Item No. 7

SUNDERLAND HEALTH AND WELLBEING BOARD 3 July 2025

HEALTH AND WELLBEING DELIVERY BOARDS ASSURANCE

Report of the Director of Children's Services / Chief Executive of Together for Children, Executive Director of Public Health and Wellbeing, and Director of Adult Services / Chief Operating Officer of Sunderland Care and Support (SCAS)

1.0 Purpose of the Report

1.1 The purpose of the report is to provide the Health and Wellbeing Board (HWB) with:

i. assurance that the work of the Delivery Boards is progressing in line with their agreed terms of reference;
ii. a summary of key points discussed at their recent meetings, including discussions on the refresh of the Healthy City Plan;
iii. annual assurance on the delivery of Healthy City Plan grant funded activity; and
iv. an update on Board development sessions.

2.0 Background

2.1 The Health and Wellbeing Board has three delivery boards (Starting Well, Living Well and Ageing Well). On behalf of the Health and Wellbeing Board, the delivery boards lead the delivery of the Healthy City Plan workstreams in the original Implementation Plan. The delivery boards provide challenge and support across partnership activity, to improve health and reduce inequalities.

2.2 To enable the Health and Wellbeing Board to fulfil its role as system leader for health and wellbeing, the delivery boards will need to be assured that activity being delivered across the three themes of the City Plan (Healthy, Vibrant and Dynamic Smart City) are maximising opportunities to reduce inequalities and strengthen the building blocks of health.

2.3 The three delivery boards continue to meet on a quarterly basis, with the most recent meetings held in May 2025.

3.0 Update from the Starting Well Delivery Board – met 2 May 2025

3.1 **Family Hubs** (standard agenda item)

The Delivery Board was presented with a Family Hubs finance update. The Family Hubs service costs over £2.25m to deliver per annum. This moderate estimate does not include back-office functions and the costs of other services, such as the 0-19 service or maternity, unless they are commissioned using the Family Hub grant. The majority of the £2.25m is to

fund staffing. The funding comes from the Department for Education (£1.3m), Early Help core budget (£750k), Public Health (£225k) and other grants (£30k). The key funding risks were discussed, these include a reduction in Department for Education funding and cuts to the Early Help core budget.

Expansion of the offer across additional spoke sites isn't possible with current staffing levels. However, there are many potential opportunities to expand the reach of Family Hubs across the city, with additional partners and community sector providers who would like to collaborate. An additional £500k annually would enable significant expansion of Family Hubs across the city, with a view to have at least one hub or spoke site in every ward. This would primarily fund staffing costs related to community delivery and grants to support partners costs including staffing, resources and costs to make adaptations to buildings.

Delivery Board members reflected on the different types of Hubs across the city and were keen to see the development of a system wide hubs and spokes approach.

It was agreed that lived experience case studies from Family Hubs will be shared at the next meeting.

3.2 **Sunderland Communicates Together**

Sunderland Communicates Together involves all partners striving for a seamless approach to meeting Speech, Language and Communication (SLC) needs. An update on the success of the approach was provided to the Delivery Board. The approach is reducing duplication through collaboration and achieving more together. The aim by 2028 is to reduce by half the percentage of children not achieving at least the expected level across all 'communication and language' and 'literacy' areas of learning at the end of reception year.

The Early Language Identification Measure and Intervention (ELIM-I) is the universal assessment of SLC for use within the 2-2.5-year Health Check Review. The ELIM-I resources are now being used consistently across different sites to communicate consistent messages on SLC.

Health Visitors and Early Years Practitioners complete speech reviews, and speech interventions/ELIM-I with families when identified. Families are referred from the 0-19 Service into the Super Communicator Groups at the Family Hubs.

The Family Hubs Home Learning Environment (HLE) Pathway provides tips and advice on developing speech, language and communication skills from the antenatal period to 5 years of age. It focuses on the importance of: communication from pregnancy onwards whilst also working alongside Midwives to deliver key messages; ensuring SLC support is seamless for families; and running new speech and language "Supercommunicators" sessions, to help support early language from 18 months to 3 years, with Health Visitors promoting the session as part of the 2-year check.

The Supercommunicator offer involves working with a Speech and Language Therapist across the sessions with libraries responsible for signing families up.

During 2024/25 the HLE pathway supported 402 children. Next steps include the launch of key messages, these have been developed with local parent carers.

The review of the specialist service model will be reflected in a new service specification. A new waiting list initiative for Social Communication Group Therapy in partnership with the Family Hubs started in May, it seeks to reduce waiting times, increase footfall into the Family Hubs and pilot a new approach on how families may access the service in the future. An Early Talk Boost dashboard will soon be tracking a small dataset across health, education and social care in relation to the SLC offer across Sunderland, enabling progress to be tracked. The Delivery Board were assured that Sunderland Communicates Together is now the central point for speech and language, with clear progress made in ensuring SLC is becoming everyone's business.

3.3 **Child deaths - modifiable factors**

The full child death review process is required to identify modifiable factors in the cases they review so agencies can learn lessons, improve practice, and ultimately prevent further deaths. A modifiable factor is defined as something which "may have contributed to the death of the child and which could be modified to reduce the risk of future child deaths". In 2023/24, 37% of child deaths had agreed modifiable factors in Sunderland.

The Delivery Board were advised of the modifiable themes that were reported as part of the 2023/24 Child Death Overview Panel (CDOP) report and actions that are being taken to reduce these risks. The themes are:

- Healthy maternal weight: living with overweight or obesity increases the risk of complications for pregnant women and baby including gestational diabetes, pre-eclampsia, high blood pressure, premature delivery and risk of stillbirth and birth defects. The higher a woman's Body Mass Index (BMI), the higher the chance of these complications. In addition to the routine information and support provided through both antenatal classes and maternity appointments, examples of further action includes: accessibility to start for life information and advice, co-ordinated prevention support, and activities available through family hubs and Active Sunderland (yoga, swimming etc).

  It is essential that prevention messages continue to be shared more broadly as well as a continued effort in specific services to mitigate some of the risks.

- Smoking in Pregnancy: the rates have continued to decline. There is the specialist stop smoking service, an offer within hospital and maternity, a Heath Visiting pathway and a specialist post within Family Hubs to support and strengthen the community offer. [Note: since the Delivery Board meeting

the national data set for 2024/25 has been released for Smoking at the time of delivery, with Sunderland at 8.7%, down from 11.2% in the previous year].

- Sudden Infant Death: Partners in the city are in the process of looking at "Eyes on the baby" which is a multi-agency prevention training and implementation programme aiming to promote safer infant sleep and prevent sudden infant deaths. An event in May will help inform the local approach. The training has three strands: (1) staff who encounter vulnerable families occasionally as part of every-day work (2) staff who provide direct support to vulnerable families (3) practitioners involved in routine or emergency care of vulnerable families.

  High level 2024/25 data was shared, showing a breakdown by age, ethnicity and category of death. This indicates a disproportionate number of child deaths from non-white backgrounds with modifiable risk factors. However, the data did not have any context, as the annual report has not yet been published. It was agreed to discuss the modifiable factors and any mitigating actions from a Sunderland perspective in further detail, once the CDOP report has been published.

3.4 **Healthy City Plan refresh / outcomes framework**

See agenda item 9.

The Delivery Board were briefed on the Health and Wellbeing Board Development Session that considered the refreshed Healthy City Plan priorities.

The Delivery Board discussed the accompanying refreshed Outcomes Framework and were keen to align the approach to the Early Help Meaningful Measures, where appropriate. The performance framework for the Health and Wellbeing Board needs to be high level. To support this, the Delivery Board needs to be focused on measuring the right things and asking the right questions.

3.5 **Healthy weight pathway update**

Prevalence of reception-aged children living with obesity in Sunderland has declined to 10.4% (2023/24), continuing a positive trend and narrowing the gap with the national average. This improvement is underpinned by a comprehensive whole systems approach to children's healthy weight, including:

- A robust infant feeding offer and pathway
- Record-high breastfeeding rates, which we know reduces the risk of childhood overweight and obesity

The prevalence of children living with obesity in Year 6 in Sunderland remains high at 27.5% in 23/24, a slight increase from the previous year but still below the 2021 peak of 29.7%. We continue to have in place a comprehensive offer

of support to families including, Growing Healthy Sunderland 0–19 Service, Active Sunderland Healthy Lifestyles Programme, Family Hubs, Food & Nutrition and Physical Activity Charter Marks, innovative pilots such as Belly Bugs and Teach Active (in 6 schools) and training on School Food Standards for all HAF providers ahead of summer.

Sunderland have also been actively engaged in developing the North-East Children and Young People Healthy Weight Health Needs Assessment, which will develop our understanding on what action can be undertaken to address childhood obesity. The needs assessment highlights the need for ongoing commitment to evidence based service provision and also includes key recommendations where there is opportunity for greatest impact and enable change at place. These include:

- Healthier food advertising
- Local authority-led food procurement and provision
- Healthy Settings – Whole School Approaches

These regional actions will also inform the development of a city-wide Healthy Weight Strategy and action plan, currently been developed for Sunderland, focused on how the environment shapes our health. This strategy will further develop our system wide approach to supporting healthy weight.

3.6 **Teenage pregnancy update**

An update to the teenage conception needs assessment is underway which will inform a refreshed strategy and action plan.

The latest published data (2021) for under 18 conceptions shows a rate of 26.4 per 1000, above that of both the regional and national rate. This is a 58% reduction since 1998.

Looking at a younger age group, the under-16 conception rate was 7.0 per 1,000 females in Sunderland in 2021 compared to 3.3 in the North East and 2.1 in England. This places Sunderland highest nationally for under-16 conceptions.

Given the lag in validated and published data, local estimates have been modelled using the Public Health Outcomes indicator definition which show a decline in rates.

Current work underway to support the improvement of teenage conception rates includes:

- Analysis of local data to understand if neighbourhood level interventions are required
- Recruitment of an RSHE post to provide quality assurance to the implementation of statutory guidance and the education delivered across settings
- Long acting reversable contraception pilot within pharmacies (targeted approach)

- Whole systems sexual health review to inform a refreshed delivery model in 2026.

3.7 **Forward plan**

Child poverty and Family Hubs are a standard agenda item. The next meeting will also discuss progress on delivering the Oral Health Strategy and ICB Dental Strategy. The detailed forward plan will be reviewed in line with refreshed starting well priorities.

3.8 **Key issues**

The Delivery Board remains focused on the continuing legacy of the pandemic, the cost-of-living crisis, and the number of children living in poverty. Partners are committed to ensuring that prevention and early help are at the forefront of thinking and action.

4.0 Update from the Living Well Delivery Board – met 14 May 2025

4.1 Low carbon and the importance to health and wellbeing

The Delivery Board received a presentation on the low carbon agenda and the relationship to health and wellbeing. The Shadow Board for Low Carbon has seven strategic priorities, these are set out in the Low Carbon Framework and action plan. Moving forward key areas to prioritise include:

- Greener citywide domestic energy – with homes being as energy efficient as possible
- Transport – supporting staff and residents to travel more effectively, including increasing walking and cycling activity
- Improving the energy efficiency of operational buildings
- Climate change adaptation – supporting our communities to adapt to hotter, dryer summers and warmer, wetter winters
- Nature, Towns and Cities – working with communities to maximise the benefits of nature

The presentation reflected on the small steps we can all make to help reduce carbon emissions, whilst at the same time realising health benefits. For example, growing your own food, eating seasonal food and consuming more plants, using public transport, and cycling and walking.

Climate change is projected to impact Sunderland with:

- Hotter, dryer summers
- Warmer, wetter winters
- Increase in pests, pathogens and invasive species.
- Heatwaves will become more severe, more frequent and longer
- Flooding will increase from surface water, sea level rise and groundwater

Our Climate Change Adaptation Plan will focus on national risks. A high-level risk assessment for Sunderland has been developed, this considers the health risks (vulnerability factors, climate-related hazards, exposure) and health outcomes.

The Delivery Board questioned whether the Adaptation Plan recognised the impacts of global migration on the UK, as some places across the world will become inhabitable.

The Delivery Board agreed that climate change is a massive health issue. A Public Health Registrar has conducted a public health assessment of the Local Carbon Adaptation Plan. It was agreed to bring this to the next meeting of the Delivery Board.

4.2 **Progress update on reducing alcohol harms**

The Delivery Board was presented with an updated alcohol health profile for Sunderland. The impact of harmful drinking and alcohol dependence is much greater for those experiencing the highest levels of deprivation. The reasons for this are not fully understood, since people on a lower income do not tend to consume more alcohol than people from higher socio-economic groups. This 'alcohol harm paradox' is likely to relate to multiple risk factors affecting people in lower socio- economic communities.

The North East has the highest rate of alcohol-specific deaths of any English Region (25.7 per 100,000). While Sunderland has the highest rate in England, six other North East local authorities were also in the top ten highest in England.

The highest causes of alcohol specific deaths in Sunderland for 2023 were alcoholic liver disease and mental and behavioural disorders due to the use of alcohol. Liver disease is one of the main causes of premature mortality in England and people are dying from it at a younger age. However, most liver disease is preventable.

The Delivery Board heard of some of the great work on this agenda, including the regional approach to embedding Alcohol Care teams across NHS Trusts and the work of Balance North East, who are commissioned to lead on prevention and awareness raising campaigns across the region.

An update was provided on delivering "Sunderland's Alcohol Strategy: Calling Time, it's time to rethink drink" which has 3 objectives:

1. Prevention and early intervention
2. Providing specialist interventions to promote a quality treatment and recovery system
3. Protecting children, young people and families from alcohol related harm

Several achievements were highlighted, including the success of Individual Placement Support for people who are in recovery. The programme provides intensive, personalised assistance to individuals undergoing drug and alcohol treatment, helping them secure meaningful employment as part of their recovery journey.

Visible Recovery is working well in the city, this involves enhancing training to professionals to improve understanding of addiction and recovery. The programme helps to reduce stigma by normalising recovery and celebrating success.

Other recent activity to support recovery includes the piloting of the health bus and also recovery journaling.

The Delivery Board discussed how issues of alcohol dependence often come to light through other means, for example, via loneliness and social isolation, or where there are more comprehensive assessments of people who need support, such as social care assessments. There is opportunity to consider how the digital inclusion team can support the agenda by building digital competence into approaches. The Board reflected on positive role models / influencers on young people, people who don't drink and lead heathy lives. In support of this, it was noted that leisure centres have seen an increase in young people attending gyms.

The Delivery Board were assured of the depth and breadth of work to reduce alcohol harms across the city.

4.3 **Healthy City Plan refresh / outcomes framework**

See agenda item 9 and paragraph 3.4 of this report.

The Delivery Board were briefed on the Health and Wellbeing Board Development Session that considered the refreshed Healthy City Plan priorities.

The Delivery Board agreed to discuss this outside of the meeting, seeking to ensure appropriate measures, including inequality measures were reflected in the new outcomes framework.

4.4 **Healthy City Plan Grant Proposals**

The Delivery Board considered three proposals seeking grant funding. Comments from the Delivery Board were discussed with the decision-making panel. See section 7.0 of this report.

4.5 **Consultation response: Strengthening the soft drinks industry levy:** Strengthening the Soft Drinks Industry Levy consultation - GOV.UK. Public Health are working with Food Active to draft a response to the consultation, which is open until 21 July 2025. The draft response will be shared with the Starting Well and Ageing Well Delivery Boards, and a final response submitted on behalf of the Health and Wellbeing Board. 4.6 **Single use vapes ban:** From 1 June 2025, it became illegal to sell, supply or possess for sale or supply any single use (disposable) vapes, including non-nicotine versions. This applies to all retailers, including high street and online, as well as healthcare and stop smoking services.

4.7 **Forward plan**

The forward plan of work identifies items the Delivery Board would like assurance on or will need to endorse, and topics they would like to lead on. Proposed topics for forthcoming meetings include financial wellbeing, physical activity, homelessness, smoke free, healthy weight and the Prevention Concordat for Better Mental Health.

4.8 **Key issues**

The issues of improving health and reducing inequalities requires a partnership approach and a focus on the building blocks of health. Consideration will be given to how the Delivery Board can continue to support the changes we want to see. In doing this it is hoped this will lead to radical changes in how people think, feel and act with strong and stable building blocks of health for all.

5.0 Update from the Ageing Well Delivery Board – 13 May 2025

5.1 **Carers Strategy update**

The Delivery Board was provided with an update on the delivery of the Carers Strategy for the city and how progress is being made in improving services to unpaid carers of all ages. The Carers Strategy was reviewed with carers in Autumn 2024. Feedback largely confirmed that the priorities and actions within the strategy remain important to carers. The Carers Delivery Board has been refreshed with partners across the system. Progress updates were provided on the strategic priorities, highlights included:

- Identification and recognition –

Data has been gathered from Council Tax, School Census information and GP registers to identify those individuals who are registered as Carers in the city by location.
Engagement and awareness building sessions within education establishments and GP practices is ongoing, to ensure they are equipped to identify carers and assist them to understand how and where they can seek support in addition to formal referral processes. The Delivery Board reflected on how young carers could be hidden, particularly those who were carers of people with alcohol dependency or substance misuse issues.
There is work ongoing with the Patient Excellence Facilitator (STSFT) to further roll out Carer Passport training and develop a remote Carer Awareness tool which will be embedded throughout all staff inductions within the trust.

- Information, advice and guidance –

There has been engagement with VCS organisations across the city to support them to further develop their knowledge and experience to make them better equipped to identify, support and signpost carers to the correct information and advice

A carers training course has been developed to support new carers. It includes information on stress and wellbeing, assisting at mealtimes, medication management, infection control, personal development, and communicating with professionals.
The Carers Centre has been integrated into the adult social care front door, which is helping to streamline the pathway to support and improving knowledge and information sharing.

- Communication and engagement –

Standards of communication and engagement are being developed to ensure clear and consistent language is used throughout the system when communicating with carers.
The Delivery Board was advised how carers currently lack the confidence to represent themselves on the strategic group. It was felt that the carers voice should be leading the strategic action for carers and perhaps the governance could be amended, whereby carers lead the agenda, with officers supporting via the Carers Delivery Board.
VCS organisations are being engaged across the city to support them to further develop their knowledge and experience, so they are better equipped to identify, support and signpost carers appropriately.

The Delivery Board were assured of the process made in delivering the Carers Strategy.

5.2 **Falls Strategy update**

The update on the delivery of the Falls Strategy reflected on the progress made in the 18 months since the strategy was approved. In 2023/24 Sunderland had the 21st highest admissions to hospital following a fall. One year on, in 2024/25 this has improved to 26th place.

The model of falls management in Sunderland was presented to the Delivery Board, this sets out increasing strength and balance activity (Steady on Your Feet and level 1 multifactorial assessment with care homes, Farmborough Court and Supported Living) through to rehabilitation (level 2 multifactorial assessment with the Acute Therapy Service, Community Therapy Service, Recovery at Home, Community Nursing Service and Frailty Team).

Falls awareness training and care home falls management programme training has been delivered. The desire is to increase the care home falls management training further. So far, six care homes have completed the training and a further ten have signed up to engage in the programme. Some of the positive feedback was shared from the training sessions.

The strength and balance exercise programmes were upgraded to an evidence based 14 weeks “OTAGO” programme, with all training providers receiving training. Standardised outcome measures for the programme allow for reporting to capture participants progress for outcomes analysis. During 2023 and 2024 there were a total of 869 participants on the programme. In 2024 92% of the completed participants demonstrated positive outcomes in

more than two outcome measures, comparing their initial assessment to their final assessment.

The Delivery Board was assured of the progress made. It was agreed to discuss future funding for the falls agenda at the next Delivery Board meeting.

5.3 **Healthy City Plan refresh / outcomes framework**

See agenda item 9 and paragraph 3.4 of this report.

The Delivery Board were briefed on the Health and Wellbeing Board Development Session that considered the refreshed Healthy City Plan priorities.

The Delivery Board agreed to pick this up outside of the meeting, seeking to ensure measures captured the Healthy City Plan priorities and what's important to people in the city, for example, too many people end up in A&E and are admitted to hospital; hospital readmissions; loneliness and isolation; and multi-morbidities. The outcomes framework should also pick-up inequality measures, particularly where we are performing poorly.

It was agreed the Delivery Boards workplan would need to be aligned to the Healthy City Plan priorities and performance measures.

5.4 **Healthy City Plan Grant Proposals**

The Delivery Board considered two proposals seeking grant funding. Comments from the Delivery Board were discussed with the decision-making panel. See section 7.0 of this report.

5.5. **CQC Inspection of Adult Social Care**

The City Council's Adult Social Care Service achieved an overall score of 75 in the inspection which was carried out in November 2024. Inspectors found high quality services across the board, with all nine key areas examined rated 'Good'.

In a report published in May 2025, the CQC said the council worked with people, partners, and the local community to make available a range of services, facilities, resources, and other measures to promote independence, and to prevent, delay or reduce the need for care and support.

5.6 **Forward plan**

The Delivery Board has a detailed forward plan, this will evolve as the Board develops its Delivery Plan priorities in the refreshed Healthy City Plan. Insights from older people will continue to shape action, including those from the State of Ageing report, Vision of Ageing Well in Sunderland research and from the 240+ Ageing Well Ambassadors.

5.7 **Key issues**

- How we develop a strengths-based approach to the issues discussed? For example, reducing frailty factors, reducing the need for residential care, improving digital inclusion, improving financial wellbeing, better support for people living with dementia, and raising awareness of the early intervention and prevention opportunities across the city that support ageing well.
- Ensuring we use all available data to identify frailty and target support.
- Ensuring older people have access to information, advice and guidance that will support them to live a good life and age well.

6.0 Health and Wellbeing Board Development Sessions

6.1 For the purposes of public record the Health and Wellbeing Board held a development session on 10 April 2025 to discuss the Healthy City Plan refresh. Please refer to agenda item 9.

6.2 The write-up from the development session on 20 February 2025 which focused on 'tackling racism, discrimination and their outcomes from a health and care perspective' has been shared with Board members. A Task Group has been established, with the first meeting held 24 June. This initial meeting considered the Terms of Reference, reflection and actions from the development session, the Migrant Health Needs Assessment, priorities, and next steps.

7.0 Healthy City Plan Grant

Background

7.1 A £1.75m grant is available to support the delivery of the Healthy City Plan. [£50k of this grant has been allotted for behavioural insights work, health equity audits and other activity to inform the key priorities and work streams within the Healthy City Plan].

7.2 All proposals for the Healthy City Plan Grant must seek the support of the relevant Delivery Board. Once support has been obtained proposals are put forward to the Healthy City Grant panel for consideration. Panel members have been given the delegation from the Health and Wellbeing Board to award the funding by consensual agreement. The panel compromises of the Chair of the Health and Wellbeing Board, the Executive Director of Public Health and Wellbeing, and Director – South Tyneside and Sunderland Delivery Team.

7.3 Since the last assurance update three projects have received approval for Healthy City Plan Grant funding:

Delivery Board	Project Name	Project Summary	Amount Approved
Living Well	LW10 - Nature, Towns Cities – Connecting through Nature	The grant will contribute to Nature Town and cities staff resources for three years to work with and within communities to grow capacity and develop pipeline of investment projects to improve and develop natural spaces across the city.	£54,500
Ageing Well (Behavioural insights monies)	BI01- Research in dementia understanding our local residents and risks for prevention.	A pilot research study to explore local residents and community views about the awareness of dementia and associated risk factors, together with the support available, and wanted, for families affected by dementia. This study will consider the views of a wide range of people living and working in Sunderland.	**£13,961**
N/a (Behavioural insights monies)	BI02 - Artificial Intelligence research proposal to detect heart failure at home	Research to utilise a new artificial-intelligence derived score to use GP records to identify those aged over 65 at the highest risk of suffering from heart failure.	**£33,000**
Total			**£101,461**[1]

7.4 A total of £1,622,166 of the grant has been awarded to date. The remaining grant allocation to be awarded is £136,564 (i.e. £133,525 of the main grant fund and £3,039 of the behavioural insights monies).

7.5 Whilst there are some deferred project proposals, there is still opportunity for the Delivery Boards to put forward new projects that will support the delivery of the Healthy City Plan.

[1] £46,961 of this amount was agreed to be funded from the £50k allocated for Behavioural Insights. This is separate from the outstanding Healthy City Plan Grant balance.

8.0 Recommendations

8.1 The Health and Wellbeing Board is recommended to:

i. note and comment on the summaries from the recent meetings of the Delivery Boards;
ii. be assured that the work of the Delivery Boards is progressing in line with their agreed terms of reference;
iii. support the Executive Director of Public Health and Wellbeing in consultation with the Chair of the Health and Wellbeing Board and Starting and Living Well Delivery Boards to submit a response to the "Strengthening the soft drinks industry levy" consultation on behalf of the Health and Wellbeing Board by 21 July 2025;
iv. consider potential project proposals for the remaining Healthy City Plan grant;
v. note for public record updates from Health and Wellbeing Board development sessions; and
vi. support the establishment of a Task Group to take forward work on tackling racism and discrimination in health and care.