

## 'Reaching Out'

A report on the organisational and developmental needs of Black and Minority Ethnic Groups in Cheshire, Halton and Warrington

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Report produced by Navarro Training & Consultancy for Cheshire, Halton & Warrington Racial Equality Council

### **Foreword**

If we are really sincere about tackling race equality and community cohesion issues in Cheshire, Halton and Warrington we need to ensure that the right infrastructure is there to support BME communities and to respond to their needs. We need to do this by respecting the priorities of these communities and supporting their capacity to address these issues for themselves.

These priorities, however, are not explicit. Although some studies have been conducted at both local and national level, the needs of the BME sector have never been satisfactorily captured and the reports of these studies invariably sit on funders' shelves gathering dust.

We at CHAWREC wanted to change this situation. We know that the sector is dynamic with new communities emerging all the time. We also know that this diverse sector has struggled with investment. Therefore in order to strengthen the sector we needed an up-to-date account of the needs and aspirations of BME organisations and so with the help of Change Up monies we appointed consultants to conduct this assessment. The results are presented in this report.

The duty is on all of us- Public and Voluntary Sectors alike- to take these results and recommendations forward and we at CHAWREC are confident that eventually, with sufficient funding, a thriving and vibrant sector will emerge capable of taking charge of it's own destiny.

Let's make it happen!

T.K. Al-Jorani. B.Sc., M.Sc. Vice Chair CHAWREC

# 1 Background

Cheshire, Halton and Warrington Racial Equality Council (CHAWREC) is an anti racist voluntary organisation that aims to eliminate racial discrimination and promote equality of opportunity. It supports Black and Minority Ethnic (BME) groups and advises public and voluntary sector agencies on issues affecting BME community members. As an infrastructure organisation, CHAWREC is a member of the Cheshire and Warrington Change Up Consortium.

- 1.1 A key part of the Change Up agenda is concerned with recognising that many groups are prevented from achieving their potential because they cannot access the support and expertise they need to improve their services and expand their activities. There is evidence (as outlined in section 3) that this is further exacerbated for BME groups.
- 1.2 There was a perceived weakness in the evidence base across Cheshire, Halton and Warrington relating to the current position, experiences and future development needs of BME organisations. Therefore CHAWREC secured funding from the Cheshire and Warrington Change Up programme to deliver a project that would:
  - Develop an appropriate auditing process to assess the organisational and development needs of BME led Voluntary & Community Sector (VCS) groups that is capable of measuring progress over time
  - Research the BME VCS to assess their organisational and development needs and aspirations
  - Identify how key mainstream infrastructure organisations currently support the BME groups, the gaps in provision and the opportunities for providing support in the future
  - Produce development plans for five BME VCS groups

- 1.3 The report provides information on:
  - The background to the work (section 1)
  - An explanation of how the work was carried out (section 2)
  - The context that informed the work (section 3)
  - The needs assessment framework (section 4)
  - The profile of the BME sector in Cheshire, Halton and Warrington (section 5)
  - BME group development (section 6)
  - How the BME sector is currently supported (section 7)
  - Recommendations for the way forward (section 8)

## The Methodology

The methodology section outlines the approach taken to the work and the processes delivered.

- 2.1 In order to deliver the outcomes NTC made contact with thirty five BME groups, carried out twenty one needs assessments and produced four development plans. (See appendix 1 - for a breakdown of groups assessed).
- 2.2 As well as the face to face work, four resource sheets have been produced based on four common areas of need identified from the needs assessment and development work.

#### 2.3 The Process

**A. MAKING CONTACT:** Initial contact was made with all of the BME groups (listed in appendix 1) through the circulation of a letter inviting people to one of two networking events that were held in Chester and Warrington in February 2006. As well as the invitation letter, all of the BME groups on the list were contacted by telephone to remind them of the networking event and to provide a further opportunity for making contact. A total of 14 people attended the networking events in February 2006 representing 7 groups. The key outcome from the networking events was that a more flexible approach to the work was required. This was agreed and built into the subsequent plan for how the work was to be completed.

**B. NEEDS ASSESSMENT:** A tool was developed for assessing the needs of BME groups using the Assessing Community Strengths Framework as the basis (see appendix 2 for an overview of the framework and for the amended version used). Meetings were arranged with the BME groups to undertake the needs assessment with the majority of meetings taking place between February 06 and May 06. From each meeting a full record of the discussion was produced as well as a summary sheet outlining the key needs of the group.

**C. DEVELOPMENT PLANS:** Five groups were identified for further support and capacity building based on the following criteria: they expressed an interest in such support; they reflected the range of BME groups on CHAWREC's database of BME groups; or they were at the point in their development where further support and capacity building would aid their

progression. A key element of the support and capacity building was the facilitation by NTC of development days / sessions and the production of an action plan emanating from those days. (At the time of writing, four development plans have been completed and a fifth is in the early stages of development). See appendix 3 for list of groups.

**D. CAPACITY BUILDING SUPPORT:** A number of opportunities for supporting the BME groups were identified and delivered as part of the project. The capacity building support included:

- The development and delivery of training sessions (running meetings, governance and funding)
- Providing detailed advice and one to one support (undertaking consultations and funding)
- Signposting and providing information (identifying relevant council strategies, linking the BME group to other support and funding agencies)
- As well as the work directly with BME groups, infrastructure agencies and organisations who work with and provide support to VCS groups in general (referred to as support agencies in this report) and BME groups in particular were invited to a workshop held in June 2006. The aim of the workshop was to share the outcomes of the needs assessment of the BME groups and to enable the organisations and agencies present to share the support that is currently available across Cheshire, Halton and Warrington for BME groups and to consider what further support might be needed and could be provided.

# The Context for the Work

It is important that the experiences of BME groups and the sector in Cheshire, Halton and Warrington is understood as part of a broader context. This section therefore explores the national context before focusing on the local experience and the experience of BME groups and the BME sector

- 3.1 VCS NATIONAL CONTEXT: In recent years there have been a number of initiatives, directives and policies that recognise the key role of the voluntary and community sector in decision making and in public service delivery. This has included the Local Government Act 2000 and the Power of Well Being, the production of Community Strategies, the establishment of Local Strategic Partnerships and the development of local Compacts.
- 3.2 In 2002 HM Treasury's Cross Cutting Review recognised the important role that the voluntary and community sector infrastructure play in supporting frontline organisations (FLO) but found it to be patchy in coverage and quality and lacking sustainable funding, particularly at a local level.
- 3.3 In response to these identified needs, in June 2004, the government introduced Change Up. This outlined the expectations for Voluntary and Community Sector (VCS) infrastructure development. Change Up recognised that VCS activity is a crucial part of public life, connecting people and helping them to shape their communities, as well as recognising that FLOs often work with those most at risk of exclusion.
- 3.4 Change Up has a 10 year vision (to 2014) leading to VCS infrastructure and support that is capable of meeting the needs of FLOs. A key feature of this support is expected to be its ability to reflect and promote diversity.
- 3.5 Change Up is attempting to respond to and build on a number of focused areas of activity including: performance improvement, workforce development and leadership, ICT, governance, recruiting and developing volunteers and funding VCS activity.

- 3.6 **VCS LOCAL CONTEXT:** In Cheshire and Warrington (excluding Halton) it is estimated that there are between 4,000 6,000 VCS groups. Research at a local level has highlighted that there are a number of issues and challenges both for infrastructure organisations and frontline organisations.
- 3.7 A mapping report for the Cheshire and Warrington Change Up Consortium reported the following conclusions for the VCS in general:<sup>1</sup>
- For infrastructure organisations (IO) and front line organisations (FLO) the lack of sustainable funding is a key issue that impacts on their ability to think long term and plan strategically.
  - Quality management and organisational development can be left behind due to the need to deliver services.
  - The recruitment, retention and development of volunteers are a significant challenge.
  - The notion of equality and diversity and the implementation of interventions to ensure marginalised communities are involved do not appear to be high on people's agenda.
  - The geography and the size of Cheshire and Warrington impacted on service development and delivery.
  - Governance and the ability to attract retain and develop management committee members were a major issue.
- Impacting on the above in relation to the operation of and support delivered to BME groups is the relatively low numbers of BME community members living in Cheshire, Halton and Warrington. This has been recognised by the Home Office:<sup>2</sup>

"Different parts of the country have different levels of ethnic and cultural diversity. Sometimes the hardest job is persuading people, in areas of the country which are not very diverse...to see the other side of the story".

<sup>&</sup>lt;sup>1</sup> Cheshire and Warrington Change Up – Mapping project, final conclusions and recommendations, Feb 06

<sup>&</sup>lt;sup>2</sup> Home Office, July 04, New challenges for Race Equality and Community Cohesion in the 21st Century, p3

- 3.9 BME GROUPS AND SECTOR NATIONAL CONTEXT:
  - At a national level the Joseph Rowntree Foundation (JRF), 2001<sup>3</sup> recognised that in recent years there has been a growing interest in the role of black and minority ethnic led voluntary and community organisations. This reflected the increased policy recognition of the voluntary and community sector in general, the impact of the Stephen Lawrence Inquiry Report, which placed the issue of racial discrimination on the national agenda, and increased lobbying by BME umbrella organisations.
- 3.10 In trying to provide a picture of the sector the JRF (2001) found that there are around 5,500 BME VCS organisations currently operating in England and Wales with almost ninety percent of respondent organisations having a formal legal status and just over half with an annual income of between £50k and £250k. More than sixty percent had been in existence for 10 years or more and nearly a quarter owned their own premises.
- 3.11 Furthermore, JRF (2001) found that these organisations tend to serve mainly but not exclusively, particular minority ethnic communities, sometimes on a neighbourhood basis, but most often on a town or local authority basis. This reflects the fact that many originate from the network of cultural, religious, economic and kinship ties that bind black and minority ethnic communities together.
- 3.12 However, the BME Voluntary and Community
  Organisations Compact Code of Good Practice
  recognises that a number of key issues need to be
  addressed if the government and the sector is to engage
  effectively. These include:
  - A recognition of the significant role to be played by the BME voluntary and community sector in partnership with Government and others towards achieving race equality;
  - Improved quality and quantity of consultation and participation by the BME voluntary and community sector in policy development, implementation and evaluation;
  - Better support and resources to the BME voluntary and community sector so it can operate, develop and contribute on an equal footing with other partners,
- 3.13 **BME GROUPS AND SECTOR LOCALLY:** More locally however, research suggests a similar pattern.

- Infrastructure and support agencies would acknowledge an increasing need to work with and support BME groups but (as evidenced in the Change Up mapping work) very few of those organisations are taking active steps to engage with BME groups and in reality the actual promotion of race equality does not appear to be high on people's agenda.
- 3.14 Although only covering one area of CHAWRECs area of benefit – Warrington – a similar position was highlighted by EMICA in 2003 in a report produced for Warrington Multi Cultural Forum.<sup>4</sup> They concluded that:
  - 'although organisations were displaying an 'in principle' commitment to becoming more inclusive and responsive to the needs of BME communities in practice the translation of this commitment was at best ineffective and at worst non existent'.
- 3.15 Further conclusions from that report were raised time and again by BME groups, in an anecdotal manner, during the current research. This included a lack of information and appropriate knowledge within the BME sector, limited contact with mainstream agencies, lack of understanding of needs, issues and cultures, language barriers and a lack of a BME sector / BME infrastructure.
- 3.16 **THEMES FOR THE BME SECTOR:** Overall a review of the literature (both nationally and were available at a local level) has identified a number of issues that have implications for the development and future sustainability of BME groups and the BME sector.
- 3.17 There has been an acknowledgement that 'the social, community and economic experiences of BME communities are informed by systematic and institutional discrimination and that greater attention needs to be paid to BME communities by mainstream services'5. As well as this BME community members have shared experiences where mainstream services were often inappropriate for their needs and that services made assumptions based on stereotypes and prejudice about the needs of users.<sup>6</sup> A key part of the relationships that need to be developed is about communication and the literature highlights many cases of poor and inaccessible information along with ineffective consultation with BME communities and the use of inappropriate engagement methods. The Office of Deputy Prime Minister 2004<sup>7</sup> recognised that the process of engagement is unlikely to be successful

<sup>&</sup>lt;sup>3</sup> JRF, 2001, The role and future development of BME organizations cited as JRF 2001 throughout document

- through formal methods (e.g. surveys, focus groups) and there needs to be a strategy in place that utilises innovative and informal methods.
- 3.18 At a higher level of engagement, that of representation, BME organisations experience of local Compacts led them to feel marginal to local policy debates and not involved in influencing and setting strategic direction.<sup>8</sup>
- 3.19 Funding, as is the case with the broader VCS, is seen as a key challenge. Studies by Davis and Cooke, 2002, Farnell et al, 2003, and Chouhan, 2004 undertaken with the BME voluntary and community sector and faith groups found that small BME voluntary organisations find it difficult to access funding, particularly core funding, and the pursuit of grants takes up a disproportionate amount of time. The Compact for BME VCO organisations recognises that funding for the BME voluntary and community sector, whether from existing or new sources has been significantly below that of similar organisations in the mainstream voluntary and community sector.
- 3.20 Turning the focus away from BME groups and the BME sector towards statutory and infrastructure organisations, there is a general acceptance that there was a lack of official recognition of the work that BME groups do and a low level of awareness of the work being carried out by minority led groups<sup>9</sup>. Nationally Change Up has identified that there is limited ongoing relevant training given to people from statutory and generic infrastructure agencies on BME issues and there was a lack of investment in developing the BME skills base. This was a major factor in building the internal capacity of BME organisations.
- 3.21 Finally, Change Up recognises that faith is a crucial dimension to local BME communities and faith organisations should be included in engagement and representation.

<sup>&</sup>lt;sup>4</sup> Why can't you see me, EMICA & Warrington Multi cultural forum, November 2003

<sup>&</sup>lt;sup>5</sup> Strengthening community leaders in regeneration, JRF, July 2000

<sup>&</sup>lt;sup>6</sup> JRF 2001

<sup>&</sup>lt;sup>7</sup> ODPM - Race equality and Neighbourhood renewal - NRU, May 2004

<sup>&</sup>lt;sup>8</sup> JRF, 2002 BME organisations experience of local compacts, JRF, Community cohesion – our responsibility

<sup>&</sup>lt;sup>9</sup> JRF 2001

# Needs Assessment Framework

In developing the needs assessment framework it was recognised that it had to be capable of being replicated at regular intervals in order to assess the developmental needs of BME community organisations, including identifying any challenges or barriers that they may face.

- 4.1 A nationally recognised framework "Assessing Community Strengths<sup>10</sup> was therefore used as the basis for the needs assessment framework and adapted from its geographical focus to that of assessing the strengths and support needs of BME groups. The Framework considers the following four areas: Building Organisation, Building Skills, Building Equality and Building Involvement.
- 4.2 In order to identify the current position and future support needs, the group or organisations being assessed are assigned one of the five levels for each of the four areas, which can then be converted into an overall level for the group (an illustrative example is provided below and the full framework can be found in appendix 2).
- 4.3 In order to administer the needs assessment in conjunction and discussion with the BME groups, NTC produced 25 questions based around the 4 areas and 5 levels outlined in the framework (see appendix 4).

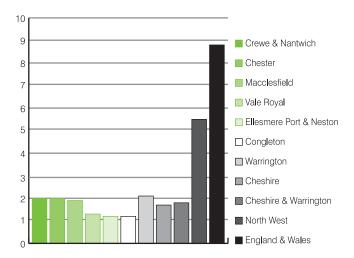
	Level 1	Level 2	Level 3	Level 4	Level 5
Building organisation	The group shows a very low level of organisation	There are informal links between community and voluntary sector groups	There are effective links with local support organisations	Joint working and links between other groups and the group are very effective	The group manages an array of successful projects and initiatives
<b>Building Skills</b>	There is little interest among the group in developing the skills of its members/wider community	There is some awareness of the training and learning opportunities available	The training needs of the group have been identified	Members of the group possess the skills to manage projects	The group is contributing effectively to local and regional development strategies and plans
Building Equality	The group does not have open meetings	There is awareness that open to all statements may be meaningless	The group has identified solutions to address the barriers for including community members	The group has a strategy for increasing access and involvement in their group	The group takes actions resulting from the outcomes of the monitoring
Building Involvement	Only a few people participate in the group	The group finds out about needs by consulting their members informally	The group has significant levels of active membership	The group has transparent and accessible operating policies	Consultation and participation is planned with other groups to avoid uncoordinated and over demanding activities

<sup>&</sup>lt;sup>10</sup> Skinner & Wilson (Bradford City Council 2002)

# Profile of the BME Sector in Cheshire, Halton and Warrington

In order to be able to appropriately identify the future needs of BME groups and the BME sector in Cheshire, Halton and Warrington awareness and understanding of its profile is required.

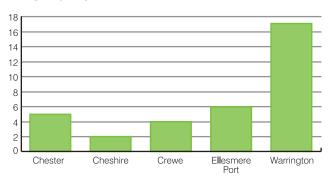
- 5.1 **BME POPULATION:** All of the districts within the subregion have similar proportions of non-white population according to the census data from 2001. Warrington, Chester and Crewe and Nantwich had the highest numbers of non-white people at 2.1 and 2.0 percent of the total of their populations respectively, whilst Congleton and Ellesmere Port & Neston had the lowest at 1.2 percent of their populations.
- 5.2 There are also significant white minority populations within Cheshire, many of which are not reflected in the census data such as Romany Gypsies and the emerging Polish migrant worker population. Gypsy and Traveller groups were not included within this report as separate research was conducted through CHAWREC.
- 5.3 Non-white population in Cheshire, Halton & Warrington, by percentage of total population. 2001 Census data.



5.4 **BME SECTOR IN CHESHIRE, HALTON AND WARRINGTON:** In Cheshire Halton and Warrington there is an estimated 4,000-6,000 VCS groups. Of these 34 are defined as BME. BME was defined as any group that supports a minority ethnic community, regardless of

- colour and also included some faith groups (this figure is based on CHAWREC's mailing list as being the most authoritative source in the sub-region).
- 5.5 However, there are two important points that need to be considered when attempting to define the number of groups, including BME groups, operating in an area. The first is that the nature of community based activity means that the number of groups in an area fluctuates, and secondly that whilst they will be groups identified by name not all of the groups will necessarily be fully operational.
- 5.6 GEOGRAPHICAL PROFILE OF THE BME GROUPS IN CHESHIRE, HALTON AND WARRINGTON: Of the 34 BME groups in Cheshire, Halton and Warrington, the largest number of groups, half (17) are based in Warrington. There are 6 groups in Ellesmere Port, 6 in Chester, 4 in Crewe and 1 group that has a Cheshire wide remit.
- 5.7 Interestingly, although there is only a small difference between local authority areas in relation to the number of BME community members, Warrington overwhelmingly has the largest number of groups. Whilst it was not the remit of this work to look at the reasons for this, anecdotally members of the community groups in Warrington pointed to the increasing numbers of BME community members living and working in the area and the prevalence of mosques and temples which have been the catalyst for some community based groups.

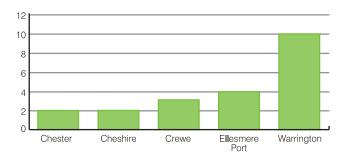
#### BME groups by location



#### 5.8 GEOGRAPHICAL PROFILE OF THE GROUPS

**ASSESSED:** Of the 21 groups that were assessed, 10 were located within Warrington, 4 within Ellesmere Port, 3 in Crewe, and 2 groups in both Chester and 2 with a Cheshire wide remit The majority of the groups provided activities and services within the geographical area they were located.

#### BME groups assessed by location

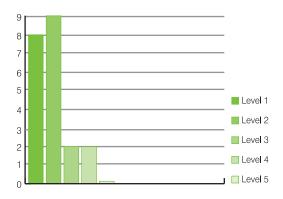


This information suggests that the BME sector across Cheshire, Halton and Warrington is concentrated in urban areas with the focus of work with BME communities also being urban. Within some of the major local authority areas in the sub-region -Macclesfield, Congleton, Vale Royal and Halton there does not appear to be any BME groups.

# BME Group Development

In understanding BME group development it is important to understand the overall picture for the BME sector.

6.1 Eight groups were at level 1 of the framework, nine groups reached level 2, two groups reached level 3 and two groups reached level 4. Three of the four groups achieving higher than level 2 have been established for over ten years.



It is interesting to note that of those groups who have attained Level 3 and level 4 within the framework and who have been established the longest come from the local authority areas with the highest non-white populations.

- 6.2 A detailed analysis of the needs assessment across all of the BME groups assessed has enabled the following generic picture to emerge for the BME sector in Cheshire, Halton and Warrington focused around the following themes.
  - A. Governance
  - B. Group / organisation development
  - C. External interface
  - D. Service development & delivery

#### A Governance

Governance, in this context, relates to the mechanisms in place to enable effective and appropriate strategic decision making, by a management committee that is fit for purpose, supported by the voice of the communities that the groups represent.

#### QUOTES FROM THE NEEDS ASSESSMENTS

There's not enough of us to do what we want to do, we struggle to get everyone to a meeting

Committee member

We don't have an action plan for the group written down but we have an idea of what we want to do

Committee member

#### The current position

The majority of groups assessed had a basic constitution, with three organisations having charitable status. For the small number of groups who did not have a constitution this was related to the fact that they had only recently formed and were in the process of becoming constituted.

Of the groups fourteen (two thirds) stated that they have a management committee governing the work of their organisation. Of those groups the majority, had management committees of between five and fifteen people. These represented the core of people running the group, providing services and delivering activities and events. It appears that the members of the management committees were also operating as volunteers thereby contributing to the organisation at both a strategic and operational level. A number of management committees (one third) were 'kept alive' by one or two members and effectively were operating in "name" only.

In terms of membership over and above the management committee, the majority of groups cited that the numbers of people participating in their group varied according to the events and activities that the groups provided. Nearly half of the groups had a system whereby people had to become members of the group and five groups have a membership of over fifty people. However this does not necessarily mean that all are actively participating in the group.

None of the twenty one groups had a documented action plan showing the future direction and required actions for their group (except for one group who has an action plan relating to a particular funding based project). However, that is not to say that the absence of documentation equated to a lack of debate and discussion within the groups on future goals and direction.

This is further compounded because of the overall lack of consultation by the groups with their 'constituents'. The majority of groups had not undertaken any formal consultation with their wider membership or the community they were representing or supporting regarding the direction of the group at a strategic level and the services it should be delivering at an operational level. Many groups did however engage informally via daily/weekly contact with its wider membership and/or community. This daily/weekly contact might include aspects of service delivery and discussions on strategic direction but was adhoc by nature. The majority of groups stated that the wider community and/or membership could influence the decisionmaking within the group by attending open meetings, their annual general meetings or by attending events and speaking to members. However, it was unclear how some of the groups informed the wider community when open meetings took place.

In relation to the mechanisms of decision making, issues arose for most of the groups in terms of how to run committees and general meetings ranging from taking minutes and having structured agendas, lack of adequate chairing of meetings, regularity of meetings, and lack of communication between members of the management committee.

Finally, the level of morale was related to the progress being made by the groups, the level of activity within the group and the sense of purpose that the group had. The levels of morale amongst the groups were mixed. For those suffering from low morale the initial burst of enthusiasm when forming the group had been replaced by a sense of frustration at the time it took to make progress.

#### The Needs

The needs assessment identified the following BME sector focused needs:

- Support and guidance on the process of groups gaining a constitution that is appropriate and relevant for their group
- Training and support on how to run meetings effectively including setting agendas, taking minutes, chairing and reports and information required to assist in strategic decision making

- Information on how to undertake formal consultations
  with the wider community and/or the membership that
  they represent. This is to ensure that they provide the
  opportunity for all members to input in to the direction
  and development of the group, as well as being able to
  demonstrate the need to potential funders.
- Support and guidance on mechanisms for informing and enabling the wider community to influence the strategic and operational direction of their group. This could include hosting open meetings, running consultation exercises and/or by holding social events.
- Guidance on how to produce development plans, including group visioning, in a way that articulates to the community and external agencies what the group wants to achieve.

In conclusion, governance presents an overall area of weaknesses for the majority of BME groups in Cheshire, Halton and Warrington and will inevitably impact on the ability and capacity of groups to develop and be sustainable in the future. It appears that the fundamentals of governance all require further work from having the necessary paperwork in place, ensuring management committee members understand their roles to enabling them to deliver their roles as decision makers on behalf of their community in a way that is transparent and accountable.

#### **Recommendation:**

In order to see tangible improvements in this area the following recommendations are made:

- **A.** That support agencies<sup>11</sup> establish a project to enable their employees to support BME groups as advisors and/or cooptees on their management committees.
- B. That support organisations consider how they provide support to enable individual BME groups to produce development plans and where necessary business plans so as to enable the BME groups to be better placed to ensure the future sustainability of their group.
- C. That support organisations explore how they can support BME groups to undertake consultations with their wider membership and/or communities to ascertain their needs. This could include training, one to one support by appropriate staff or consideration of how existing or planned consultation could fulfil the needs of the BME groups.

<sup>&</sup>lt;sup>11</sup>A support organisation refers to VCS infrastructure agencies and statutory sector organisations

D. That support organisations ensure that training and support that is available to the VCS in relation to committee skills is delivered in ways appropriate for BME community members. This could include time of delivery, length of time for courses, provision of language support and translated materials where appropriate.

#### **B** Group/Organisation Development

Assuming that appropriate governance arrangements are in place and the group / organisation is operating effectively, there are a number of areas that the group / organisation needs to focus on in terms of its own development that in turn will assist in its delivery of appropriate services to the community it serves.

#### **QUOTES FROM THE NEEDS ASSESSMENTS**

We need core funding but we survive on small amounts of funding.

Committee member

We talk with members in our Mosque about what they want to do

Committee member

The skills that members have is more through chance than planning.

Group member

#### The current position

Overall, there is a lack of policy frameworks governing the work of the BME sector. In general the majority of the groups did not have any policies and the groups that had developed policies were the ones who had employed staff and/or had run major projects.

In particular there was a lack of accountability in terms of equalities practice and the majority of groups stated that they are "open to all" but only three groups had a formal Equal Opportunities Policy or written statement which they had adopted when employing staff.

The lack of policy frameworks can be seen to be related to the numbers of staff employed across the BME sector. Three groups from the twenty one have paid members of staff, with the majority of these being part time. The three groups had a total of 7 staff with one group having 4 paid staff. Four of the paid staff were part time and 5 out of 7 staff were employed on

a project basis and therefore the posts were time limited. Linked to the availability of paid staff are the opportunities for volunteering across the sector. Most groups relied on volunteers to deliver activities, provide services and attend meetings. However the majority of groups were experiencing a lack of volunteers.

The overall picture of scarcity of staff and volunteers implies that management committees will need to be skilled up to manage and ensure the future sustainability of their organisations. Training as a key tool for organisational development has a key role to play in this regard. Only one group out of twenty one stated that they had undertaken an assessment of the training needs of members, with the majority stating that they were unsure of the training needs of their members. Furthermore, the vast majority of groups had undertaken very little training related to their development and generally where training had been accessed this was not accredited.

Finally, the last area in relation to group development is funding. The majority of groups were either self funded and/or received small amounts of funding for project based activity. This was particularly the case for organisations that are solely or mainly religious in focus because funding for religious purposes is not provided by most mainstream funding regimes. Three of the groups received core funding from local authorities but it did not cover the entire core funding needs of the groups. The more established groups have received funding from several sources including regeneration agencies, Lottery, education and health based funding regimes.

#### The Needs

- Funding was identified as a priority need. Core funding was cited by groups and organisations as the main need regarding funding.
- The larger organisations require funding strategies to enable them to attain larger amounts of funding. Some of the smaller organisations require support to enable them to set up basic systems for managing funding.
- Most of the groups identified the need for a paid worker because of the lack of time and in some cases commitment of group members to undertake vital tasks. However, it was recognised that for this to happen (over and above securing the funding) many of the groups need to be able to show that they have the organisational capability to manage a worker including ensuring an understanding of the criteria required to be a good employer including recruitment and selection,

appraisal and supervision, developing action plans and work programmes and administrative functions including pay roll.

- Building organisational capacity would also include the development of broader policy frameworks commensurate with the size of the organisation.
- The majority of groups specified the need to attract and retain more volunteers from the wider community and/or membership to participate in the running of the organisation and in the delivery of activities and events.
- However they need support to enable them to promote the group within the wider community and raise awareness of the aims of it so as to attract new people.
- Volunteers are required to support the organisations both at a strategic level, as board members or trustees as well as at an operational level to enable the delivery of services and to assist and support with the provision of services and activities.
- Although the vast majority of groups had not formally identified what training their members required, many groups acknowledged that they required training on a variety of issues regarding the running of their groups. The main training needs were around governance and how to access funding. There was a general willingness to attend courses, but as many of the individuals involved with the BME groups are in employment they would need this training to be provided in the evenings or at weekends. A need for sessions that are tailored to the group's specific needs was identified, as most training was considered too general to be helpful.

**In conclusion**, from the needs assessment there are two areas identified as fundamental - the lack of staff / volunteers and the absence of sustainable funding. However, the other range of organisational development needs identified suggest that the ability to attract funding and to manage staff will be seriously undermined unless those needs are met.

#### **Recommendations:**

The following range of recommendations are aimed at enabling BME groups to ensure the building blocks for organisational development are in place

E. That support organisations explore how they can assist BME groups to develop applications for funding. For example this could be done on "surgery style" by

- supporting groups to go through the questions on an application form, by assisting them to overcome terminology, jargon and general language barriers and to look over draft applications and explain the application process.
- F. That support organisations consider how they can help more established BME groups to develop funding strategies.
- G. That policy frameworks guidance packs, including being a good employer, are targeted to BME groups from within existing resources such as the CVSs.
- H. That the Volunteer Centres, or appropriate bodies, across Cheshire, Halton and Warrington collectively consider further how they might encourage and support volunteering into BME groups.
- I. That support organisations consider more flexible approaches in the provision of training and learning opportunities to BME groups. For example looking at running short sessions of approximately 2 hours in duration, providing training to groups in their own settings and developing course based upon needs by holding informal discussions.
- J. That the BME groups analyse their own practice to ensure that the diversity of their own communities are not undermined for example ensuring that young people and women can be involved in groups at a strategic and operational level.
- K. That a development worker post should be created (jointly funded by support organisations and external funding regimes in partnership with and managed by CHAWREC due it unique role as a support agency for BME groups and its advice role to infrastructure and statutory agencies) to work across the sub-region with a specific remit to develop joint working and to act as a conduit between support agencies and BME groups around some of the issues identified through the needs assessment.

#### C External Interface

The external interface between the BME groups and sector and VCS infrastructure, frontline and statutory sector agencies is a key factor in the way that BME groups and the sector is supported and enabled to develop so it can provide effective and appropriate services for the communities they serve.

#### QUOTES FROM THE NEEDS ASSESSMENTS

We can't understand the information that agencies send to us

Committee member

We need a BME network or forum across the region to bring the groups together.

Comment by a participant at Agency/BME group workshop

#### The current position

A key tool for the BME groups in raising issues and delivering services is the acquisition of information. Infrastructure and support agencies clearly have a key role to play in providing relevant, timely and appropriate information to BME groups and the sector. The majority of groups received information from other organisations with the most cited sources being either the local Council for Voluntary Service, local authority and CHAWREC. However there was a mixed response from groups to the value of that information. Some groups thought that the information was limited, whilst others were satisfied with the information they received. Factors influencing how the groups felt about the information seemed to relate to the strength of the links groups had with the organisations providing the information and the length of time the links had existed.

The role of information has an impact when BME groups are advocating on an individual level. A small number of groups advocated on behalf of community members when dealing with public agencies, as well as signposting community members on issues concerning welfare and advice and the acquisition of information and knowledge is clearly linked with the ability to provide appropriate and relevant information and linkages. Moving up the next level of external interface brings us to networking. Networking by BME groups ranged from very little networking being undertaken by most of the groups assessed, with a small number of BME groups who have become part of several networks. The type of networks range from public to voluntary sector networks and forums.

Partnership working was also an area of external interface for the BME groups. It appears that the majority of partnership working that is taking place is with a range of other agencies and organisations including: other BME groups; general community and voluntary sector groups and public sector organisations. However, the partnership working was largely focused around joint working on projects, events or initiatives, the majority of groups were not involved in significant partnership working. Those groups who had or were working in partnership tended to be well established and had built up

partnerships over several years resulting in joint project delivery.

At a more strategic level, and encompassing the ability of the BME groups and sector to influence decision making it appears that whilst the majority of groups did not have access to decision makers and the decision making process, there were limited examples of where groups (or a representative of the group) were in attendance at meetings and forums or had attended consultation events in the area. A small number of groups were also 'representing' their members and/or communities on health, local authority, police and Local Strategic Partnerships forums and partnerships.

From a reciprocal perspective, a small number of groups have representation from public and voluntary sector support agencies on their management committees. The groups felt that they benefited from the expertise of people from the support agencies and this helped to increase their awareness of potential resources and to develop partnership working.

All of the opportunities for developing external relationships however were underpinned by an overall lack of understanding from within the BME sector about how the public and voluntary sectors work.

The final area for consideration under external interface is the ability of BME groups to interface with each other. The geography of the area, with its large rural settlements and the barriers related to transport and the reluctance of groups and their members to travel across the area presents challenges for how the BME groups can come together to represent the BME sector. During the needs assessment, and at the two networking events held at the early stages of this research, it was apparent that the BME groups did see the value in coming together but recognised the logistic and time related barriers.

#### The needs

- Some groups expressed a need for more information and stated that they did not receive adequate information from public and voluntary sector agencies.
   In some instances groups felt that the information they received was difficult to understand and was not relevant to them and used jargon and terminology they could not understand.
- The majority of groups required more help from support agencies to enable them to access decisionmakers and decision making processes i.e. senior officers within public sector organisations and

membership on bodies such as Local Strategic Partnerships.

- For many groups there is a need to become more involved with other groups and support agencies so that they are more aware of the potential resources on offer to them and they can influence the work of agencies in supporting them.
- There is a need for BME groups to support each other, share good practice and experiences to support the development of groups and to provide a sub-regional voice.

In conclusion, the opportunities and experiences of the BME groups working with external organisations at both an operational and strategic level is patchy and inconsistent. There is recognition of the importance of appropriate, timely and relevant information and the role that this plays in enabling BME groups to work effectively with other agencies and organisations. At a more strategic level, the access of BME groups to key decision makers is ad hoc and does not take place within a structured framework.

#### **Recommendations:**

To enable the BME groups and the BME sector to identify and maximise opportunities arising from an external interface the following recommendations have been produced:

- L. Support agencies consider approaches for explaining how the public and voluntary sector system operates to BME groups.
- M. Local authorities should arrange regular meetings with the portfolio holders for equality and diversity and BME groups within the area (where this is possible) to talk about the role of portfolio holder and the support the position can provide to them.
- N. Support organisations audit the information that is sent to BME groups to assess it is appropriate and accessible.
- O. Local authorities should review how they enable BME community members and groups in their locality to access decision makers and decision making forums such as the LSP and how they can overcome the possible barriers community members may face in accessing the decision making forums.
- P. The BME groups, facilitated by CHAWREC, consider the opportunities for the development of a BME sector perhaps through an area wide forum, the development of an interactive website or BME sector newsletter.

#### D Service Development & Delivery

This section refers to the ability of the BME groups to deliver the services required by their communities. It has already been documented under previous sections that there are issues relating to the knowledge base that has been developed to be able to identify the services and activities required by BME communities across Cheshire, Halton and Warrington but this section explores other elements.

QUOTES FROM THE NEEDS ASSESSMENTS

It is difficult to know what people want

Committee member

#### The current position

There was an array of activities, services and projects provided by the groups. This ranged from training and employment based projects, social activities, sports activities to religious and cultural activities. However, overall the majority of groups were providing social, religious or cultural activities.

Six of the twenty one organisations provided English language support for their respective communities. The six groups did not reflect one specific community but ranged across them. There was evidence that local Further Education colleges had made provision, but in some instances the courses were initiated by the group and were reliant on ad hoc funding and teaching resources. In some cases this was done internally with the support of group members.

A key area influencing the ability to deliver services is quite often the availability of premises. The majority of groups had some access to offices and premises for meetings and running activities. The majority of the faith based groups interviewed expressed dissatisfaction with their current premises and wanted to obtain larger and more suitable buildings.

#### The needs

- Whilst most of the groups had access to a venue for meetings there was dissatisfaction expressed among some groups that they could not access office facilities as and when required. For some groups making payments for room hire was often a struggle.
- Three of the faith groups interviewed expressed a need for larger and more appropriate premises primarily because of the increase in the number of people attending. Such groups were resigned to the fact that

they would only access more suitable premises by self funding and had therefore not asked for support.

- Many community activities and BME groups have been established through faith groups and therefore this may put BME communities at a disadvantage because faith groups cannot get funding for religious activities that often develop community based activity also.
- Some of the groups assessed required language support for the communities they served. However some groups stated that the levels of language support provided by education agencies can be too advanced for some members of their community. The inability to speak English to a level where community members could access services and participate in wider social and cultural activities was seen as a major need by many of the groups involved in the provision of language support.

In conclusion, whilst there are some services being delivered focusing on improving quality of life for BME community members, the majority of services provided are social, religious or cultural.

#### **Recommendations:**

To enable the BME groups to gain recognition as service providers across a range of quality of life issues, and to promote their role and ability to provide services that are appropriate and sensitive to the needs of community members the following recommendations are suggested:

- Q. Support organisations involved in education provision host a workshop with BME groups to assess if the provision, frequency and level of language support are meeting the needs of BME community members.
- **R.** That statutory bodies review how as part of their support to VCS, and BME groups more specifically, they can make venues available at no or low cost.
- S. That public sector agencies in particular consider how they can develop the capacity of the BME groups to enable them to be commissioned to deliver services.

# How the BME Sector is currently supported

In order to identify the gaps in provision of support to BME groups contact was made with support organisations in a variety of ways.

- 7.1 A workshop was held with support agencies and organisations and with representatives from BME groups to identify what support was currently provided by support agencies to BME groups.
- 7.2 The Council for Voluntary Services and local authorities of each of the geographical areas were contacted (through their Community Development or Equality & Diversity departments or officers) to enable them to provide information on the support they provide to BME groups.
- 7.3 Finally, the outcomes of a mapping project for Cheshire and Warrington Change up was reviewed in relation to the provision of services to BME groups by VCS infrastructure agencies.
- 7.4 Overall, the pattern that emerged was that whilst there are examples of support provided to BME groups by agencies, in the main this was not consistent across the region or within each district or area. Where support was given it appears that it is a minority of BME groups receiving ongoing support rather than a larger number of BME groups providing on off support (as and when required).
- 7.5 From the data collected it appears that:
  - Support is generally around group status and developing constitutions, running committees and funding.
  - Only three local authorities provide core funding for groups in their area and for the majority of the groups core funding would represent less £5,000.
  - Support agencies have not in the main supported groups to undertake consultation within their own community or its membership.
  - Only a small number of support agencies had offered to support groups to develop action plans even though many groups had been in existence for several years.

- There were only a couple of examples were agencies had supported groups in attracting volunteers.
- There was only one example of where an agency had provided support regarding identifying the training needs of committee members. Training was provided by several support agencies across the sub-region but this was mostly not customised training and did not provide for many of the groups needs.
- There was some support provided to organisations regarding meeting space and premises by agencies particularly in Chester, Crewe and Warrington however there was less support provided regarding the identification and funding of premises for religious worship.
- Most agencies distribute information to BME groups but this is often of a general nature and does not take into account particular needs of BME communities groups for example, language provision.
- There is little provision for enabling group members to understand how the system operates so that they can participate in and access resources and support.
- 7.6 There were some examples of targeted work including the production and provision of welcome packs for migrant workers; dedicated workers in a small number of agencies with a brief to support a BME community group, the involvement of some agencies in the management committees of BME groups, training to groups on reporting hate crimes and recruitment and selection. However, the amount of dedicated support appears to be concentrated in areas where there have been long established groups and BME communities for example in Chester, Warrington and Crewe.
- 7.7 Most service providers would acknowledge that they need to do more to support BME groups and that the generalist approach to meeting those needs will not necessarily provide adequate support and engagement with BME communities.

# Recommendations

The following recommendations are made to enable greater support to be provided to BME groups by infrastructure and support agencies and to suggest interventions that BME groups and organisations themselves could undertake to aid BME group and sector development.

The recommendations have been developed to relate to the 4 themed areas and there is a section containing general recommendations.

#### Governance

- A. That support agencies<sup>12</sup> establish a project to enable their employees to support BME groups as advisors and/or cooptees on their management committees.
- B. That support organisations consider how they provide support to enable individual BME groups to produce development plans and where necessary business plans so as to enable the BME groups to be better placed to ensure the future sustainability of their group.
- C. That support organisations explore how they can support BME groups to undertake consultations with their wider membership and/or communities to ascertain their needs. This could include training, one to one support by appropriate staff or consideration of how existing or planned consultation could fulfil the needs of the BME groups.
- D. That support organisations ensure that training and support that is available to the VCS in relation to committee skills is delivered in ways appropriate for BME community members. This could include time of delivery, length of time for courses, provision of language support and translated materials where appropriate.

#### Group/Organisation Development

**E.** That support organisations explore how they can assist BME groups to develop applications for funding. For

- example this could be done on "surgery style" by supporting groups to go through the questions on a application form, by assisting them to overcome terminology, jargon and general language barriers and to look over draft applications and explain the application process.
- F. That support organisations consider how they can help more established BME groups to develop funding strategies.
- **G.** That policy frameworks guidance packs, including being a good employer, are targeted to BME groups from within existing resources such as the CVSs.
- H. That the Volunteer Centres, or appropriate bodies, across Cheshire, Halton and Warrington collectively consider further how they might encourage and support volunteering into BME groups.
- I. That support organisations consider more flexible approaches in the provision of training and learning opportunities to BME groups. For example looking at running short sessions of approximately 2 hours in duration, providing training to groups in their own settings and developing course based upon needs by holding informal discussions.
- **J.** That the BME groups analyse their own practice to ensure that the diversity of their own communities are not undermined e.g. young people and women.
- K. That a development worker post should be created (jointly funded by support organisations and external funding regimes in partnership with and managed by CHAWREC due it unique role as a support agency for BME groups and its advice role to infrastructure and statutory agencies) to work across the sub-region with a specific remit to develop joint working and to act as a conduit between support agencies and BME groups around some of the issues identified through the needs assessment.

<sup>&</sup>lt;sup>12</sup> A support organisation refers to VCS infrastructure agencies and statutory sector organisations

#### External Interface

- L. Support agencies consider approaches for explaining how the public and voluntary sector system operates to BME groups.
- M. Local authorities should arrange regular meetings with the portfolio holders for equality and diversity and BME groups within the area (where this is possible) to talk about the role of portfolio holder and the support the position can provide to them.
- N. Support organisations audit the information that is sent to BME groups to assess it is appropriate and accessible.
- O. Local authorities should review how they enable BME community members and groups in their locality to access decision makers and decision making forums such as the LSP and how they can overcome the possible barriers community members may face in accessing the decision making forums.
- P. The BME groups, facilitated by CHAWREC, consider the opportunities for the development of a BME sector perhaps through an area wide forum, the development of an interactive website or BME sector newsletter.

#### Service Development and Delivery

- Q. Support organisations involved in education provision host a workshop with BME groups to assess if the provision, frequency and level of language support are meeting the needs of BME community members.
- R. That statutory bodies review how as part of their support to VCS, and BME groups more specifically, they can make venues available at no or low cost.
- **S.** That public sector agencies in particular consider how they can develop the capacity of the BME groups to enable them to be commissioned to deliver services.

#### General

T. CHAWREC's role as an anti racist voluntary organisation that supports Black and Minority Ethnic (BME) groups as well as advising public and voluntary sector agencies regarding issues affecting BME community members means that it is the most appropriate organisation to lead on the development of a BME Compact style (an agreement between support

- agencies and BME sector) agreement with the County and districts, to agree on the targeting of funding to BME groups, protocols for consultation with BME groups, and increasing BME involvement in local decision making structures.
- U. Support organisations incorporate speakers / trainers from BME groups into their employee training and learning programmes as a mechanism for raising cultural awareness and the issues facing BME communities. Support organisations should be prepared to offer support in terms of enabling the speaker to make an effective contribution such as access to information, a brief on the requirements of them and discuss the possibility of remuneration for their time. Support agencies need to be aware of the problems including pressures of time and resources facing some community groups in providing such support.
- V. CHAWREC, the CVSs and local authorities compile a common database of all BME groups across the subregion.
- W. A directory of all BME groups in the sub-region be developed by support organisations that will help with networking and raising the profile of individual groups and the activities and services they provide.
- X. CHAWREC review how it can raise the profile of its role and function with BME groups.
- Y. CHAWREC establish mechanisms for sharing information and practice across the BME groups on issues such as funding, training opportunities and consultation mechanisms.

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## Apeendix 1 - List of groups assessed and not assessed

GROUPS &	ORGANISATIONS /	ASSESSED

Muslim Men's group in Ellesmere Port

Quest

Chester Asian Council

Central Community Group, African Caribbean Centre

Crewe Mosque

West Cheshire Multicultural Womens Group

New Polish Association - Crewe

Harmony

New Horizon

Warrington Multi-cutural Forum

Warrington Islamic Association

Hindu Cultural Organisation

LRK Hindu Cultural Organisation

Jamiat-ul-Muslimeen Mosque

Warrington Ethnic Communties Association

Warrington Ethnic Welfare

Warrington Chinese Association

Warrington Ethnic Sports Association

Sikh Temple

Chester Jewish Association

Gt Chattagram Samity UK

#### LIST OF GROUPS & ORGANISATIONS NOT ASSESSED

Orthodox Greek Church

Ellesmere Port Multicultural Group

Ellesmere Port Multi-cultural Forum

Polish Social Club - Crewe

The Irish Club – Warrington

The Yemeni Community Assoc

Filippino Women's Assoc

Association of Czechslovak Exiles

Somali Community Assoc

Pakistani Social & Welfare Society

Warrington Islamic Association Womens Group

Hindu Temple

Chester Bangladeshi Welfare Assoc

Shah Jalal Mosque & Islamic Centre

## Appendix 2 - Community Strengths Framework (adapted) 13

	Level 1	Level 2	Level 3	Level 4	Level 5
Building organisation	The group shows a very low level of organisation  There is a low level of confidence and	There are informal links between community and voluntary sector groups	Some networking activity has been established and there is a recognition of the value of joint planning	Joint working and links between other groups and the group are very effective	The group regularly identifies their own training needs and are supported in meeting them
	morale that real change can happen for their community(s)	Involvement in community activity is increasing  There is some	There are effective links with local support organisations	The group has a variety sources for accessing information	The group manages an array of successful projects and initiatives
	Only 1 or 2 people are playing a leadership role within the group	knowledge of what resources and support is available to them	The level of planning by the group and of members is reasonable	The group has a range of flexible and accessible support, training and learning opportunities	Group members are sufficiently skilled to manage strategies and develop partnerships
	There are no paid staff within the group  The group lacks access to practical	The group has a constitution in place There is some funding in place	There is a high level of turnout at management	The group has the skills to effectively manage an increasing range of	The group is contributing to local and regional strategic
	resources  The group lacks access to practical and useful information		Committee meetings  The group has adequate and appropriate space/premises	projects	development
	The group does not have access to community workers		The group makes use of outside advice		
	The group is isolated from other groups and networks		The group has access to the information they need to achieve their aims		
			The group has an action plan		

<sup>&</sup>lt;sup>13</sup> Assessing Community Strengths – Steve Skinner & Mandy Wilson Community Development Foundation publications

developing the skills of its members/wider community  of the type of training they and their members/community  The skills within the group are utilised as Networking where The group is	5	Level	Level 4	Level 3	Level 2	Level 1	
participate in training or learning activities problems accessing training and learning activities are set to be a set of the learning activities and learning activities are set of the learning activities and learning activities are set of the learning and learning are set of the learning activities are set of the learning activi	roup is ently skilled to ge their own gies roup is outing vely to local egional	The g suffici mana, strate,  The g contril effecti and reduced developments.	Members of the group possess the skills to manage projects  Networking where group members benefit from exchange of information and ideas is a key	The training needs of the group have been identified  The skills within the group are utilised as a result of training and learning activities  Members of the group regularly undertake training	The group have some understanding of the type of training they and their members/community require  The group has problems accessing training and learning  There is some knowledge of the skills and knowledge within the group  There is some awareness of the training and learning opportunities	There is little interest among the group in developing the skills of its members/wider community  The group does not participate in training or learning activities  There is little awareness of the	Building Skills

	Level 1	Level 2	Level 3	Level 4	Level 5
Building Equality	The group is not aware of the community needs  The group does not take action to challenge discrimination  The group does not have open meetings	There is some awareness of the access needs of the community  There is awareness that open to all statements may be meaningless  The group are identifying resources to enhance peoples involvement	There group has an Equal opportunities policy  The group has identified solutions to address the barriers for including community members  The group has accessing resources to enhance equality  The group is challenging other groups and agencies on equality issues	are open to all	The group has monitoring systems in place  The group takes actions resulting from the outcomes of the monitoring

	Level 1	Level 2	Level 3	Level 4	Level 5
Building Involvement	Only a few people participate in the group  The group is isolated with few	There are some consultation processes in place  The group has a limited say in	The group reflects the needs of the membership/wider community  The group has	The group has undertaken formal consultations with their membership/community	Members of the group have recognised and effectively roles in local decision making
	opportunities for networking  The group have no say in local decision making	The group finds out about needs by consulting their members informally	significant levels of active membership There is significant membership of the group	The group has transparent and accessible operating policies  The group has	Consultation and participation is planned with other groups to avoid uncoordinated and over demanding
	The group does not know what the needs of the community are  There is inadequate passing on of information about activities	The group has access to some networks where they can meet and share concerns  There are limited opportunities for groups to effectively represent their members	There are established links between other community groups and agencies  The group is consulted by agencies regarding their plans and strategies	significant levels of active membership  The wider membership/commu nity are consulted regularly	activities

# Appendix 3 - List of Groups supported to produce Development Plans

Chester	Asian	Council
OHIOSIG	ASIGII	Oourion

Crewe Central Community Group

Warrington Chinese Community Association

West Cheshire Multi-Cultural Womens Group

## Appendix 4 - Assessment Questions

### Internal structure and management of the group/organisation

- 1. What is the level of morale within the group/organisation?
- 2. What activities/services/projects (past and present) has your group/organisation undertaken?
- 3. Have there been any barriers that have prevented or are preventing your group/organisation from achieving its objectives?
- 4. Do you have any paid staff if so how many?
- 5. How many volunteers does your group/organisation have?
- 6. What access to resources e.g. space, premises do you have?
- 7. How many people are on your management committee?
- 8. How many management committee members attend MC meetings?
- 9. What is the constitutional status of your organisation/group?
- 10. What information (e.g. funding, resources, events) do you receive from other organisations?
- 11. What partnership working have you done (by partnership working we mean working on joint projects or initiatives)?
- 12. What other groups are represented on your management committee?
- 13. Have you got a current action plan for the group/organisation?
- 14. What funding do you receive?

#### Developing the Skills within the group/organisation

- 15. Have you identified the training needs of members of your organisation?
- 16. What past and present learning and training (has) is taking place within your group/organisation?
- 17. How do you access training or support?
- 18. Is the training your group/organisation undertook accredited?

### Ensuring involvement and influence of the wider membership and community

- 19. Does your group/organisation have an Equal Opportunities policy
- 20. How does your group/organisation demonstrate how you include people in the work you do?
- 21. How many people participate in your group/organisation?
- 22. What networking does your group do with other group/organisations?
- 23. How does the wider membership of your group/organisation influence decision making within your group/organisation?
- 24. What consultations has your group/organisation carried out?
- 25. How does your group/organisation represent the community(ies) it serves?





Cheshire, Halton & Warrington, Racial Equality Council, 2 Hunters Walk, Canal Street, Chester CH1 4EB Tel. 01244 400730 • Fax. 01244 400722 • Email. chawrec@btconnect.com

www.chawrec.org.uk