

# Tackling Loneliness with Transport Evaluation Appendix D

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**Prepared for: The Department for Transport (DfT)**

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# Appendix D

## Common Minimum Dataset

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Please see below for an example of the evaluation template provided to pilots. Findings from the CMD data are presented further in this section.

### **D.1 Common Minimum Dataset template**

#### **Common Minimum Dataset (CMD) Guidance**

This sheet is intended to keep a record of all of the activities used by primary beneficiaries that engage with your service over the course of the funding.

A primary beneficiary is a targeted service user who is expected to directly benefit from the activities of your pilot project.

Collecting data using the CMD will ensure we have uniform data across all pilots that we can evaluate. We would like this template to be returned to us quarterly, in line with your financial reporting dates specified by DfT.

We would like the record for each beneficiary to be as complete as possible, so please record all the information you hold on each beneficiary you have engaged with.

Be aware that some data fields have drop down lists where a single category needs to be selected.

As was discussed during the workshop and subsequent conversations, we are aware that the collection of demographic and activity data will not be possible for some beneficiaries. If you are unable to fill out any of the data fields for any of the beneficiaries, please fill in those data fields with N/A.

Below you can find guidance on each of the data points (ID, Age, Gender and so on) that are included in the CMD template.

#### **ID**

Please assign each beneficiary a unique identification.

This can be a number or a combination of numbers and letters, for instance: 1, 2, 3 and so on or A1, A2, A3. The format should be consistent and can be what you already use internally. It is important that each beneficiary has one unique ID and that each unique ID relates to only one beneficiary. IDs should not be names or other characteristics that would allow anyone to identify the beneficiary.

It is likely that you will be entering information multiple times for many of your beneficiaries if they engage with several main activities. If this is the case, always use the same unique ID for the beneficiary. If the same individual engages in different activities with different partners (for example a walking activity with Pilot A and a cycling activity with Pilot B), please ensure partners use the same ID if possible.

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Important: please only include beneficiaries that are:

(1) primary beneficiaries: A primary beneficiary is a targeted service user who is expected to directly benefit from the activities of the pilots.

(2) that you can track over time. For instance, if you are sending out marketing information to encourage someone to use your activities and/or transport but you are not tracking that person's engagement with the activities/or transport, then do not include them.

### **Age**

Please enter the age of the beneficiary. Please include only their age in years. Do not include birthdays.

This should be the age of the beneficiary at the point in time at which you first recorded it for the purposes of this project, even if they had a birthday since their first engagement with the activities.

### **Gender**

Please select the beneficiary's gender from the drop-down menu provided.

### **Ethnicity**

Please select the beneficiary's ethnicity from the drop-down menu provided.

### **Disability**

Please select the beneficiary's disability, if any, from the drop-down menu provided.

### **"Other" disability/multiple disabilities**

Please provide brief detail on other disabilities or multiple disabilities. For instance, if multiple disabilities, say what type of disability this is, referring to the types in the drop-down available under Disability. You can leave this blank if you do not know what other disability/what multiple disabilities the beneficiary has, or if they have none.

### **Type of activity engaged with**

Some pilots are conducting multiple activities with beneficiaries. Please use a new row for each activity type an individual has engaged with if several activities apply to the same individual. These should only be key activities as defined by your project, e.g., cycle rides, attending an activity club etc.

Please briefly state the activity/service engaged with by the beneficiary on this occasion. Be consistent: if you describe an activity as "community chat" then please use this same category for all beneficiaries receiving this activity, i.e. always call it "community chat" thereafter, not e.g., "community discussion".

In some cases, the main intervention may be the use of a mode of transport in itself, e.g., group cycling, or to make a particular location accessible e.g., attending clubs with the help of private taxis. Some interventions may not involve providing a means of transportation for the beneficiary, e.g., using bus garages as a place to meet. If the intervention involves using project provided or facilitated transportation, this mode of transport should be stated in the description of the activity.

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### Frequency of interaction with intervention

Please enter here the number of interactions with this intervention for this beneficiary. This can be updated for each beneficiary in subsequent submissions of the data.

### Mode of transport

Please state the main mode of transport where transport is provided or facilitated by the project, e.g., train, private taxi service, bicycle, walking etc. Please be consistent: if you described a mode as "train" the first time, always use "train" – not "train journey" or "train trip" etc.

Some pilots' activities are not about the mode of travel (e.g., using bus garages as a place to meet) and for others travel is the main intervention, e.g., cycling as a group. If mode of transport is not provided or facilitated as part of an activity, then enter N/A for mode.

Please note that mode of transport refers to any mode of transport used by the beneficiary, not the mode used to deliver interventions to them.

### Postcode of intervention

Please enter here the postcode of the intervention. That is, where the main activity takes place or where it starts from. Please do not state the postcode of beneficiaries.

## DEMOGRAPHICS

Question or Category	Answer
<b>Date</b> Please state the date that data is inputted	
<b>ID</b> Beneficiary unique identification number	
<b>Age</b> Please input age in years	
<b>Gender</b> Please select from the drop-down list	Male Female Non-Binary Other/self-define Prefer not to say N/A

Question or Category	Answer
<b>Ethnicity</b> Please select from the drop-down list	White: British White: Irish White: Any Other White Background Mixed Race: White & Black Caribbean Mixed Race: White & Black African Mixed Race: White & Asian Mixed Race: Any Other Mixed Background Asian/Asian British: Indian Asian/Asian British: Pakistani Asian/Asian British: Bangladeshi Asian/Asian British: Chinese Asian/Asian British: Any Other Asian Background Black/Black British: Caribbean Black/Black British: African Black/Black British: Any Other Black Background Any Other Ethnic Group Prefer Not to Say N/A
<b>Disability</b> Please select from the drop-down list	Mobility impairment Blind/visual impairment Deaf/hearing impairment Learning disability Neurodiversity (e.g. ADHD, Autism) Neurological condition (Alzheimer's, Epilepsy) Mental health difficulty Long term health condition (please state in next column) Multiple disabilities (please list in next column) Other/self-define (please state in next column): Prefer not to say No disability N/A
<b>“Other” disability / multiple disabilities</b> Please state	

## ACTIVITIES

Question or Category	Answer
<b>Type of activity engaged with</b> Some pilots are conducting a number of activities with beneficiaries. Please state here the main activity type the beneficiary engaged with. A new line should be used for each main intervention if several apply to the same individual.	

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Question or Category	Answer
<b>Frequency of interaction with this activity</b>	
Please state the number of interactions for this activity for this beneficiary as a whole number (e.g., 1 for first interaction, 2 for second interaction, 3 for third interaction, and so on).	
<b>Mode of transport</b>	
If your main intervention is transport, please state the mode of transport used by the beneficiary as part of the intervention, e.g., train, private taxi service, bicycle, walking etc. If several modes are used please state all of these. If transport is not the main intervention, please write 'N/A'. Mode of transport refers to any mode of transport used by the beneficiary, not the mode used to deliver interventions to them.	
<b>Postcode of intervention</b>	
Please state the postcode of the intervention. This is where the main activity takes place or has started from. If your service is delivering resources to beneficiaries, please state the postcode of the main location of the project, e.g., the head office or central hub. Please do not state the postcode of beneficiaries.	

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## D.2 Common Minimum Dataset (CMD) findings

This appendix presents findings from the Common Minimum Dataset (CMD) data summaries from individual pilots. Findings across all the ten pilots which provided CMD data are reported in section 3.6 of the evaluation report.

The CMD template (see Section D.1), developed in collaboration with DfT, provided a way to ensure that there was uniform data collected across all pilots delivering activities to primary beneficiaries. The CMD collected data on beneficiary demographic information (including age, gender, ethnicity, and disability), as well as activity level data (including the type of activity engaged with, frequency of interaction, mode of transport of the activity, and the postcode of the intervention). Delivery periods varied among the pilots, with some taking up the option of the extended delivery period until end of August 2023. Accordingly, final CMD data was received from pilots at different times between June and October 2023.

### Age UK

Age UK's pilot, Travelling Companions, aimed to support socially isolated older people through a process of matching them with a trained volunteer travelling companion for journeys on public transport. Additionally, the travelling companions aimed to help beneficiaries identify their barriers to travel, set goals, and support them to overcome issues.

According to the CMD data, the pilot reached 209 beneficiaries who interacted with the activities at least once. This represented 23% of the proposed target number of beneficiaries (n=900), as set out in the business case. The average age (mean) of beneficiaries reported (n=205) was 79 years, with the age of beneficiaries broadly

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ranging from 22–101 years. Beneficiaries aged 80–89 years made up the largest age band (47%) and overall, three-quarters (74%) of beneficiaries were aged 70–89 years. The data collected on gender (n=208) indicated that females represented 77% of beneficiaries compared with 22% who were male. Beneficiaries who identified as non-binary and those who chose ‘prefer not to say’ together made up 1%.

On average, beneficiaries interacted with the activity three times, whereas up to six sessions were offered to each. The highest frequency of interaction with the service was reported to be 21 times by a single beneficiary and it is not clear why this exceeded the number of sessions offered. The most common sole mode of transport used during the activities was walking (17%). Many interactions involved multiple modes of transport. Bus travel (on its own or in combination with walking, taxi, community transport and other modes) was involved in 42% of the interactions, followed by walking (on its own or in combination) which was a part of 37% of interactions. Community transport (28%) and taxis (12%) were also used either on their own or in combination with other transport modes or with walking.

### **Bikeworks**

Ride Side-by-side was a pilot delivered by Bikeworks in East and West London. It aimed to address the negative physical and mental impacts of loneliness through providing an e-cycle ‘taxi’ programme, an alternative to typical “dial-a-ride” or taxi services.

The CMD data indicates that the pilot reached a total of 871 unique beneficiaries. This shows that Bikeworks achieved seven per cent of their proposed target number of beneficiaries (n=12,960). The average age of beneficiaries across this pilot, for those for whom data was provided (n=246), was 51 years, with ages ranging from 3–94 years. There was a fairly even spread among those beneficiaries whose age was reported, across the 10-year age groups from 18 to 89 years. Just five per cent were below 18 years, and two per cent were aged 90 and over.

A high proportion of ‘prefer not to say’ was recorded by Bikeworks as the response to questions on age (72%), gender (56%), ethnicity (63%) and disability (63%). This high rate, combined with the absence of any responses marked N/A or left blank, makes Bikeworks an outlier compared with the other pilots. As it is not clear how the data was collected, ‘prefer not to say’ responses in the Bikeworks CMD have been treated as missing data when reporting our findings.

Among beneficiaries for whom data on gender was recorded (n=381), 61% were female compared with 38% who were male. One per cent made up the combined total of beneficiaries who identified as Non-binary or Other gender. Across ethnicity (n=319), beneficiaries were from a range of ethnic backgrounds: White ethnicities (40%), Asian/Asian British (23%), Black/Black British (22%), Other ethnic groups (13%), and Mixed Race (3%). Among beneficiaries for whom data on disability was collected (n=323), 46% were recorded as having No disability. A mobility impairment was the most common disability recorded at 18%, followed by being blind or having a visual impairment (8%), neurodiversity (7%), ‘Other’ condition (7%), a neurological condition (6%), mental health condition (5%), or a long-term health condition (3%).

On average, beneficiaries used the activity four times and the maximum frequency of cycle rides reported by a single beneficiary was 44. When asked about the purpose of their travel, 57% reported using the activity for ‘Fun/Leisure’ compared with 19% using the service to attend a community event, 7% who used the service to carry out a daily task, 6% who used the service to attend a health appointment, 6% who used the service to exercise, and 4% who chose ‘Other’.

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## Community Action Hampshire

Community Action Hampshire's pilot, Communities Tackling Loneliness with Transport in Hampshire, delivered in partnership with MHA Communities, Good Neighbours and Age Concern Hampshire, involved three sub-pilot interventions which aimed to support older people across Hampshire: Go To, an electric bike community delivery service; Sustainable Transport, a scheme to increase confidence in public transport use; and Community Cars, electric community car and minibus schemes. Specifically, these were aimed at older people experiencing high levels of loneliness and poverty, and long-term health conditions.

The CMD data from Community Action Hampshire (CAH) found that the pilot reached 155 unique beneficiaries, achieving 89% of its proposed beneficiary target (n=175). The average age of beneficiaries that took part in the pilot was 78 years and the age of beneficiaries ranged from 20–100 years (n=150). The largest age group among beneficiaries was those aged 80–89 years (40%), while most of the beneficiaries were aged 60 and over (92%). CAH adapted the original CMD drop down options for gender to include fewer reporting options (Male and Female). Across the pilot, 75% of beneficiaries were female and 25% were male. A limited range of ethnic groups were also recorded. The majority of beneficiaries identified as White British (92%) compared with 6% who chose 'prefer not to say', 1% who were Asian British and 1% who were from any other White background.

One-quarter (24%) of beneficiaries were not recorded as having any disability. The most commonly reported single disability was a mobility impairment (24%), followed by a neurological condition (17%), a mental health condition (3%), a visual impairment (2%) or a hearing impairment (1%). Sixteen per cent of beneficiaries reported having multiple disabilities, and thirteen per cent of beneficiaries answered 'prefer not say' to the question about disability.

Beneficiaries interacted with the pilot activities on average three times and the maximum number of interactions reported by a single beneficiary was 31 times. The majority of beneficiaries (80%) used the MHA Communities' electric car offered by the pilot compared with 14% who used the GoTo Trishaw Service (a passenger service via three-wheeled pedal vehicle powered by a rider), 6% who used the Age Concern minibus, and less than 1% who used the GoTo Delivery transport option. Beneficiaries used transport to engage in a range of activities: 79% used the pilot for a social / exercise purpose, 8% for a day trip, 6% for shopping and 6% for medical appointments.

## Community Rail Network

Community Rail Network's pilot, Engaging Young People Through Rail, aimed to help young people gain travel skills and confidence in using trains by encouraging them to increase public transport use (e.g., through rail-based excursions and youth-led projects). The pilot was implemented in three locations across England, with support from local partners.

The CMD data findings for Community Rail Network (CRN) reflect only the data collected on those beneficiaries who were aged 25 years and younger, as agreed with DfT. Data on a group of older beneficiaries initially provided by Community Rail Lancashire was removed. This was to align the dataset with the age group of the target beneficiaries for the pilot. Within the sample of those aged 25 years and younger, 350 beneficiaries were reached, which surpassed the original target of 170 for the pilot. The average age of beneficiaries was 17 years with an age range of 13–25 years. Almost two-thirds (65%) of beneficiaries reached were under 18 years while 35% were aged 18–24 years. Among those for whom gender was recorded (n=346), 56% were female compared with 41% who were male, 2% who were Non-binary and 1% who chose 'prefer not to say'. The ethnicities of beneficiaries recorded in the CMD (n=335) were people from White ethnic groups (71%), from



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Black or Black British ethnic groups (10%), from Asian or Asian British (9%), from Mixed Race ethnic backgrounds (6%), and any Other ethnic group (4%). One per cent of beneficiaries chose 'prefer not to say'.

Data on disability was recorded for 41% of beneficiaries (n=145). Of single disabilities that were recorded, having a learning disability (31%) or a mental health condition (28%) were the most common, followed by neurodiversity (14%). Among those beneficiaries for whom data on disability was available, 19% were recorded as having multiple disabilities.

On average, beneficiaries interacted with the pilot activity two times and the maximum number of interactions any one beneficiary had recorded was six times. Beneficiaries engaged in varied activities, among which, taking part in a 'Loneliness' activity accounted for 31% of all interactions. This was a series of three group sessions in schools and colleges, at which the young beneficiaries focused on identifying the signs of social isolation, developing coping mechanisms and resilience, and planning youth-led activities. The second most reported activity among beneficiaries was going on a rail trip (24%).

### **Community Transport Association**

Community Transport Association (CTA) funded transport pilot projects through their Grants Plus programme. Eighteen pilots were funded, with the majority focusing on cars and minibuses, and predominantly supporting older people and disabled people in a range of locations across England.

Community Transport Association reached 2,322 unique beneficiaries (including 181 volunteers), according to CMD data, which represented 82% of the original target for the pilot of 2,842 beneficiaries. The average age of beneficiaries excluding volunteers was 61 years and the age range was 3–100 years (2,139). The largest age group was of beneficiaries aged 80–89 years (28%) and there was a good spread of ages among those who took part. One-third (33%) were male, while 67% were female (n=2,318). Less than 1% of beneficiaries reported another gender in response to the question about gender, and less than 1% chose 'prefer not to say'.

People from a White ethnic background made up 72% of the beneficiaries for whom ethnicity was recorded (n=2321). The next two largest ethnic backgrounds among beneficiaries were people from an Asian/Asian British background at 16%, and people from a Black/Black British background at nine per cent. There were one per cent of beneficiaries with a Mixed Race ethnicity and one per cent from any Other ethnic group. One per cent chose 'prefer not to say'.

Data on disabilities was recorded for 50% of beneficiaries (n=1167). The remaining half were recorded by projects as N/A for disability. These responses were recorded as missing data because it is not possible to say with certainty whether this denotes data that was not collected (as instructed) or 'No disability' (which was an option in the CMD template). Among those beneficiaries for whom a disability was recorded, there was a range, with the most commonly reported disability being a mobility impairment (40%), followed by having multiple disabilities (13%), and having a long-term health condition (12%). Nine per cent (9%) had a neurological condition and six per cent (6%) were blind or had a visual impairment. Perhaps linked to the high number of beneficiaries for whom N/A was recorded, there were no beneficiaries for whom 'No disability' was definitively recorded. Lastly, 12% of the beneficiaries for whom data was provided, answered 'prefer not to say'.

The total number of interactions was 10,641 among the 2,141 beneficiaries. The mean average number of interactions for each beneficiary was two, and the maximum interactions by a beneficiary with an activity was 30. The types of activity engaged with were a day trip or excursion (2,624), a trip to a social activity or club (1,877),

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shopping (497), health and medical (200), support, or visit family and friends (141). A variety of transport modes were also used during the pilot ranging from a large minibus (more than nine seats) with 3,902 beneficiary trips, through a small minibus (nine seats or less) with 510 beneficiary trips, car (433 beneficiary trips), wheelchair accessible vehicles (326 beneficiary trips), and assorted other trips made with combinations of vehicles and in a few cases electric vehicles. The different transport modes were used across a number of activities and were not reserved for specific activity types.

### **Devon County Council**

Devon County Council's pilot involved several initiatives, including a publicity campaign, specialised "travel trainers" for unconfident travellers, Chatty Bus, (volunteers providing a friendly chat with passengers on bus journeys along with information linking people into community groups and services which can help to reduce loneliness and isolation), driver awareness training, and a community grants fund. The pilot aimed to support older people (aged 55+) and younger people (aged 16-24) across County Devon, with some initiatives focusing on transport "cold spots".

The CMD data indicated that Devon County Council (DCC) reached 784 unique beneficiaries. The average age of beneficiaries was 60 years and age ranged between 10–98 years old (n=776). The largest age group among beneficiaries was 50–59 years (27%) with 80% aged 50 years and above. Younger people aged 10–29 years made up 17% of the beneficiaries reached, and there were few participants aged 30–49 years (3%). Just over one-half (53%) of beneficiaries were female, 46% were male and 1% were Non-binary. The majority of beneficiaries for whom ethnicity was recorded (n=573) were from a White: British (91%) ethnic background. The next largest ethnic group among beneficiaries was made up of from an Asian/Asian British: Chinese background at 4%. Beneficiaries from various Mixed Race ethnic backgrounds made up around 1%, as did those from an Asian/Asian British: Any other Asian Background ethnic group (1%). There were only 2 beneficiaries (0%) for whom 'prefer not to say' was recorded. However, there was a large amount of missing data on ethnicity (27%, n=203), with either blank cells or N/A recorded in the CMD dataset.

The CMD data, for those beneficiaries with information recorded about disability (n=597), showed that the majority of beneficiaries had 'no disability' (45%). The most common single disability mentioned was a mobility impairment (13%), followed by a long-term health condition (8%), and a mental health condition (7%). Six per cent of beneficiaries for whom data on disability was recorded had multiple disabilities, five per cent were neurodiverse, five per cent had a learning disability, and four per cent were blind or had a visual impairment. A smaller proportion had a neurological condition (3%) or were deaf or had a hearing impairment (2%). Lastly, one per cent had another disability, and one per cent selected 'prefer not say'. There was 24% missing data on disability.

Beneficiaries interacted with the pilot on average three times and the most a beneficiary interacted with the pilot was 45 times. The activity that beneficiaries interacted with the most was attending an arranged social outing which represented over one-half of interactions (56%), compared with attending an activity club (31%), attending a community outreach event (5%), a travel buddy journey (2%), an on-board activity (2%), and attending training or adult education which accounted for 1% of the interactions with the activity.

### **Leeds Older People's Forum**

Leeds Older People's Forum (LOPF) delivered 12 projects through their Travel Connections pilot. Each of the projects fell under one the following categories: buses, taxis, active travel, community transport, or travel conversations.

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There were 903 unique beneficiaries in the Leeds Older People's Forum CMD return, which exceeded the target of 706 for the pilot. The average age was 73 years, and the age range was 16–99 years (n=893). The largest age group among beneficiaries was people aged 70–79 years (40%), while 87% were aged 60–89 years. One-third (34%) were male, and two-thirds (66%) were female, while less than 1% chose 'prefer not to say'. The ethnicity reported by beneficiaries was 90% from a White: British background, three per cent from a Black/Black British: Caribbean background, two per cent from an Asian/Asian British: Pakistani background, one per cent from Asian/Asian British: Any Other Asian background. People from other ethnic groups were represented among beneficiaries but at rates of less than 1%.

Just over one-third (34%) of beneficiaries for whom disability data was collected reported having 'no disability' (n=857). A long-term health condition was reported by 20%, a mobility impairment by 13%, while 8% noted that they had multiple disabilities. Other specific disabilities were reported by beneficiaries at lower rates, including a mental health condition (5%), a neurological condition (3%), and being blind or having a visual impairment (2%). Over one in ten (11%) chose 'prefer not to say' to the question. For 5% there was no information available (N/A), and this was treated as missing data.

The average number of interactions with the activities was four, the highest number of interactions with an activity for an individual beneficiary was 43 (group outings by minibus). The total beneficiary interactions with the pilot was 3,407 across a range of activity types. The most commonly reported activities were public bus travel (550), outdoor walks (510), Happy Cab rides (a hybrid electric cab that was bookable for trips to destinations, with the possibility of shared rides) (474) and consultation and conversations (342). In some cases, more than one activity was involved with the same interaction with the pilot, for example outdoor walks and consultation and conversation.

### **Living Streets**

Living Streets' pilot, Walking Connects, aimed to encourage walking as a social activity and tackle barriers to walking with the overall aim of reducing loneliness through walking activities and resources. The pilot aimed to support older people and disabled people in four locations in the North West of England, selected due to high levels of deprivation and loneliness, and low levels of walking.

Living Streets' Walking Connects pilot reached 350 unique beneficiaries according to the CMD return, which exceeded their target of 225. The mean average age of beneficiaries for whom age was recorded was 55 years, with an age range of 10–90 years. Almost two-thirds of beneficiaries whose age was available (n=290) were aged 50 years and over (64%) while eight per cent were aged 80 and over. 'Prefer not to say' was the response on age for 17% of Walking Connects beneficiaries overall. Among the beneficiaries for whom data on gender was provided (n=289), 59% were female, 31% were male, and one per cent were Non-binary. Eight per cent chose 'prefer not to say' to the question on gender. There was significant missing data (17%) which was excluded. Data on ethnicity, where recorded in the CMD, indicated that 76% of beneficiaries were from a White ethnic background, seven per cent were from an Asian or Asian British ethnic background, and one per cent were from a Mixed Race background. Additionally, one per cent were recorded as being from a British African ethnic background, which was not one of the standard groups provided in the template. 'Prefer not to say' was recorded for 16% of beneficiaries where data was provided. There was no data available on ethnic background (N/A) for 17% of the total unique beneficiaries, so this was treated as missing and excluded.

Among those with available data (n=290), 41% reported having 'No disability', while six per cent had multiple disabilities. Specific conditions reported by beneficiaries included a long-term health condition (5%), a mobility

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impairment (5%), deaf or hearing impairment (4%), a mental health condition (3%), and 'Other' (2%). Other specific conditions were noted at lower rates. Nearly one-third (31%) chose 'prefer not to say' to the question about disability. For 17% of beneficiaries there was no data recorded about disability, so these cases were treated as missing data and excluded.

There were a total of 1,137 interactions with the pilot. Beneficiaries had on average two interactions. All of the beneficiaries interacted with the Led Walk activity (100%). Over one-fifth (21%) engaged with the Community Street Review activity, 17% took part in the Community Street Review training, and 16% in the Walk Leader training.

As noted above, there was missing data for gender, ethnicity, and disability for 17% of the unique beneficiaries with data in the CMD.

### **Transport for West Midlands**

The Let's Chat pilot aimed to support people with certain protected characteristics in five areas of the West Midlands, chosen based on high levels of reported loneliness. These were: Birmingham, Coventry, Sandwell, Walsall, and Wolverhampton. A key focus of the pilot was signposting beneficiaries to other services, including debt management and healthcare advice.

The CMD data collected by Transport for West Midlands (TfWM) indicated that the pilot reached 2,331 unique beneficiaries, representing 28% of the target figure of 8,315.

The average age of beneficiaries was 63 years, with ages ranging from 6-101 years (n=2,256). There was a fairly even spread in the age of beneficiaries, with 78% aged 50 and over, while the 70–79 years age band was the largest ten-year age group (23%). Three per cent chose 'prefer not to say' to the age question. Nearly two-thirds of beneficiaries were female (62%), compared with 37% who were male (n=2,316). Less than one per cent reported a non-binary identity. Less than one per cent chose 'prefer not to say' to the question on gender. A White ethnic background was reported by 81% of beneficiaries for whom data was available (n=2,320), followed by 10% from an Asian/Asian British ethnic group background, five per cent from a Black/Black British ethnic background, and two per cent from a Mixed Race ethnic background. One per cent reported being from Any Other ethnic group and one per cent chose 'prefer not to say'.

There was missing data (blank cells or N/A) on disability for 17% of the beneficiaries and this was treated as missing data and excluded. Among those for whom data was available (n=1,938), 28% reported having 'no disability'. The most commonly reported disabilities were mobility impairment (29%), a mental health condition (10%), a long-term health condition (8%), a learning disability (6%), deaf or hearing impairment (3%), blind or visual impairment (3%), or a neurological condition (3%). Three per cent reported having multiple disabilities and eight per cent answered, 'prefer not to say'.

There were a total of 10,912 interactions recorded, an average of four interactions per beneficiary. The highest number of interactions for an individual beneficiary was recorded as 130. The community transport hub had the most engagement with 72% of interactions recorded against that activity. By contrast the Door to Door Community Transport had 22% of total interactions and the Let's Chat community bus had seven per cent.

Missing data for the TfWM pilot included disability (17%), age (3%), and less than 1% for gender and ethnicity.

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## **Volunteering Matters**

Volunteering Matters' pilot, Connect+Go, focused on providing companionship for young people (aged 16-25) through opportunities for communication and connection. The pilot aimed to deliver a community transport service through a paid-for minibuss transport service and paid-for tuk-tuk transport service, the latter of which involved full-time volunteer companions. "Connect+Go" was based in Nuneaton and wider Warwickshire, focusing on supporting young carers, asylum seekers, and refugees.

The Volunteering Matters pilot reached 116 unique beneficiaries, which was 19% of the target figure of 600. The average age of beneficiaries was 28 years, with an age range of 10–71 years (n=99). The largest age band among Volunteering Matters beneficiaries was 18–29 years (40%). Overall, 85% of the beneficiaries reached were below the age of 40 years. Just over one-half (52%) of the beneficiaries were male, while 47% were female. The pilot reached beneficiaries from a diverse range of ethnic groups, with 35% who were from a White ethnic background, 44% who were from Any Other ethnic group (including those from an Arab background who made up nine per cent of all the beneficiaries), and 10% who were from an Asian/Asian British: Indian background. Other ethnicities were also represented in lower numbers.

The majority of beneficiaries with data recorded (n=98) did not have a disability (75%). Six per cent had a long-term health condition, while three per cent had a mobility impairment, and two per cent had a learning disability. One per cent recorded a mental health condition and one per cent reported having multiple disabilities. Eleven per cent selected 'prefer not to say' to this question and for 16% of beneficiaries 'Not applicable' was noted in the CMD, so these were excluded as missing data.

There was a total of 504 interactions with the pilot activities and an average of four interactions per beneficiary with activities. The activity types were grouped as either social (236 interactions) or statutory (106 interactions) and the transport mode in all cases was minibuss.

Data provided in the CMD was complete apart from 15% of missing data for the age characteristic, and 16% for disability.

