

Reflect on how Medway's VCS is performing in relation to Diversity and Inclusion on their Boards of Trustees? What could we be doing better? What support/guidance would be helpful to us to improve our performance in this area?

- Boards need to identify and approach for individuals to get on board (via local networks)
- Transport for women who may have relied on husband to bring them to meetings and events (Medway Norse buses)
- Community engagement events
- Counter the fear of saying the wrong thing
- Big difference between unintentionally insensitive and racial abuse
- Having a diverse board will encourage others to be more involved in diverse services
- Young/apprentice trustees
- More training to ease fear of being a trustee
- Increasing links to organisations such as DWP
- Get people involved/good on CV
- Racial diversity = help needs to reach families whose culture is to look after their own
- Carers predominantly middle aged women – hard for them to get involved in outside interests that needs them represented
- More outreach – (e.g. CCG talks to communities)
- Language barrier solutions
- Digital exclusion issues
- Education and awareness (community info)
- Minimise gatekeeping – not first NHS
- Wide range of activities
- More training/knowledge on disabilities
- Accessible to all people with training
- Budget time of day to address disabilities
- Diversity on the board areas
- Funding as support goods (trustees)
- Inclusive
- Practical help
- Younger people introducing
- Targeted recruitment
- 3-5 rotations
- Economical difference
- Smaller orgs struggle with grants – more support
- Forum message board to find resources/contacts
- Personal experience to be acknowledged
- Sweet of all policies (library) templates
- Create file on trustees
- Medway foodbank (Christian)

How diverse and inclusive do you feel Medway's volunteering landscape is? What could we be doing better? What support/guidance would be helpful to us to improve our performance in this area?

- Enable all community groups to volunteer
- Dockyard team – needs to be more inclusive
- Not as diverse as could be – need more diverse volunteers – ages/ethnicity/LGBTQ+
- More inclusive and diverse than other areas
- Literature available in different languages
- Centre to get literature translated for all charities
- Far East Groups – more engagement
- Medway Volunteers could be more diverse – connecting all community groups together – A platform
- Get all community groups interacting with each other – stop being precious/protective
- I think it is diverse but could be better
- Understanding the communities / cultural differences
- Connect with religious/groups community
- Celebrate more cultural festivals
- Communication, promotion of volunteering opportunities
- Need to find out the volunteering landscape looks like
- Managing expectations, rewarding volunteers
- Recruitment
- Win/Win for both
- Tap into other opportunities and expertise
- Annual/community events – VCSE and local businesses and universities
- Training
- Events and seminars
- Ideas and projects – swap shops
- Reasons stopping volunteers
- Not all areas are diverse – be alert to what your area needs
- Raise awareness
- Recruitment agency for volunteers
- Volunteer Passport

What suggestions and ideas do you have for making health services being delivered locally more diverse and inclusive?

- Is the outreach correct – where should we go?
- Are there volunteers in health services supporting their diversities?
- Where do people connect? Location
- Where are shortfalls?
- How effective are our partnerships?
- How do we break down barriers and connect with others?
- Building trust and campion (local)
- Past funding may have been specific to a certain group/sector
- How is funding split between organisations/projects
- Capitalise on funding together – Medway Together
- Sharing good stories
- Demonstrate impact
- Mapping initiatives, data gathering/sharing
- Quality of impact reporting is critical
- Is funding adequate to obtain that? Getting this to the top people
- Look at your audience
- Analysis of demographic resources
- Familiar locality for different communities. Target audience
- Interrupting for right audience – terminology, appropriate vocabulary
- Forum for young people – hear them
- Communication and socialisation – especially for young people
- Where to find information and how especially for those digitally isolated
- Shout out where people can find information
- Networking opportunities
- Educating our young people
- People are people
- Talking to those people who are seldom heard to find out what they need
- Going further out. Outreach
- Reaching out to community leaders
- Help if the health service work force
- Levels of bureaucracy
- Trust and relationships
- Taking health services to where those groups meet. Safe settings
- Training, development around more inclusive practices
- Understanding young people, engage with them
- Understanding and enhancing the impact of volunteers
- Volunteers stress re opportunity to get back into the community
- More funding for social prescribing providers
- Tackling social isolation and loneliness
- Communication (community, UCS, PH, council)
- Community centres – broken down taboo's
- Targeting specific areas/cohorts of need
- Education on lifestyle/health and prevention
- Ways of communication to breakdown businesses
- Cost of living impact on prevention i.e. go to appointments /buying food
- Partnership working
- Translation – medical specialist
- Accessible and language (plain English) English as addition language

- Culturally sensitive
- Face to face (use online appropriately)
- Better/diverse routes into care/mental health
- Bring healthcare into “safe and central” locations
- Joint working with VCS