



LATER MATTERS

Tackling Race Inequalities for BME Older People

Project Evaluation Report

Date: 16th June, 2010

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1. Introduction & Background

This report has been prepared by the Insight and Consumer Research team from Age UK* and presents the monitoring and evaluation findings for the **Later Matters** programme.

In 2009/10, Age Concern and Help the Aged secured funding from the Communities and Local Government Tackling Race Inequalities fund to deliver projects in Yorkshire & Humber and in the West Midlands tackling inequalities for BME older people.

In the Yorkshire & Humber region, the project focuses on equality in access and outcomes for BME elders in relation to health and social care services. Age Concern Support Services (Yorkshire & Humber) are managing the project and are working with public and third sector organisations throughout the region to promote equality of opportunity in health and social care for older BME people.

The report has been prepared by Judi Aidam (Research Manager, Age UK) on behalf of Miriam Browne (Programme Development Officer at Age Concern Support Services - Yorkshire & Humber). The contribution of Miriam Browne herself and her colleagues at (staff members) Age Concern Support Services (Yorkshire & Humber) is also acknowledged.

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* Age UK is the new name for Age Concern and Help the Aged

2. Objectives

The **overall objectives** for the **Later Matters** project are as follows:

- To raise awareness of service provision within the region and increase opportunities for partnership working;
- To give BME elders, carers and organisations a voice in the design and quality of services available to them; and
- To provide organisations with a tool to measure how accessible their services are to BME older people and plan future improvements

The Insight and Consumer Research team from Age UK has been asked complete a monitoring and evaluation report to:

- **Identify and evaluate the outcomes of the project in its first year**, in terms of organisations and their:
 - Participation in and reactions towards the various consultation and dissemination events; and
 - Involvement with the project itself (via inclusion on the database, attendance and reaction to training sessions and subsequent interaction with the website)
- **Assess the impact of the project** on the participating organisations, focusing on:
 - Awareness of health and social care provision for BME elders in the region
 - Awareness of good practice from organisations working with BME elders in the region
 - Opportunities for networking created by the project
 - Involvement with the project through training, their intent to use the progress measure/good practice guidance and use of the website (database and discussion board)

To complete this evaluation, information has been collected in a number of ways:

- **Evaluation Forms:** Completed after the consultation and dissemination events and also the Later Matters Adviser training sessions.
- **Monitoring Data:** Information received from Age Concern Support Services at Age Concern Yorkshire & Humber, detailing the number of organisations (focusing on health and social care) that are delivering services to BME older people on the database, that attended training sessions and that have been sent good practice reports. Plus statistics on relevant website hits during the period.
- **Participant Survey:** Sent to organisations to assess the impact of the project on individual staff members and their organisation and to ask about future involvement.

3. Summary of Key Findings

Key Findings: Consultation and Dissemination Events

- Five consultations and two dissemination events were held in February and March 2010 – reaching 185 people in total.
- In terms of participants, a good spread of ages was achieved across the events and a fairly even split in terms of gender. Encouragingly, a good cross-section of participants was also achieved in terms of ethnicity.
- The majority of respondents (74%) came away with a good overall impression of the event they attended – with positive ratings for all three aspects: suitability of venue, organisation and quality of refreshments
- The **interactive sessions** and the chance to **meet and network** with people came across as the most enjoyable elements.
- Less than half commented on their least enjoyable aspects and those that did tended to mention more **practical, venue related issues** – which highlights the importance of choosing the right venue and considering such practicalities when organising workshops such as these.
- The majority found the events **useful and relevant**. And in the ‘other comments’ section several gave individual **ideas or suggestions** for future events which are worth considering.

Key Findings: Training Sessions

- Three training sessions were held in March and early April 2010 with a target of training Later Matters Advisers (or Auditors) from 8 organisations.
- In total **21** people, representing **15** different organisations (both statutory and third sector), attended a training session – exceeding the original target.
- Slightly more trainees were women (13 vs 8 men) and all were aged between 21-60. Once again, a good cross-section of participants was achieved in terms of ethnicity (10 out of 21 were from non-white ethnic backgrounds).
- The **discussion and sharing** of ideas, along with **meeting and networking** with people from other organisations proved to be the most enjoyable aspects.

- All found the training **useful** and/or **beneficial**. And while the majority felt **confident** about using the progress measure and conducting reviews, a couple did not and some would like more training and/or support.

Key Findings: Database and Discussion Forum

- The key targets for the database have been met with **61 organisations** currently included (against a target of 50) and **281 page views** recorded between 22nd March and 16th May (against a target of 100 per quarter).
- The discussion forum was made available on time and the BME web pages have been viewed **129** times between 22nd March and 16th May (against a target of 100 per quarter). However, interaction with the forum is appears low – **no discussion threads** have been started (against a target of 5 in the first month and 5 new threads per quarter).
- Further promotion of these resources is recommended and, indeed already planned. But to improve navigation to these resources it is suggested that links to both the discussion forum and the database be placed more prominently - at the top of the BME web pages.

Key Findings: Participant Survey

- The survey respondents came from a variety of different organisations and the majority have been **actively involved** with the Later Matters project.
- The majority felt that their involvement with the Later Matters project has been a **positive experience** overall – no project said it had been a negative experience.
- Results indicate it is early days in terms of people using the BME information on the Age Concern Yorkshire & Humber website. **Usage levels are low** but all except one said they have plans to use the website in future.
- With regards to using the progress measures and good practice guidance over the next year and getting training, **the low intention levels** along with the relatively high proportion of respondents who did not know their plans, suggest further publicity for the tool and the training sessions is required.
 - Over half intend to use the progress measures and good practice guidance over the next year, but only around one in five have definite plans
 - Only five organisations had already received training as advisers for the Later Matters project. One in five intends to get training and a further one in four said they have no plans to get trained, but two in five did not know

- And, in terms of **impact**:
 - The project has performed well with regards to helping organisations **learn good practice** for working with BME elders (three out of four respondents agreed they had done this)
 - The project has enabled organisations to **successfully network** with each other to some degree (seven in ten agreed that the project has enabled them to network successfully; although only one in four agreed strongly)
 - **Awareness of health and social care provision** for BME elders has increased as a result of involvement with the project, but there is still room for improvement on this measure (two thirds agreed that they are now more aware; but one in four disagreed)
 - There has been some success in helping organisations to **understand the health and social care issues facing BME elders**, but it is perhaps too early to measure this. (Six in ten agreed that being involved has fostered a greater understanding within their organisation; but one in five disagreed and a similar proportion could not say)

4. Detailed Feedback & Evaluation

Background: Key Milestones

Research and Mapping Report

An initial report was commissioned to identify good practice within groups and services across the Yorkshire and Humber region. Age Concern Sheffield completed this exercise and sourced feedback (via meetings and telephone interviews) from 25 statutory services, 30 third sector organisations and 5 older people's forums.

In Quarter 4 of the project, the Mapping and Good Practice Report was published and circulated to 137 staff from 115 third sector and public sector organisations (including 10 statutory organisations). The report details information on the current provision for BME older people in the region, including examples of good practice, with the aim of raising awareness of existing provision and an awareness of possible gaps in service provision.

Through circulating the Mapping and Good Practice Report in this way, BME older people's needs have been highlighted to third sector and statutory organisations. This report has been invaluable as a precursor to the development of the Progress Measure and Good Practice Guidance (audit tool).

Steering Group

A Steering Group was established in Quarter 3 of the project with the aim of giving BME organisations a voice throughout the life of the project. The Steering Group is representative of statutory, health and voluntary/community organisations across the region.

The Steering Group meetings held to date have focussed on the consultation on and review of the audit tool. They reviewed the draft audit tool at a meeting on 23rd February 2010 and via email and will continue to consult on the project going forward.

Database and Discussion Forum

Initial plans were to create a **database** of at least 50 organisations who work with older BME people, to help non-specialist information and advice services signpost older BME people more effectively and to provide information on available services to BME older people in the region. The database has been available on the BME pages of the Age Concern Yorkshire & Humber website from March 2010 and contains details for 61 organisations. The database will be further developed in Year 2 of the project.

A **discussion forum** for BME older people and service providers to exchange good practice has been available on the BME pages of the Age Concern Yorkshire & Humber website since January 2010. It has been promoted during the consultation, dissemination and training events held for the progress measure and good practice guidance, and also through phone calls to organisations on the database. Further promotion of the discussion forum is planned for Year 2 of the project.

- This report highlights the key achievements to date for the development of the database and discussion forum.

Later Matters Progress Measure and Good Practice Guidance (the ‘Audit Tool’)

After input from the consultation events held in February 2010, the final version of a planned audit tool was completed in early March 2010 and has been re-titled as “Later Matters Progress Measure and Good Practice Guidance”.

Due to delays with designing the documents (as a result of the change to ‘Age UK’ and subsequent re-branding issues) the document was finalised in May 2010 and will be printed in June 2010. The Progress Measure and Good Practice Guidance will be made available to organisations wishing to undertake the review process, with the support of a trained Later Matters Adviser throughout year two of the project.

Two dissemination events were held to provide feedback to previous consultation participants and enable an evaluation of the project at that stage and a chance for participants to meet and network. The events were also used to publicise the online elements of the project – the Discussion Forum and Database.

Three subsequent events were held in March/April 2010 to train organisations/individuals to support the audit/action planning process using the Progress Measure and Good Practice Guidance. The initial plan was to train 8 organisations to use the audit tool. To date 21 individuals from 15 organisations have attended a training session and 7 people have booked a place on the next training event in July 2010.

- This report also provides the results from the evaluation of the consultation, dissemination and training events, along with the results of a subsequent postal survey among participants.

4.1 Consultation and Dissemination Events

As part of the development of the Later Matters audit tool, the project planned to give older people and BME organisations and individuals a voice in deciding what makes a good service provider.

To do this, in a departure from the original plan to hold focus groups with older BME people, the project ran a series of consultation events. Members of staff from organisations delivering health and social care services and BME organisations were invited to these events, along with BME older people and their carers. Following on from these sessions a further two dissemination events were held.

In total:

- Three main consultation events were held, plus three additional outreach consultations.
 - These took place in Leeds and Hull during February 2010.
 - 132 people were consulted, representing 49 organisations (including Local Authorities, PCTs and third sector organisations).
 - This consultation directly informed the progress measure and good practice guidance.

- Two dissemination events were held.
 - These took place in March 2010 and were also held in Leeds and Hull.
 - 53 people attended these events, made up of staff from public and third sector organisations and BME older people and carers.
 - Speakers at the events were from organisations identified as showing good practice in service provision for older BME people, such as the Meri Yaadian project at Bradford Council (a project for older people with dementia).
 - The original target of 10 attendees per event was therefore exceeded.

In addition to giving older people and organisations a voice in the development of the Progress Measure and Good Practice Guidance (audit tool), all of these sessions provided an opportunity for networking and encouraged a dialogue between older people, carers and service providers.

In order to monitor the profile of attendees at the consultations and dissemination events, all participants were asked to complete an Equalities Monitoring Form. In addition, at some of the consultations and at both of the dissemination events, participants were asked to complete an Event Evaluation Form.

This section highlights the findings from the analysis of these forms.

4.1.1 Consultation and Dissemination Events: Equalities Monitoring Results

Consultation Events

In total, **132** people attended the Consultation events

- There was a fairly even split between men and women
 - 48% male vs 52% female
- There was also a good spread of ages represented, with the majority aged over 50:
 - More than two in five were aged over 60 (44%), almost three in ten were 51-60 (28%) and one in five were 50 or younger (21%)

| AGE | MALE | FEMALE | TOTALS | Percentage of Sample |
|-----------------------------|-----------|-----------|------------|----------------------|
| Under 21 | 0 | 0 | 0 | 0 |
| 21- 30 | 0 | 3 | 3 | 2 |
| 31- 40 | 5 | 6 | 11 | 8 |
| 41- 50 | 4 | 10 | 14 | 11 |
| 51- 60 | 17 | 20 | 37 | 28 |
| 61- 70 | 18 | 15 | 33 | 25 |
| 71- 80 | 10 | 10 | 20 | 15 |
| 81-90 | 5 | 0 | 5 | 4 |
| Over 90 | 0 | 0 | 0 | 0 |
| No age Specified | 4 | 5 | 9 | 7 |
| Total | 63 | 69 | 132 | 100 |
| Percentage of sample | 48 | 52 | 100 | |

- Government data from 2001 shows that the majority of the UK population were White (92%). The remaining 4.6 million (or 7.9 per cent) of people belonged to other ethnic groups (see Appendices for full table).
- The consultation monitoring data shows that a good cross-section of participants was achieved in terms of their ethnicity.
 - Over three in four participants (77%) were from a non-white ethnic background (see table overleaf):

| Ethnicity | Totals | Percentage of Sample |
|-------------------------------------|---------------|-----------------------------|
| White British | 24 | 18 |
| White Irish | 0 | 0 |
| Gypsy or Traveller | 1 | 1 |
| Other White | 3 | 2 |
| Mixed: White and Caribbean | 1 | 1 |
| Mixed: White and Black African | 0 | 0 |
| Mixed: White and Asian | 1 | 1 |
| Any Other Mixed Background | 0 | 0 |
| Asian or Asian British: Indian | 10 | 8 |
| Asian or Asian British: Pakistani | 36 | 27 |
| Asian or Asian British: Bangladeshi | 3 | 2 |
| Any other Asian Background | 1 | 1 |
| Black or Black British: Caribbean | 26 | 20 |
| Black or Black British: African | 12 | 9 |
| Other Black Background | 2 | 2 |
| Chinese | 10 | 8 |
| Any other Background | 0 | 0 |
| No Ethnicity Specified | 2 | 2 |
| Total | 132 | 100 |

- In addition, the table below shows that the breakdown of Non-white consultation participants by ethnic background compares well with the UK Non-White population figures.

| Ethnicity | Totals | Percentage of Non-White Sample (102) | Percentage of UK Non-White population (4.6 million) |
|------------------------|---------------|---|--|
| Mixed | 2 | 2 | 15 |
| Asian or Asian British | 50 | 49 | 50 |
| Black or Black British | 40 | 39 | 25 |
| Chinese | 10 | 10 | 5 |
| Any other Background | 0 | 0 | 5 |

- However, whilst this data is an interesting comparison, it should be borne in mind that 45% of the UK Non-white population live in London and less than 10% live in the Yorkshire & Humber region.

Dissemination Events

In total, **53** people attended the Dissemination events

- The gender profile of participants was slightly more biased towards women:
 - 42% male vs 58% female
- Once again, a good spread of ages was achieved, with the majority aged over 50:
 - Over half were aged over 60 (53%), around one in six were 51-60 (15%) and almost one in three were 50 or younger (28%)

| Age | MALE | FEMALE | TOTAL | Percentage of Sample |
|-----------------------------|-----------|-----------|------------|----------------------|
| Under 21 | 0 | 0 | 0 | 0 |
| 21- 30 | 2 | 1 | 3 | 6 |
| 31- 40 | 3 | 3 | 6 | 11 |
| 41- 50 | 2 | 4 | 6 | 11 |
| 51- 60 | 4 | 4 | 8 | 15 |
| 61- 70 | 9 | 14 | 23 | 43 |
| 71- 80 | 2 | 3 | 5 | 9 |
| 81-90 | 0 | 0 | 0 | 0 |
| Over 90 | 0 | 0 | 0 | 0 |
| No age Specified | 0 | 2 | 2 | 4 |
| Total | 22 | 31 | 53 | 100 |
| Percentage of sample | 42 | 58 | 100 | |

- The dissemination monitoring data also shows that a good cross-section of participants was achieved in terms of their ethnicity.
 - Over eight in ten participants (83%) were from a non-white ethnic background (see table overleaf):

| Ethnicity | Totals | Percentage of Sample |
|-------------------------------------|---------------|-----------------------------|
| White British | 8 | 15 |
| White Irish | 0 | 0 |
| Gypsy or Traveller | 0 | 0 |
| Other White | 0 | 0 |
| Mixed: White and Caribbean | 0 | 0 |
| Mixed: White and Black African | 0 | 0 |
| Mixed: White and Asian | 1 | 2 |
| Any Other Mixed Background | 0 | 0 |
| Asian or Asian British: Indian | 33 | 62 |
| Asian or Asian British: Pakistani | 4 | 8 |
| Asian or Asian British: Bangladeshi | 1 | 2 |
| Any other Asian Background | 0 | 0 |
| Black or Black British: Caribbean | 0 | 0 |
| Black or Black British: African | 2 | 4 |
| Other Black Background | 1 | 2 |
| Chinese | 0 | 0 |
| Any other Background | 2 | 4 |
| No Ethnicity Specified | 1 | 2 |
| Total | 53 | 100 |

- The table below shows that the breakdown of Non-white consultation participants by ethnic background shows there were a higher proportion of Asian participants compared to the UK Non-White population figures:

| Ethnicity | Totals | Percentage of Non-White Sample (44) | Percentage of UK Non-White population (4.6 million) |
|------------------------|---------------|--|--|
| Mixed | 1 | 2 | 15 |
| Asian or Asian British | 38 | 86 | 50 |
| Black or Black British | 3 | 7 | 25 |
| Chinese | 0 | 0 | 5 |
| Any other Background | 2 | 5 | 5 |

- Once again, whilst this data is an interesting comparison, it should be borne in mind that 45% of the UK Non-white population live in London and less than 10% live in the Yorkshire & Humber region.

4.1.2 Consultation and Dissemination Events: Evaluation Results

In total, across all ten events, **108** evaluation forms were received.

Given that the questions were similar across all the events and the sample sizes for individual events were small (and some consultation events did not utilise the evaluation forms), the evaluation results for both the consultation and dissemination events are reported on here together.

Participants were asked to assess the events in the following ways:

- Rate the event in terms of suitability of the venue, the quality of refreshments/lunch and the organisation. They were also asked to give a score for their overall impression of the event.
- Articulate what they enjoyed most and least about the event, whether the event was useful/relevant to them and to give any other comments.
- Those attending the dissemination events were also asked to provide comments on the speaker's presentation.

Rating of the events

- Encouragingly, the majority of participants (74%) came away with a **good overall impression** of the event they had attended.
 - And although one in eight (12%) gave the event an 'ok' rating, no-one rated the events as 'poor'.

| Base: 108 respondents | Overall impression | Suitability of the venue | Organisation of event | Quality of refreshments / lunch |
|-----------------------|--------------------|--------------------------|-----------------------|---------------------------------|
| Very Good | 36% | 49% | 39% | 33% |
| Good | 38% | 38% | 46% | 47% |
| OK | 12% | 13% | 12% | 6% |
| Poor | 0 | 0 | 2% | 0 |
| Very Poor | 0 | 0 | 0 | 0 |
| No answer* | 14% | 0 | 1% | 14% |

* The 'no answers' were spread across all events

- Everyone was happy with the **suitability of the venues** for the events and half the participants rated their venue as 'very good'.
 - The one comment received at this question about venues mentioned that it was *'nice to have natural light'*.

- The **organisation** of the event was well rated by most, with 85% saying it was either 'very good' or 'good'.
 - One in eight gave an 'ok' rating for organisation, but 2 people did rate it as 'poor'.
- In terms of the **quality of refreshments** and/or food, the majority (eight in ten) felt this was either 'very good' or 'good'. Just 6% gave an 'ok' rating and the remainder did not give a rating.
 - There was only one comment and this was from someone who was unable to rate this aspect as they were *'fasting – so I couldn't eat'*.

In order to obtain more detailed reactions to the events, participants were also asked to complete several open-ended questions which allowed them to respond freely, in their own words.

Most enjoyable elements

The majority of participants made a comment in this section.

- The **interactive sessions** were very well received.
 - Around half of the participants cited the workshops and discussion sessions as being most enjoyable
 - '...getting to know other people's point of view'*
 - '...good opportunity to share experiences/discuss issues'*
 - 'The chance to add my views'* *'Open discussion/around the table'*
 - 'Good discussion and information sharing'*

| What did you ENJOY MOST about the event and why? (All mentioned by 2 or more people) | No. of people mentioning this |
|--|-------------------------------|
| Workshops & discussion: sharing & airing views / learning from each other / feeding into process / group participation | 51 |
| Meeting people and networking | 30 |
| Presentations and speakers | 12 |
| Well-structured and informative: covered all topics / lots of information | 12 |
| Focused on needs/how services can support & signpost | 3 |
| Hearing people's experiences (i.e. older people & service users) | 3 |
| Good facilitation | 3 |
| Length of the sessions (i.e. not too long) | 2 |
| Relevant questions asked | 2 |
| Finding out about BME issues and services available | 2 |
| An important topic / all need to focus on this | 2 |
| The findings | 2 |
| Refreshments | 2 |
| Had an interpreter so it was interesting | 2 |
| Everything | 2 |

- Another important element was the ability to **meet and network** with people (mentioned by just over one in four participants). This included meeting both staff from other organisations and older BME service users themselves.
'Meeting people from other organisations and authorities'
'Opportunity to network at a regional level' ...meeting a mix of people...'
'Interaction with others from different areas of the health profession'
- One in nine stated they enjoyed the **presentations and speakers** and a similar proportion found the events **well-structured and informative**.
'Very good presentation' 'Speakers'
'Presentation laid out the project well'
'Well structured – covered many points' 'All of it very informative...'
- Many other participants cited a variety of elements as being enjoyable and those mentioned by at least 2 or more people are included in the table above.
 - Some centred around the more **practical running and logistics** of the event (e.g. positive comments on the facilitation and length of the sessions, refreshments and the availability of interpreters)
 - Others focussed more on the **content of the sessions** (e.g. the ability to hear direct from service users, being able to find out about the issues and services available and the fact that it is an important issue that needs to be focussed on)

Reaction to Speaker's Presentation (Dissemination events only – 39 forms completed)

Almost half of those completing an evaluation form for their dissemination event chose to comment on the speaker's presentation (18 out of 39) and all of these comments were positive.

- Most (11 out of 18) simply stated that the presentation was *'Excellent / Very Good / Good'*
- Three mentioned the information element: *'Very informative / Great information'*
- The other comments included: *'Very relevant', 'To the point', 'Interesting' and 'Well delivered'*
 - One participant mentioned that they would have liked notes from all the presentations.
 - N.B. It is worth noting that two people said they would have preferred a translation/interpreter. However, it was explained that, unfortunately, the interpreter scheduled for them did not turn up for that event. However, this highlights the importance of having the relevant interpretation facilities arranged for events such as these.

Least enjoyable elements

Only around two in five participants made a comment in this section.

- Most comments centred on the more **practical, venue related issues** – which highlights the importance of selecting the right venue and considering other practicalities (such as parking, childcare etc):
 - Six people mentioned the sessions were noisy and a couple of these mentioned that their session was disturbed by children being present (perhaps due to childcare issues).
 - In terms of logistics, a few had problems with arrival times and dates changing. And although someone mentioned there was not enough time, another participant was angry as they got a parking ticket (suggesting the session may have lasted longer than anticipated, or perhaps parking facilities were not adequate).
 - Others mentioned comfort issues with the rooms (e.g. it was too cold, not enough fresh air) and the general set up of the venue.

| What did you ENJOY LEAST about the event and why? (All mentions) | No. of people mentioning this |
|---|-------------------------------|
| Noise/disturbance: Children at the event / movement of delegates / lots of conversations so difficult to hear | 6 |
| Logistical issues: Arrived too early (date moved/wrong info supplied) / got a parking ticket / time was too short | 6 |
| Other venue related issues: Temperature issues (e.g. too cold) / way meeting was set up / presenter stood in front of screen) | 7 |
| Discussion: Talking to different people / feedback sessions /talking about ideas together | 4 |
| Some questions confusing & others repeated/overlapped | 4 |
| Speakers (e.g. not all could not be heard clearly) | 3 |
| Inability to answer specific queries or signpost / lack of information | 3 |
| More people would be nice/expected more people | 2 |
| More interaction needed / not very 'active' | 2 |
| No new learning / identified issues already known | 2 |
| It's a start | 1 |
| One group discussion was dominated by a single participant | 1 |
| Should be more focus on specific communities (e.g. Eastern European) | 1 |

- Interestingly, some people mentioned the **discussion** element as their least favourite part of the event e.g. *'Talking to different people'*. This is a more personal issue as some people are naturally less comfortable in group situations, but it highlights the importance of having good facilitation at these events to put all participants at their ease.

- A few were critical of the discussion **questions** that were used, for example saying they were repetitive or had two questions in one:
‘Some questions were double-headed which confused people’
‘Some of the questions didn’t promote discussion – closed yes/no’
- A variety of other issues were mentioned ranging from comments on the event itself (*‘speakers could not all be heard clearly’* and *‘more interaction would have been good’*), through to thoughts on issues to address in future (*‘expected more organisations to participate e.g. social services, police’* and *‘the learning wasn’t new – presenting to the converted – a problem for us all, not just this event’*).

All comments have been incorporated in the table above.

Usefulness/Relevance of the event

The majority of participants answered this question but, despite inviting open-ended responses, the way this question was phrased meant that most gave a simple ‘yes/no’ reply.

- Most participants said ‘yes’ – so given the question asked about both **usefulness and relevance**, we must assume they agreed both were true.
 - Thirteen people said it was *‘very useful’* or *‘useful’* (but did not say relevant)
 - And a couple stated that it was relevant (but did not say useful)
‘Relevant, but of limited use’

| Was the event USEFUL/RELEVANT for you? (All mentions) | No. of people mentioning this |
|--|-------------------------------|
| Yes | 64 |
| Fairly/Some of it | 4 |
| Useful | 13 |
| Relevant | 2 |
| No | 1 |
| Very informative: Have greater understanding of BME issues / different ideas / addresses social issues & BME needs | 10 |
| Thought provoking: Made me think / think differently / challenging | 4 |
| Interesting: Lots of good ideas / examples of good practice / different ideas | 3 |
| Will assess from feedback / when information has been used | 3 |
| Need to advertise to other BME groups / engage with under-represented groups | 3 |
| Believe the audit tool could be piloted in NHS | 1 |
| Will take feedback back to my organisation | 1 |
| For meeting people and networking | 1 |
| Some parts not relevant to my role | 1 |

- Some explained that the **information** element was important to them
'Information about 50+s'
'Further improved my knowledge of BME services'
'All of it very informative and challenges group'
- A few said the event was **thought-provoking** and **interesting**:
'Opened my mind to BME issues / thought-provoking'
'Made me think about possible changes & ways of how we promote our services to BME communities...'

All comments are incorporated in the table above.

Other Comments

Once again, only around two in five participants made a comment in this section. But when given the chance to have their final say the comments were much more varied.

- One in ten simply made a **positive comment** about the event, such as *'very good'* or *'thank you'*
- A further one in ten took the opportunity to give **ideas or suggestions** that would be useful to bear in mind for future sessions. These can be grouped as follows:
 - Be aware of potential issues for the participants, e.g.
'No children next time'
'Move around more, rather than all sessions in one location'
'Bear in mind religious festivals, school holidays, etc'
'Use more accessible language (e.g. 'audit tool')'
 - Suggested improvements to the practical sessions, e.g.
'Key points from workshop component could have been written down so to draw everyone back to the area of focus'
'A copy of the discussion questions would have been useful'
'Develop questions with BME older people beforehand'
'Shorter feedback from the chair'
'Would like to see reference to evidence based good practice'
'Attach to/joint working with universities'
- Several participants wanted **continued involvement** in some way:
'Would like more networking events'
'Hope we have more regular events'
'If I/we can help with anything from the Bradford experience, please ask'
'Would be delighted to be invited to future events to learn more'
- Others were looking forward to getting the results of the sessions or the report/some feedback:
'Can we have a follow-up?'
'Feedback will be great'
'Look forward to the assessment and good practice guide, plus the evaluation from the event'

The table below lists all comments made by more than one participant:

| Any other comments? (All mentioned by more than one participant) | No. of people mentioning this |
|--|-------------------------------|
| Excellent / very good / well done / thank you | 11 |
| Ideas/suggestions given for future events | 10 |
| Future involvement: Would like to be involved in future events / more networking wanted / regular forums | 9 |
| Requests for feedback/results: Would like follow-up session / waiting for report or feedback | 7 |
| Excellent trainer/facilitator/organisation | 3 |
| Wanted more information: e.g. on toolkit / in the packs, shared list of attendees etc | 3 |

4.2 Training Sessions

In March and early April 2010 three training sessions were held in Leeds and Hull with a target of training Later Matters Advisers (or Auditors) from 8 organisations.

In total **21** people, representing **15** different organisations (both statutory and third sector), attended a training session – exceeding the original target.

As with the Consultation and Dissemination events, in order to monitor the profile of attendees at the training sessions, all participants were asked to complete an Equalities Monitoring Form. In addition, they were also asked to complete a Training Evaluation Form.

This section highlights the findings from the analysis of these forms.

4.2.1 Training Sessions: Equalities Monitoring Results

These results are based on the 21 people attending the training sessions. Due to this small sample size, actual figures are quoted – not percentages.

- Slightly more women have received the training to date:
 - 13 female attendees vs 8 males
- All trainees were aged between 21-60:
 - Most were aged between 31-50 (11 trainees out of 21)
 - Four trainees did not state their age

| AGE | MALE | FEMALE | TOTALS |
|------------------|----------|-----------|-----------|
| Under 21 | 0 | 0 | 0 |
| 21- 30 | 0 | 2 | 2 |
| 31- 40 | 3 | 3 | 6 |
| 41- 50 | 2 | 3 | 5 |
| 51- 60 | 2 | 2 | 4 |
| 61- 70 | 0 | 0 | 0 |
| 71- 80 | 0 | 0 | 0 |
| 81-90 | 0 | 0 | 0 |
| Over 90 | 0 | 0 | 0 |
| No age Specified | 1 | 3 | 4 |
| Total | 8 | 13 | 21 |

- The training monitoring data also confirms that a good cross-section of trainees were from non-white ethnic backgrounds.
 - Whilst half classified themselves as White British (11 trainees), around a quarter said they were Asian or Asian British (5 trainees) and a similar proportion said they were Black or Black British (4 trainees).

| Ethnicity | Totals |
|-------------------------------------|-----------|
| White British | 11 |
| White Irish | 0 |
| Gypsy or Traveller | 0 |
| Other White | 0 |
| Mixed: White and Caribbean | 0 |
| Mixed: White and Black African | 0 |
| Mixed: White and Asian | 0 |
| Any Other Mixed Background | 0 |
| Asian or Asian British: Indian | 2 |
| Asian or Asian British: Pakistani | 1 |
| Asian or Asian British: Bangladeshi | 1 |
| Any other Asian Background | 1 |
| Black or Black British: Caribbean | 3 |
| Black or Black British: African | 1 |
| Other Black Background | 0 |
| Chinese | 0 |
| Any other Background | 1 |
| No Ethnicity Specified | 0 |
| Total | 21 |

4.2.2 Training Sessions: Evaluation Results

Evaluation forms were received from all **21** trainees. But, as with the equalities monitoring results, due to this small sample size the actual figures are quoted here – not percentages.

Participants were asked to assess the events in the following ways:

- Rate the training in terms of suitability of the venue, the quality of refreshments/lunch and the organisation. They were also asked to give a score for their overall impression of the training.
- Articulate what they enjoyed most and least about the training, whether the training was useful/beneficial to them, whether they feel confident in using the progress measure and conducting reviews and to give any other comments.

Most enjoyable elements

All participants made a comment in this section and although they phrased things differently, some of these comments can be grouped as follows:

- Several trainees mentioned the **discussions and sharing of ideas** as being most enjoyable:

'...sharing good practice with other organisations'
'Discussions' 'Sharing info'

| What did you ENJOY MOST about the training and why? | No. of people mentioning this |
|---|-------------------------------|
| Discussions/Sharing ideas | 6 |
| Meeting/interacting with people from other organisations | 6 |
| Training style | 5 |
| Information/insight/learning | 4 |
| Relaxed/informal atmosphere | 3 |
| Able to relate to auditing their own service | 1 |
| Everything | 1 |

- As seen in the consultation and dissemination event evaluation, **meeting and networking** with people in similar organisations is also important for some:

'The opportunity to meet people from other organisations...'
'Interaction with other service providers'
'...meeting other agencies'

- And others specified the **training style** as being enjoyable, for example the *'scenarios used'*, *'role play'* and *'interactive exercises'*.

- A few commented on the **information and insight** they have gained:

'..informative'
'Finding out about the later matters project and understanding good practice guidelines'

- And some appreciated the **relaxed/informal atmosphere**:

'Informal aspect of the training...' *'...and relaxed'*

Least enjoyable elements

Only six comments were made in this section.

- Two people (from separate sessions) mentioned the amount of documentation there was to read:

'Reading through the good practice guide was difficult in the environment'
'Not enough time to read documents'

- Another admitted they had felt a *'bit confused in the morning session'* and one said they would have preferred 'fuller' scenarios *'rather than allowing for subjective discussion'*
- And in terms of practicalities, one trainee mentioned the *'layout of the seating'* and another cited the travelling: *'travelling to and from (my own choice due to availability)'*

Usefulness/Benefit of the training

Almost all trainees answered this question but, despite inviting an open-ended response, the way this question was phrased meant that most gave a simple 'yes/no' reply.

- Most participants said 'yes' – so we must assume they agreed the training was both useful and beneficial to them
- The remainder either stated that the training was useful or beneficial:

| Was the training USEFUL/BENEFICIAL for you? | No. of people mentioning this |
|---|-------------------------------|
| Yes | 13 |
| Useful/Very useful | 3 |
| Very beneficial | 3 |

Confidence

Once again the majority of participants answered this question but it also invited a simple 'yes/no' reply, although in this instance some trainees did elaborate.

- Around half the trainees said they would feel confident in using the progress measure and conducting reviews. One of these said they would feel confident *'after a dummy run'* and another said they would *'appreciate more support in the future'* and *'will do after I've digested the good practice'*

| Do you feel CONFIDENT in using the progress measure and conducting reviews? | No. of people mentioning this |
|---|-------------------------------|
| Yes | 9 |
| Fairly confident | 3 |
| No / Not really | 2 |
| Further training required | 2 |
| Other responses | 3 |

- Two admitted they did not feel confident, three others were less sure saying *'fairly'*, *'a bit'* and *'with a little practice'* and two openly requested more guidance: *'would like more training'* and *'may need another session'*

- A couple of the 'other' responses suggest concerns about actually undertaking a review:

'I feel comfortable with the process and paperwork'
'In most situations I would need a lot of preparatory work if assessing 'x' – mainly because I am slightly distrustful of them'
'Slightly less comfortable conducting a review'

Other Comments

Less than half took the chance to have a final say in this section and these comments were quite varied – ranging from praise for the organisation of the day through to a call to working hard in future.

- All comments are listed here:

'Good pace, informative and relevant'

'Great idea to have the toolkit backed up by advisers'

'Enjoyable course'

'The day was beneficial and I learnt a lot. This will help me in my own organisation in working effectively with BME older people'

'Experience will help'

'Will pilot in-house first'

'Let's work hard and face any challenges'

It is worth noting that one trainee, who had booked on to the course the day before at the recommendation of a colleague, had not realised they were going to be trained as an adviser (they thought it was going to be an 'information' session). Nevertheless, they were positive about the day.

4.3 Database and Discussion Forum on the BME pages of the Age Concern Yorkshire & Humber website

4.3.1 Database

| Database Targets | Output Indicators | Outcomes / Achievements |
|--|--|---|
| Creation of database – developed and available on the regional website. | Available by Dec'09 | ✓/✗ Database available – but from early March 2010 |
| Database to contain at least 50 organisations who work with BME older people | At least 50 organisations included on the database | ✓ 61 organisations on the database in May (with correct details and signed consent forms) – exceeding the original target. |
| Aim to encourage organisations and individuals to make use of the database | Achieve 100 hits to the website per quarter | ✓ 281 page views recorded for the database on the website between 22 nd March – 16 th May 2010. Target of 100 hits per quarter exceeded for Q1 (March – May) |

As part of the overall project, to help non-specialist information and advice services signpost older BME people more effectively and provide information on available services to BME older people, the initial plan was to create a **database** of at least 50 organisations who work with older BME people.

Development of the database was deferred to Quarter 3 of the project and it has been available on the BME pages of the Age Concern Yorkshire & Humber website since March 2010. The database will be further developed in Year 2 of the project.

Initially, 140 organisations were identified by Age Concern Sheffield for inclusion on the database. The database currently contains the details of **61** organisations – exceeding the initial target – each with the correct information and signed consent forms in place. In Year 2 the focus will be to ensure details for the remaining organisations are confirmed, and consent forms signed, to enable them to be included on the database as well. This process has already started and consent forms are being chased.

In addition, all organisations on the database have been sent a letter to inform them that the database is live on the website and the database was also promoted at the consultation, dissemination and training events held in March and April.

In terms of usage, web analytics information has been provided by Age Concern Yorkshire & Humber and this shows that the database webpage has been viewed 281 times between 22nd March and 16th May 2010:

| Week | Database (Page Views) |
|--|--------------------------|
| 22 nd – 28 th March | 86 |
| 29 th March – 4 th April | 108 |
| 5 th – 11 th April | 16 |
| 12 th – 18 th April | * |
| 19 th – 25 th April | 10 |
| 26 th April – 2 nd May | 26 |
| 3 rd – 9 th May | 1 |
| 10 th – 16 th May | 34 |
| TOTAL | 281 |

* No data available

The initial flurry of hits in March has slowed down, but no particular pattern is emerging as yet. Requests have also been received from about 8 organisations to update details on the database and add services (e.g. Advocacy Support Leeds & Leeds Health for All), which further demonstrates that the database is being used.

However, the importance of continuing to promote this new service consistently, whilst it becomes more established, should be highlighted.

In addition, it is possible that the link to the database is being over-looked. It is currently placed at the bottom of the left-hand navigation panel on the BME webpage – which necessitates scrolling down to locate it.

Suggestion:

- Add a clear link to the database at the top of the BME webpage to make it easier for visitors to the site to find it.

4.3.2 Discussion Forum

| Discussion Forum Targets | Output Indicators | Outcomes / Achievements |
|--|---|---|
| Create discussion forum for BME older people and service providers for the exchange of good practice | Available by Jan'10 | ✓ Discussion forum available from January 2010 |
| Aim to encourage organisations and individuals to make use of the discussion forum | Achieve 100 hits to the webpage per quarter | ✓ 129 page views recorded for the BME pages on the website between 22 nd March – 16 th May 2010. Target of 100 hits per quarter exceeded for Q1 (March – May). |
| | 5 discussion threads established in first month. Plus 5 new threads per quarter | ✗ There have been 0 threads so far. There are plans to focus on promoting this resource in Year 2 of the project. |

In addition to the database, a **discussion forum** for BME older people and service providers to exchange good practice was planned. This forum has been available on the BME pages of the Age Concern Yorkshire & Humber website since January 2010. So far it has been promoted during the consultation, dissemination and training events held for the progress measure and good practice guidance, and also through phone calls to organisations on the database.

Between 22nd March and 16th May the BME pages of the Age Concern Yorkshire & Humber website have been viewed 129 times:

| Week | BME Pages (Page Views) |
|--|------------------------|
| 22 nd – 28 th March | 54 |
| 29 th March – 4 th April | 13 |
| 5 th – 11 th April | * |
| 12 th – 18 th April | 9 |
| 19 th – 25 th April | 16 |
| 26 th April – 2 nd May | 19 |
| 3 rd – 9 th May | 18 |
| 10 th – 16 th May | * |
| TOTAL | 129 |

However, no discussion threads have been started as yet, which shows visitors are not actively participating in the discussion forum.

The project team are already planning further promotion of the discussion forum for Year 2 of the project, with the development of a specially designed mouse mat publicising the online resources. The plan is to distribute this mouse mat to third sector and public sector organisations across the region.

But apart from awareness of the forum, there are a couple of other possible reasons for this lack of participation:

- The link to the Discussion Forum is not very prominent. It is placed at the bottom of the left-hand navigation panel on the BME webpage – which necessitates scrolling down to locate it.
- A username and password is required to enter the forum. Whilst important, this may cause problems if people do not have this information to hand at the time. But it is also not possible to see what sort of content might be available in the forum.

Suggestions:

- Add a clear link to the discussion forum at the top of the BME webpage - to make it easier for visitors to the site to find it.
- Clearly state in the promotional materials the key benefits of taking part in the discussion forum and what topics can be included.

4.4 Participant Feedback

To assess the **impact** of the project so far among participating organisations, along with their level of involvement, a short self-completion postal questionnaire was designed.

The questionnaire was circulated in mid-April to 137 people from organisations that were on the database and/or had taken part in the consultation, steering committee or training sessions. These people represented around 100 different organisations. Response rates to postal surveys can range between 10%-40%. The length and complexity of a survey, including a reply-paid response vehicle and whether an incentive is included (e.g. a Prize Draw) can all have a big impact on response, but as a general rule you could expect up to one in three postal questionnaires to be returned.

By the 17th May 2010 we had received 32 completed questionnaires which is a response rate of 23%. The questionnaire was fairly short and a reply-paid envelope was included, but no incentive was provided, so this represents a fairly good response rate and has provided a reasonable number of responses to report on.

4.4.1 Respondent Profile

The survey respondents came from a variety of different organisations. Three out of four represented community and voluntary organisations, six people were representing Age Concern organisations and a further five came from statutory sector service providers:

| What sort of organisation is this? | 32 | % |
|--|----|----|
| Community/Voluntary organisation providing services for a specific BME community or communities (any age groups) | 9 | 28 |
| Community/Voluntary organisation providing services to older people (not Age Concern) | 6 | 19 |
| Voluntary sector organisation providing specialist services (e.g. for housing, cancer care, disability, mental health etc) to all sectors of the community | 4 | 13 |
| Other Community/Voluntary Organisation | 5 | 16 |
| Refugee community organisation (RCO) | 0 | 0 |
| Age Concern organisation | 5 | 16 |
| Age Concern group | 1 | 3 |
| Statutory sector service provider | 5 | 16 |
| Other type of organisation (please write in): | 4 | 13 |
| No answer | 1 | 3 |

The 'other' organisations were described as 'Housing (ALMO)', a 'statutory sector advisory body', a 'regional *voice* of the voluntary and community sector' and a 'community/voluntary organisation providing infrastructure support to disabled and other disadvantaged groups'.

4.4.2 Involvement with the Later Matters project

- The **majority** of respondents have been **actively involved** with the Later Matters project.
 - Over half had participated in the consultation events (19 out of 32) and around a third said their organisation has been included on the database (10 out of 32). Four had been members of the Steering Committee:

| Firstly, in what way(s) has your organisation been involved so far with the 'Later Matters' project? | | |
|--|-----------|----------|
| | 32 | % |
| Member of the Steering Group ... | 4 | 13 |
| Participation at consultation event(s) ... | 19 | 59 |
| Included on the database of services for BME older people... | 10 | 31 |
| Any other way (Please write in) ... | 5 | 16 |
| DK/Not stated | 1 | 3 |

- Other ways individual respondents claim to have been involved included: 'receiving a 'Later Matters' booklet with no direct involvement', 'attending a training event' (as opposed to a consultation) and receiving a 'personal invitation to attend'. And one other respondent expressed a further level of involvement as they are 'welcoming BME older people into the Healthy Living Centre'.
- Encouragingly, four out of five respondents felt that their involvement with the Later Matters project has been a **positive experience** overall.
 - The remaining respondents were neutral and no-one said they felt it had been a negative experience for them:

| And do you feel your involvement in the 'Later Matters' project has been a positive or negative experience overall? | | |
|---|-----------|----------|
| | 32 | % |
| A mainly positive experience ... | 26 | 81 |
| Neither positive or negative ... | 6 | 19 |
| A mainly negative experience ... | 0 | 0 |

- In addition, seven in ten respondents said they would be willing to be re-contacted for further research, which also demonstrates a positive level of involvement with this project:

| And finally, would you be willing to be contacted, by telephone, for further research about any of the topics covered in this interview? | | |
|---|-----------|----------|
| | 32 | % |
| Yes ... | 22 | 69 |
| No ... | 8 | 25 |
| No answer ... | 2 | 6 |

- Results indicate **low usage levels** for the BME information on the Age Concern Yorkshire & Humber website
 - The majority of respondents (69%) had not accessed the BME pages of the Age Concern Yorkshire & Humber website at the time of completing the survey – although all but one of these said they do plan to do so:

| Have you accessed and used the information on the BME pages on the Age Concern Yorkshire & Humber website? | | |
|---|-----------|----------|
| | 32 | % |
| Yes, already accessed and used the website/information... | 2 | 6 |
| Yes, already accessed the website, but have not yet used the information... | 8 | 25 |
| No, have not accessed the website but we are planning to... | 21 | 66 |
| No, have not accessed the website and have no plans to... | 1 | 3 |
| Don't know ... | 0 | 0 |

- Only two respondents had accessed the website and used the information; a further eight had accessed the website but not used the information yet.
- Comments from those who had accessed the website were generally positive, although a couple mentioned that the database needs more entries:

“Will be a useful tool when all cities/areas of the region are added to the database”

“Useful information – but much more mapping of organisations/services is required”

“Has a positive impact on BME groups and organisations in the area”

“User friendly – good navigation – basic information”

“Very good and useful”

- With regards to using the progress measures and good practice guidance over the next year and getting training, **the low intention levels** along with the relatively high proportion of respondents who did not know, suggest further publicity for the tool and the training sessions is required
 - Whilst over half of respondents (56%) intend to use the progress measures and good practice guidance over the next year, only around one in five (22%) have definite plans to do so:

| How likely are you to use the progress measures and good practice guidance within your service or organisation during the next year (2010-2011)? | | |
|---|-----------|----------|
| | 32 | % |
| We will definitely use them ... | 7 | 22 |
| We will probably use them ... | 11 | 34 |
| We probably won't use them ... | 6 | 19 |
| We definitely won't use them ... | 0 | 0 |
| Don't know ... | 8 | 25 |

- One in five say they probably won't use the guidance (19%), but one in four do not know (25%).
- Only five organisations had already received training as advisers for the Later Matters project:

| And has your organisation been trained, or do you intend to get training, as an Adviser for the Later Matters project? | | |
|---|-----------|----------|
| | 32 | % |
| Yes, already trained as an Adviser ... | 5 | 16 |
| No, but we intend to get trained ... | 7 | 22 |
| No, and we have no plans to get trained ... | 8 | 25 |
| Don't know ... | 12 | 38 |

- One in five (22%) said that they intend to get training and a further one in four (25%) said they have no plans to do so. However, two in five respondents did not know – suggesting a need for further promotion of the training.

4.4.3 Impact of the Later Matters project

In order to monitor or measure the impact of the Later Matters project, respondents were asked to say whether they agreed or disagreed with a number of statements to do with the impact the project has had on them and/or their organisations (see results table overleaf).

- The project has performed well with regards to helping organisations **learn good practice** for working with BME elders
 - Three out of four respondents (75%) agreed they have learnt good practice for working with BME elders through this project.
 - However, just over one in five disagreed (22%).

- The project has also enabled organisations to **successfully network** with each other to some degree
 - Seven in ten respondents (69%) agreed that the project has enabled them to network successfully with other organisations; but only one in four agreed strongly (25%).
 - And just over one in five disagreed with this statement (22%).

- **Awareness of health and social care provision** for BME elders has increased as a result of involvement with the project, but there is still room for improvement on this measure
 - Two thirds of respondents (66%) agreed that they are now more aware of health and social care provision for BME elders in their region.
 - But one in four disagreed (25%).

- There has been some success in helping organisations to **understand the health and social care issues facing BME elders**, but it is perhaps too early to measure this
 - Six in ten respondents (59%) agreed that being involved with the project has fostered a greater understanding within their organisation of the health and social care issues of BME elders.
 - One in five disagreed (19%) but just over one in five could not say (22%), suggesting that it might be too early to measure this particular outcome

Still thinking about your involvement with the project and, more specifically, how it has impacted on your organisation. How much do you agree or disagree with each of the following statements?

| | I am/we are now more aware of health and social care provision for BME elders within my/our region | | This project has enabled me/us to network successfully with other organisations | | Through this project I/we have learnt good practice for working with BME elders | | Being involved in this project has fostered a greater understanding within our organisation of the health and social care issues of BME elders | |
|-----------------------|--|----|---|----|---|----|--|----|
| | 32 | % | 32 | % | 32 | % | 32 | % |
| Agree strongly... | 12 | 38 | 8 | 25 | 12 | 38 | 10 | 31 |
| Agree slightly ... | 9 | 28 | 14 | 44 | 12 | 38 | 9 | 28 |
| Disagree slightly ... | 5 | 16 | 6 | 19 | 4 | 13 | 4 | 13 |
| Disagree strongly ... | 3 | 9 | 1 | 3 | 3 | 9 | 2 | 6 |
| Don't know ... | 3 | 9 | 3 | 9 | 1 | 3 | 7 | 22 |

Finally, respondents were given opportunity to use the questionnaire to feed back any other comments about the Later Matters project.

Very few respondents took up this opportunity, but all were generally positive:

“Later Matters booklet is clear and comprehensive”

*“Will make the Community Engagement Officer aware of the project, website and publication
- it is likely to be of interest and, hopefully, inspiration”*

“Organise more events like the recent one in Leeds”

“The training was very well presented and supportive whilst taking place. My only concern was that it was not fully explained to me on invite the expectation to become an advisor and carry out assessments”

APPENDICES

Equalities Monitoring Data: Dissemination & Consultation Events

| Equalities Monitoring Form | Total Forms 53 | | | DISSEMINATION EVENTS | | | | | | | | | | |
|-----------------------------|-----------------------|-----------|------------|----------------------|--|--|--|--|--|--|--|--|--|--|
| Age | MALE | FEMALE | TOTAL | Percentage of Sample | | | | | | | | | | |
| Under 21 | 0 | 0 | 0 | 0 | | | | | | | | | | |
| 21- 30 | 2 | 1 | 3 | 6 | | | | | | | | | | |
| 31- 40 | 3 | 3 | 6 | 11 | | | | | | | | | | |
| 41- 50 | 2 | 4 | 6 | 11 | | | | | | | | | | |
| 51- 60 | 4 | 4 | 8 | 15 | | | | | | | | | | |
| 61- 70 | 9 | 14 | 23 | 43 | | | | | | | | | | |
| 71- 80 | 2 | 3 | 5 | 9 | | | | | | | | | | |
| 81-90 | 0 | 0 | 0 | 0 | | | | | | | | | | |
| Over 90 | 0 | 0 | 0 | 0 | | | | | | | | | | |
| No age Specified | 0 | 2 | 2 | 4 | | | | | | | | | | |
| Total | 22 | 31 | 53 | 100 | | | | | | | | | | |
| Percentage of sample | 42 | 58 | 100 | | | | | | | | | | | |

| Ethnicity | No Age Specified | Under 21 | 21-30 | 31-40 | 41-50 | 51-60 | 61-70 | 71-80 | 81-90 | Over 90 | Total | Percentage of Sample |
|-------------------------------------|------------------|----------|----------|-----------|-----------|-----------|-----------|----------|----------|----------|--------------|----------------------|
| White British | 1 | | 3 | 1 | 1 | 2 | | | | | 8 | 15 |
| White Irish | | | | | | | | | | | 0 | 0 |
| Gypsy or Traveller | | | | | | | | | | | 0 | 0 |
| Other White | | | | | | | | | | | 0 | 0 |
| Mixed: White and Caribbean | | | | | | | | | | | 0 | 0 |
| Mixed: White and Black African | | | | | | | | | | | 0 | 0 |
| Mixed: White and Asian | | | | 1 | | | | | | | 1 | 2 |
| Any Other Mixed Background | | | | | | | | | | | 0 | 0 |
| Asian or Asian British: Indian | | | | 1 | 3 | 2 | 22 | 5 | | | 33 | 62 |
| Asian or Asian British: Pakistani | | | | 2 | 2 | | | | | | 4 | 8 |
| Asian or Asian British: Bangladeshi | 1 | | | | | | | | | | 1 | 2 |
| Any other Asian Background | | | | | | | | | | | 0 | 0 |
| Black or Black British: Caribbean | | | | | | | | | | | 0 | 0 |
| Black or Black British: African | | | | | | 1 | 1 | | | | 2 | 4 |
| Other Black Background | | | | 1 | | | | | | | 1 | 2 |
| Chinese | | | | | | | | | | | 0 | 0 |
| Any other Background | | | | | | 2 | | | | | 2 | 4 |
| No Ethnicity Specified | | | | | | 1 | | | | | 1 | 2 |
| Total | 2 | 0 | 3 | 6 | 6 | 8 | 23 | 5 | 0 | 0 | 53 | 100 |
| Percentage of Sample | 4 | 0 | 6 | 11 | 11 | 15 | 43 | 9 | 0 | 0 | 100.0 | |

| Equalities Monitoring Form | Total Forms 132 | | | CONSULTATION EVENTS | | | | | | | | | | |
|-----------------------------|------------------------|-----------|------------|----------------------|--|--|--|--|--|--|--|--|--|--|
| Age | MALE | FEMALE | TOTAL | Percentage of Sample | | | | | | | | | | |
| Under 21 | 0 | 0 | 0 | 0 | | | | | | | | | | |
| 21- 30 | 0 | 3 | 3 | 2 | | | | | | | | | | |
| 31- 40 | 5 | 6 | 11 | 8 | | | | | | | | | | |
| 41- 50 | 4 | 10 | 14 | 11 | | | | | | | | | | |
| 51- 60 | 17 | 20 | 37 | 28 | | | | | | | | | | |
| 61- 70 | 18 | 15 | 33 | 25 | | | | | | | | | | |
| 71- 80 | 10 | 10 | 20 | 15 | | | | | | | | | | |
| 81-90 | 5 | 0 | 5 | 4 | | | | | | | | | | |
| Over 90 | 0 | 0 | 0 | 0 | | | | | | | | | | |
| No age Specified | 4 | 5 | 9 | 7 | | | | | | | | | | |
| Total | 63 | 69 | 132 | 100 | | | | | | | | | | |
| Percentage of sample | 48 | 52 | 100 | | | | | | | | | | | |

| Ethnicity | No Age Specified | Under 21 | 21-30 | 31-40 | 41-50 | 51-60 | 61-70 | 71-80 | 81-90 | Over 90 | Total | Percentage of Sample |
|-------------------------------------|------------------|----------|----------|-----------|-----------|-----------|-----------|-----------|----------|----------|------------|----------------------|
| White British | 4 | | | 3 | 7 | 8 | 2 | | | | 24 | 18 |
| White Irish | | | | | | | | | | | 0 | 0 |
| Gypsy or Traveller | | | | | | 1 | | | | | 1 | 1 |
| Other White | | | 1 | 1 | | 1 | | | | | 3 | 2 |
| Mixed: White and Caribbean | 1 | | | | | | | | | | 1 | 1 |
| Mixed: White and Black African | | | | | | | | | | | 0 | 0 |
| Mixed: White and Asian | 1 | | | | | | | | | | 1 | 1 |
| Any Other Mixed Background | | | | | | | | | | | 0 | 0 |
| Asian or Asian British: Indian | 1 | | | 1 | 3 | 4 | | 1 | | | 10 | 8 |
| Asian or Asian British: Pakistani | | | 1 | 2 | 2 | 10 | 10 | 7 | 4 | | 36 | 27 |
| Asian or Asian British: Bangladeshi | | | 1 | 2 | | | | | | | 3 | 2 |
| Any other Asian Background | | | | | 1 | | | | | | 1 | 1 |
| Black or Black British: Caribbean | | | | | 1 | | 17 | 8 | | | 26 | 20 |
| Black or Black British: African | 2 | | | | | 8 | 1 | | 1 | | 12 | 9 |
| Other Black Background | | | | 2 | | | | | | | 2 | 2 |
| Chinese | | | | | | 5 | 3 | 2 | | | 10 | 8 |
| Any other Background | | | | | | | | | | | 0 | 0 |
| No Ethnicity Specified | | | | | | | | 2 | | | 2 | 2 |
| Total | 9 | 0 | 3 | 11 | 14 | 37 | 33 | 20 | 5 | 0 | 132 | 100 |
| Percentage of Sample | 7 | 0 | 2 | 8 | 11 | 28 | 25 | 15 | 4 | 0 | 100 | |

Population Statistics

Population of the United Kingdom: by ethnic group, April 2001

| | Total population | | Non-white population |
|---------------------------------------|-------------------|---------------|----------------------|
| | (Numbers) | (Percentages) | (Percentages) |
| White | 54,153,898 | 92.1 | . |
| Mixed | 677,117 | 1.2 | 14.6 |
| Indian | 1,053,411 | 1.8 | 22.7 |
| Pakistani | 747,285 | 1.3 | 16.1 |
| Bangladeshi | 283,063 | 0.5 | 6.1 |
| Other Asian | 247,664 | 0.4 | 5.3 |
| All Asian or Asian British | 2,331,423 | 4.0 | 50.3 |
| Black Caribbean | 565,876 | 1.0 | 12.2 |
| Black African | 485,277 | 0.8 | 10.5 |
| Black Other | 97,585 | 0.2 | 2.1 |
| All Black or Black British | 1,148,738 | 2.0 | 24.8 |
| Chinese | 247,403 | 0.4 | 5.3 |
| Other ethnic groups | 230,615 | 0.4 | 5.0 |
| All minority ethnic population | 4,635,296 | 7.9 | 100.0 |
| All population | 58,789,194 | 100 | . |

Source: Office of National Statistics

