contribute to national and global public health work while strengthening links between organisations across the international public health network, to the benefit of Public Health Wales and Wales more broadly. Meng will still be working closely with us in relation to both roles.

We will all miss you greatly Meng and you have made a significant contribution to the Executive Team and the Board over the last five years and, of course, to protecting the people of Wales. I would like to congratulate Meng on this senior appointment and wish him every success in his new role.

Arrangements are in place to ensure continuity of leadership and support across Meng's areas of responsibility. From the 1 October 2026, Andrew Jones will take on the role of Interim National Director, and will be supported by Tom Fowler as our Deputy National Director, while Dr Eleri Davies will be Interim Medical Director.

Andrew is a public health specialist and senior public health leader with extensive experience across local, regional and national public health systems in Wales. Between 2016 and 2024, he held a series of senior leadership roles within Public Health Wales, including Deputy Director of Public Health Services and Director of Integrated Health Protection, Deputy National Director for Public Health Services, and Interim Executive Director of Public Health Services during the COVID-19 pandemic. He led integrated health protection functions and played a key strategic role in Wales' public health response to COVID-19, working very closely with colleagues in the Welsh Government. Prior to joining Public Health Wales, he served as a Consultant in Public Health, Regional Director of Public Health and Executive Director of Public Health for Betsi Cadwaladr University Health Board. He has also held national leadership positions relating to professional standards, workforce development and public health regulation, including serving as Chair of the UK Public Health Register

Dr Eleri Davies is a Consultant Medical Microbiologist and senior public health leader with significant experience in infection prevention, microbiology and health protection. She has held consultant posts in both England and Wales and has led national programmes to reduce healthcare-associated infections and improve patient safety. Eleri is currently our Deputy Medical Director and Head of the Healthcare Associated Infection, Antimicrobial Resistance and Prescribing (HARP) Programme, providing strategic leadership on infection prevention, antimicrobial resistance and healthcare-associated infections across Wales. During the COVID-19 pandemic, she served as Interim Medical Director for Public Health Wales.

Both are highly experienced leaders who have successfully provided similar interim cover previously. Together, they will provide senior leadership and maintain continuity, pending the conclusion of a substantive recruitment process and I would like to thank them both for undertaking the roles for us.

2.2 Changes to Our Organisational Structure

In July, we announced a number of organisational changes to recognise the growing developments across a range of our services and also to re-balance some executive portfolios. These changes include the following developments.

From the 28 July 2026, Claire Birchall, our current Executive Director of Nursing, Quality and Integrated Governance, assumed the executive leadership responsibility and accountability for our Screening Services on an interim basis until the 1 October.

From the 1 October, our screening division will move out of our current Health Protection and Screening Services Directorate and we will be establishing a new *Population Screening and Quality* Directorate which will enable an even stronger focus on our invaluable screening programmes given the increasing emphasis on transformation, performance and expansion into additional screening programmes

including lung cancer screening. Claire will become the National Director of Population Screening and Quality/Executive Director of Nursing. The new Directorate will bring together screening, clinical governance and quality functions and the National Safeguarding Service.

These changes will also result in our current Health Protection and Infection Services becoming a new Directorate which will enable an added focus on our strategic opportunities across these functions, together with our accelerated work on all-threats preparedness, environmental quality, and the One Health agenda. The name of the new Directorate is be part of an engagement process with the team in advance of the structural change coming into effect on the 1 October.

There will also be some changes to our governance functions to strengthen alignment across the organisation that will also come into effect on the 1 October. The Corporate Governance functions, including risk management and information governance, will move from the Nursing, Quality and Integrated Governance Directorate to the Board Secretary and the Board Business Unit. These changes will help ensure that functions are aligned to the areas where they can provide the greatest organisational value and support.

3 Our Pathogen Genomics Unit and the UK Microbial Forensics Consortium

The UK Microbial Forensics Consortium (UKMFC) forms part of the 2023 UK Biological Security Strategy under the DETECT pillar. It a OneHealth approach comprising frontline biosurvellience laboratories from the clinical, veterinary, plant, food and aquaculture sectors across all four nations of the UK. The objectives of the UKMFC are to harness expertise across all sectors and all UK nations and will:

- continue to develop microbial forensic analysis capability against a spectrum of threats (especially in the new era of synthetic biology)
- be able to attribute the misuse of biological hazards and act as a deterrent to hostile use
- collaborate widely with government laboratories, academia, industry, and our international allies and partners
- develop specialist microbial forensic skills and capacity across the UK to strengthen resilience and ensure capabilities are fit for the future.

The UKMFC identified laboratories with genomics and bioinformatics capabilities and invited them to be part of the UKMFC in 2024, our Pathogen Genomics Unit is one of these laboratories.

In 2024, we signed a service level agreement with the Defence Science and Technology Laboratory (DSTL), whereby we agreed to deliver specific services. One of these services was bioinformatics, with the tasks defined by the Bioinformatics Working Group of which we are a member. This group has been set the task of developing tools for use by the wider UKMFC laboratories to address the identification of engineered biological organisms.

The outstanding contribution made by our colleagues Jamie McMurtrie and Enrique Gonzalez-Tortuero, as part of the Bioinformatics Working Group, was recognised in a thank you letter from Dr Nick Joad, Director Office of the Chief Scientific Adviser (OCSA) DETECT Pillar Lead, UK Biological Security Strategy.

4 Collaborating across Public Health Wales teams to Eliminate Hepatitis C

We are working with health boards and the Welsh Government to eliminate Hepatitis C as a public health problem in Wales by 2030. A number of national actions have been commissioned by the Welsh Government and a programme of multidisciplinary work is being delivered, involving close collaboration by a range of teams across Public Health Wales, including point-of-care testing staff based in Infection Services, epidemiologists in Communicable Disease Surveillance Centre, Engagement staff, the Health Protection Team, Communicable Disease Inclusion Health Programme, Communications and the Behavioural Science Unit. A range of activities are underway including:

➢ Raising awareness of hepatitis C on World Hepatitis Day

World Hepatitis Day, 28 July 2026, provided the opportunity to raise awareness about hepatitis C. ITV News picked up the item with good coverage of a patient story and the promotion of post-and-test for easy access to confidential testing.

Available here: Recovered hepatitis C patient calls for more testing after fears of high re-infection rates - Latest From ITV News

➢ Working with voluntary sector to develop hepatitis C resources for Wales and treat initiatives in the community

Sophie Carter, Programme Manager in the Health Protection Team, Nicki Palmer, Research Nurse in Infection Services, Ishani Sen, Communications Officer, and Sam Humphreys, Communications Manager have been working with the NHS England organisation Hep C u Later to successfully adapt and deliver hepatitis C resources for Wales. These are available in English and Welsh.

➢ Test and treat initiatives in the community

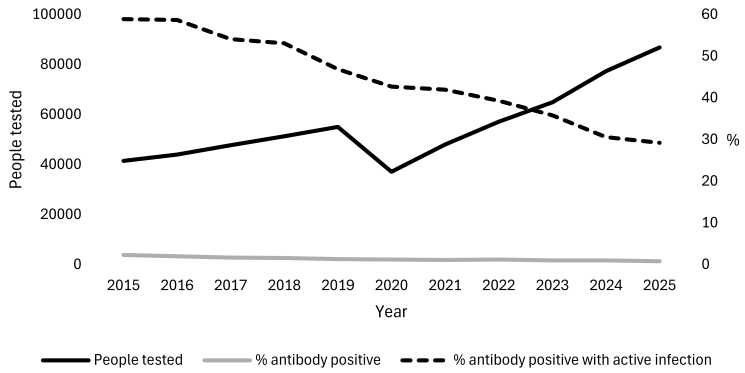
Control of hepatitis C focusses on case finding and treatment with highly effective antivirals. The point-of-care testing team in Infection Services, led by Louise Davies, are working tirelessly to carry out high intensity hepatitis C testing and treatment amongst vulnerable populations in Wales. Settings have included substance misuse services, homeless shelters, prison and probation services. A recent initiative has been to increase testing in people with family links to high prevalence countries. Settings have included a Multi ethnic community (MEC) health Fair at Cardiff City Stadium, an Asian cash-and-carry in South Cardiff and Cardiff Mela, South Asian culture and music festival. Evaluation of these testing events has shown that the team is well accepted, and uptake of testing was high.

➢ Using surveillance data to demonstrate progress

The communicable Disease Surveillance Centre released the latest annual surveillance report on World Hepatitis Day, see: [Trends-in-the-prevention-diagnosis-and-treatment-of-hepatitis-B-and-hepatitis-C-in-Wales-Annual-surveillance-report-2026-Data-to-end-of-2025.pdf]

Data presented indicate that progress towards elimination is being made: testing is up, proportion of people testing positive for antibody is down and critically the proportion of people with antibodies who have active infection (PCR positive) has reduced dramatically (see figure) since 2015.

Figure. People tested for hepatitis C, proportion antibody positive and proportion with active infection; Wales, 2015 to 2025.



Our bloodborne virus, health protection, health inequalities and Communicable Disease Surveillance Centre teams are working closely with the UK Health Security Agency and other UK agencies to draft a dossier providing evidence to the World Health Organization that the UK is on the path to elimination.

5 Why Gender Matters - Child Poverty and Health Inequalities

We have recently published a suite of resources which strengthen the understanding of how gender equity influences health and health inequalities in Wales.

This includes the publication of Why Gender Matters: Child Poverty and Health Inequalities, developed in collaboration with Liverpool John Moores University, which reviews the evidence on the relationship between gender equity, child poverty and health outcomes. The work highlights the ways in which gender and socioeconomic circumstances interact to influence health across the life course, and the importance of considering these factors together when developing policy and interventions.
This work is complemented by a new infographic illustrating the relationship between gender equity, child poverty and health, alongside a spotlight feature on gender equity and health. The spotlight considers how gender inequity influences women's health and explores the value of integrating gender-informed, intersectional and population health approaches into strategic planning. It highlights the considerable health inequalities experienced across Wales, including the approximately 20-year difference in years spent in good health between women living in the most and least

deprived areas. The infographic provides a visual way of demonstrating how gender and intersectionality operate across different levels, from impacts on individual lives and health through to wider systemic factors.

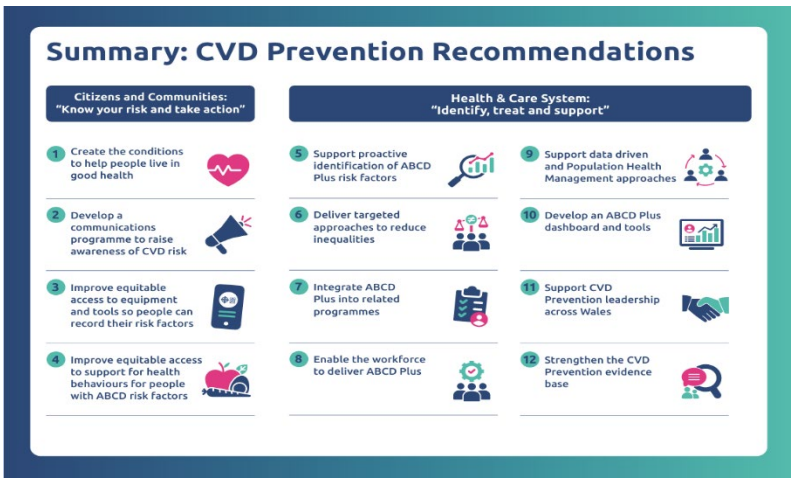
Taken together, this work provides an evidence base for healthcare and public health leaders to consider gender equity as a core component of population health improvement. It reinforces the need to look beyond healthcare provision alone and address the social, economic and structural conditions that shape health outcomes. For leaders, this means strengthening the use of evidence on gender, poverty and intersectionality within strategic planning, prevention and service development, with the aim of addressing inequalities earlier and tackling their underlying causes rather than responding only to their consequences.

6 Cardiovascular Disease Prevention Plan: An ABCD Plus Approach – Recommendation for Wales

We have published 12 recommendations to help reduce cardiovascular disease in Wales: Cardiovascular Disease (CVD) Prevention Plan: An ABCD Plus Approach - Recommendations for Wales - building on last year's Cardiovascular Disease Prevention Plan for Wales: An ABCD Plus approach. The recommendations, which were developed with key stakeholders involved in CVD prevention, aim to guide the key priorities for actions and their implementation, and help partners to embed CVD prevention into planning and delivery across the health and care system.

The recommendations focus on Citizens, Communities and Care, which recognises that progress will be greatest when people have the knowledge, tools and support to understand and act on their cardiovascular risk, and communities and health and care services are supported to work together to deliver equitable, person-centred CVD prevention across Wales.

The recommendations also recognise that CVD prevention and inequalities in CVD outcomes are complex and therefore need coordinated action at all levels - national, regional and local - to enable healthier environments for people to live in, and to improve awareness, identification and management of "ABCD Plus" risk factors. A summary of these recommendations are demonstrated below.



7 Knowledge Exchange Visit to Public Health Wales by Trauma-Informed Zambia

On the 11 September, we welcomed a delegation from Zambia to Public Health Wales to share insight and learning from the development of the Trauma-Informed Wales Framework and national approach to preventing and mitigating the impacts of Trauma and Adversity in Wales. The team comprised of three inspiring leaders who have come together to start an initiative to build safer communities through Trauma-informed approaches and community engagement. Collectively Alex Citombo, Chief Superintendent Danny Mwala and Larry Mooke bring together expertise from education and youth work, with policing and public health with a shared aim to improve lives in Zambia through compassion, kindness, and empathy.

Our Adverse Childhood Experience (ACE) Hub Wales facilitated the visit, and co-lead the implementation of the Trauma-Informed Wales Framework with Traumatic Stress Wales. It began with an informal meeting with policing and public health colleagues followed by a tour of the Senedd. The Zambian team met with Welsh Government officials from the Early Years and International Division to hear firsthand about our relationship with government, ministers and how our work translates into policy and practice. The team then met colleagues in Public Health Wales from our ACE Hub Wales, Violence Prevention Team, Who Collaborating Centre and Health Protection. We also welcomed colleagues from Traumatic Stress Wales and Global Partnerships Cymru. The Zambian team presented their inspiring work to date. We discussed the synergies between the experiences our two countries in trying to implement a trauma-informed national approach and identified areas for future collaboration including tackling gender-based violence and inequality, engaging the voices of children and young people, community engagement and partnership working with policing and criminal justice, public and voluntary sector services.

We are delighted to be supporting this mutually beneficial initiative alongside the Global Law Enforcement and Public Health Association (GLEPHA) and colleagues from policing, public health and academia as part of the advisory group helping to support the Zambian Team. For more information go to: Trauma-informed Zambia – GLEPHA

8 Welsh Risk Pool Concerns Assessment Report

The Welsh Risk Pool Safety and Learning Team completed its annual audit of Public Health Wales' Putting Things Right processes between November 2025 and February 2026, assessing the period from 1 July 2025 to 30 September 2025. Seven areas were reviewed through a combination of fieldwork and detailed scrutiny undertaken by the independent assessment team. The draft report, received in August 2026, awarded an overall rating of substantial assurance across six of the seven areas assessed. The Complaints and Enquiries function achieved a rating of reasonable assurance.

The overall substantial assurance rating provides strong evidence of the effectiveness of our governance, oversight and management arrangements for incident reporting and management. The audit also recognised improvements made since the previous assessment. A small number of recommendations were identified, and a

comprehensive action plan has been developed and is being implemented to address these and support continued quality improvement.

9 Daniel Rixon Awarded Fellowship of the Emergency Planning Society

I am delighted to say that Daniel Rixon, our Emergency Preparedness, Resilience and Response Manager, dedication to helping communities and organisations prepare for and recover from, emergencies has been recognised with a prestigious national award.

Dan has been awarded a Fellowship from the Emergency Planning Society, thanks to his significant contribution to the emergency management and resilience profession which is a significant accomplishment.

During his career, he has supported Public Health Wales as part of the Emergency Preparedness, Resilience and Response (EPRR) team. Alongside this, he has supported the development of the profession through a range of national and voluntary roles. These have included serving on the Executive Committee of the Emergency Planning Society Welsh Branch, volunteering with St John Ambulance Cymru, working as an Associate of the UK Resilience Academy, and contributing to the design and delivery of national resilience training and exercising programmes.

Dan also lectures at the University of Wales Trinity Saint David, helping develop the next generation of resilience professionals.

Big congratulations to Dan for such significant and very well deserved recognition and accomplishment.

10 UK COVID-19 Public Inquiry Update

The Inquiry has now announced the publication dates for the Module 6 (Care Sector) on the 20 October 2026, and the Module 7 (Test, Trace, Isolate) on the 19 November 2026. As core participants in both modules, we will attend the report publication events. Both reports will also be considered by our Health Protection Team, when published, to ensure that we consider and implement any recommendations relevant to us.

The remaining reports to be published are as follows:

- Module 8 – Children and Young People First half of 2027
- Module 9 – Financial Response First half of 2027
- Module 10 – Impact on Society Middle of 2027

We are not a core participant in Module 8, 9 and 10. We therefore await publication of the dates for the remaining reports.

Recommendation

The Board is asked to receive this information.

Tracey Cooper

CHIEF EXECUTIVE