



# Annual care farming and green care survey 2021: Full report



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The Growing Care Farming team at SF&G would like to thank all the care farmers, green care practitioners and those working towards opening a care farm or green care site who spared the time to complete our online survey. We would also like to thank staff at Social Farming Ireland (SoFI) and Rural Support in Northern Ireland for providing information on Irish social farms. Thanks also go to colleagues at Thrive and FarmBuddies (and any other organisations) who shared the survey to their networks.

## Key Findings

### The numbers:

- In 2021, there are 402 care farms and green care providers currently operating in the UK and a further 80 in Ireland. There are also an estimated 220 'prospective' care farms and sites in various stages of development. The number of care farms has grown by 34% since the previous survey in 2019/20
- In England, the total number of weekly care farming places reported by care farms in the survey is 2,730 (from 19% of care farms). If we included numbers from 100% of care farms in England, the total increases to approximately 14,368 places per week. As care farms are delivering services for an average of 47 weeks per year, it is reasonable to conservatively estimate that care farms are currently **delivering 675,296 places per year in England alone** (representing a 54% increase from 438,656 since the last survey) and **734,140 places per year in the UK** (a rise in 57% since the last survey where annual places were estimated at 469,660).
- Considering the current average of 62% operating capacity of care farms and green care providers, if all the places were filled, care farms could potentially provide around 23,174 service users a week in England and 25,194 in the UK (equating to over a million places per year in England and 1,184,000 care farming places per year in the UK). There is therefore a significant amount of latent potential for care farming to expand as an option in health, social and educational care.

### About active care farms and green care sites:

- Most care farms are either charities (33%), Community Interest Companies (25%) or Limited Companies, Charitable Companies Limited by Guarantee and partnerships. Just under half are owner occupiers (43%), 33% rent their land, 19% have been given the land for a peppercorn rent and 5% provide services on an outreach basis (either as their main or additional provision).
- Most care farms in the UK work with a variety of different client or service user groups (average 5 different groups), typically providing services for individuals from these different client groups simultaneously (where appropriate). 79% of care farms and green care providers work with adults, 59% work with children and 44% work with both.
- For adults, the most common service user groups attending care farms are those with a Learning Disability (62% of care farms), with mental ill-health (61%), with ASDs (61%) and with learning difficulties at 49%. For young people under 18, learning difficulty (52%), ASD (52%), Learning Disability (41%) and those excluded from school or on Alternative Provision (25%) are the most common service user groups catered for.
- The average care farm or green care site is open for 47 weeks per year (although this can vary depending on set up and context), delivering services between 1 and 7 days a week (average 5 days), with the majority (93%) providing non-residential services.
- There is much variation between the number of daily service users on a site, depending on the service user group and care farm set up. However, the average care farm or green care provider caters for 11 service users per day. The frequency of attendance at a care farm varies enormously depending on an individual's need and the context, but typically, service users attend care farms once or twice a week.
- The charges for care farming sessions also varies widely depending on session length and service user need and ability. Some care farms charge for individual sessions by the hour (average cost £32 p/h), most charge for a full day session (average cost £68) and others charge for a group between 8-10 service users (average charge £210).
- The referral and funding context for care farming and green care places varies enormously and can be quite complex. The average care farm and green care provider will work with at least 4 different referral agencies or commissioning bodies. Referrals can come from many diverse

sources including health, social care and education, but 55% of care farms see referrals from families or carers, followed by Local Authority Social Services (53%), via personalised social care budgets (46%), and from Specialist Education services at (42%).

- Referrals to a care farm may come with or without funding. Some routes are better at providing funding for their individual referrals than others. Over 80% of referrals from i) Local Authority social services; ii) self-referrals via personal social care budgets; iii) Local Authority schools; and iv) SEN services, come with associated funding to pay for the service provision, compared to 30% or less from social prescribing and other healthcare referrals. However, associated funding for referrals from probation services, Children's Mental Health Teams (CMHT) and Voluntary and Charitable Sector (VCS) organisations has increased since the last survey.
- When an individual referral comes with associated funding, the care farm can provide the service, as costs are covered. If a referral does not come with adequate funding, the funding needs to be found from elsewhere. As a result, care farmers must access other funding sources to adequately cover the costs of providing services and site maintenance.
- Grant or charity funding is accessed by 66% of care farms, with 57% of sites accessing donations and 45% of organisations undertaking fundraising activities. Finding additional funding to pay for the care farming or green care service provided can put considerable strain on care farm resources, planning and the longer-term financial sustainability of the care farm.
- This year we asked care farmers to tell us how they had been impacted by Covid-19 lockdowns and continued restrictions. In terms of lost delivery, this varied from site to site with 12% losing no delivery time and others losing 75 weeks (just over 18 months). On average, care farms and green care sites lost 23 weeks (almost 6 months) of delivery due to the pandemic restrictions.
- 37% of care farms have seen an increase in enquiries and 29% an increase in referrals due to Covid-19, although 28% experienced no change. Other changes included a low number of referrals during lockdowns, followed by surges and backlogs as they were lifted; some service users being hesitant to return due to Covid anxiety; and a change in type of referral and service user 'type'.
- Care farmers and green care providers developed new ways of working and created innovative ways to stay in touch with their service users during the pandemic. We asked them to let us know about any changes their organisation made, and which were so successful that they are continuing them in the future. The majority told us that they would be continuing with their innovations such as engaging on social media, online newsletters, online support sessions and changed operating procedures but about 10% told us that they would be stopping their remote delivery after Covid.
- Funding and operational costs were identified as the biggest challenges facing care farmers and green care providers now, followed by securing contracts and accessing referrals and then finding staff and Covid-related issues.

#### About prospective care farms and green care providers:

- This year we asked care farmers and green care providers what additional support, resources or opportunities that would help either their individual care farm or the wider green care sector. Some identified stable funding streams and funding to cover core costs as key, whilst others highlighted the need for networking and collaboration between care farmers, more advocacy and promotion of the sector at national level, more training opportunities and suggestions for useful support and resources and help to match land available to where land is needed for care farms.
- This year, prospective care farmers and green care providers (those in the planning stages or being close to opening for business) were included in the survey. Just over a third told us they are at the planning and research stage and just under a third are at the stage of developing their offer and preparing their site.

- In terms of intended legal governance, around a third (30%) of prospective care farms told us they had not yet thought about their intended governance, 22% intend to become a Community Interest Company and 19% intend to become a charity (either a Charitable Company Limited by Guarantee or Charitable Incorporated Organisation (CIO)).
- The majority of prospectives (86%) told us they have a site lined up from which to deliver their care farming or green care provision and 14% have not. Of those who have a site lined up, 63% own the land, 20% have been given the land for no charge or a peppercorn rent and 17% plan to rent the land.
- 75% of prospective care farms and green care sites plan to work with adults; 69% plan to work with children and 45% want to work with both.
- The challenges facing prospective care farmers and green care providers vary widely but there were some re-occurring challenges identified, including finding start-up funding (23%), accessing referrals and planning and preparing for delivery (both at 16%) followed by funding for referral and planning permission / legal issues (both at 12%).
- We also asked prospective care farmers to tell us what resources, support or opportunities they would find useful to help them on their journey to set up a care farm or green care site. Around a third of prospectives said they would like help with finding funding (both for start-up and referrals), others said they would like mentorship and general operating advice on all aspects of care farming, and some would appreciate networking opportunities with other green care providers and business planning advice
- Finally, we were interested to hear how the Covid-19 pandemic had affected progress in developing care farms or green care sites over the last year. About half of the prospectives said that their plans and progress had been delayed in some way but that things were now moving forward, around a third told us that Covid made no difference to how they were progressing, and others said that the pandemic gave them more planning time which enabled them to progress faster.

## 1. Introduction

### 1.1. What are green care and care farming, and who are they for?

#### 1.1.1. Green care and care farming

Green care refers to structured therapy or treatment programmes that take place in natural surroundings<sup>1</sup>. Green Care Programmes are designed, structured and facilitated for individuals to achieve clear patient-orientated outcomes and use a person-centred approach to increase the benefits. Green care approaches include care farming, Social and Therapeutic Horticulture (STH) and animal assisted interventions.

Care farming (sometimes called social farming) is the therapeutic use of farming practices.

Care farms:

- Deliver health, social or specialist educational care services for individuals from one or a range of vulnerable groups of people.
- Provide a programme of farming-related activities for individuals with a defined need
- Provide supervised, structured, bespoke care services on a regular basis for service users
- Are commissioned to provide services by a range of referral agencies
- Deliver services for adults, young people and children

On care farms, components of either the whole or part of the farm (or site) are used to provide health, social or educational care through a supervised, structured programme of farming-related activities. All care farms offer some elements of farming (involving crops, horticulture, livestock husbandry, use of machinery or woodland management etc.); but there is much variety across care farms in terms of the context, the client group and the type of farm or site. Many care farms offer therapeutic contact with farm livestock; some provide specific animal assisted therapies and others also offer social and therapeutic horticulture and environmental conservation activities. More information on care farming can be found [here](#).

#### 1.1.2. Who is care farming and green care for?

Care farms and green care sites provide services for a wide range of people, including those with defined medical, social or special educational needs. For example, care farms work with people experiencing mental ill health, people with a Learning Disability or ASD, physical disabilities, those with dementia, those with a drug history, ex-service personnel, young people excluded from school and on Alternative Provision, as well as those experiencing the effects of work-related stress or ill-health.

Although the primary beneficiaries of care farming are the service users attending such programmes, society as a whole also benefits due to the reduction of strain on statutory services such as the NHS. Farmers are also able to benefit through the diversification of income and purpose, as care farming provides an alternative way to use their farm, in the provision of health, social and educational care services in addition to or instead of commercial agricultural production.

### 1.2. Growing Care Farming

Social Farms & Gardens, in partnership with Thrive, are delivering the [Growing Care Farming](#) (GCF), project as part of the Government's Children & Nature programme<sup>2</sup>. The key aim of GCF is to transform the scale of the care farming sector across England through the provision of central support and advocacy, training and resources, quality assurance via the care farming Code of Practice and through the facilitation of networking. The project vision is for these core elements to

<sup>1</sup> See the Green Care Coalition <https://greencarecoalition.org.uk/>

<sup>2</sup> Supported by Defra, funded by the Department for Education and managed by Natural England

create more opportunities for children and adults with a defined need to benefit from the bespoke health, care and educational services provided on care farms.

### **1.3. Annual survey of care farms and green care providers**

Social Farms & Gardens<sup>3</sup> have a history of tracking the scale and scope of the care farming sector, taking regular snapshots of the state of play since the first one in 2007 see [here](#). In 2020 the survey changed slightly, with some adapted and new questions contained in the survey, in line with requirements for GCF, this survey was considered the baseline for the GCF project. In 2021, the survey was delayed by six months from January to August until after the worst of the lockdowns and restrictions were lifted in order to gain more accurate data on the current state of play of the sector. This year we also included questions relating to the effects of Covid-19 restrictions and extended the survey to include responses from prospective care farmers and green care providers.

The 2021 annual survey was created using SurveyMonkey and then sent out via email to all care farms, green care organisations and prospective care farms on the Growing Care Farming (Social Farms & Gardens) database in August. The link to the survey was also publicised via our twitter account and forwarded onto to other networks by our team, Thrive and other stakeholder organisations.

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<sup>3</sup>Including predecessors Care Farming UK and the National Care Farming Initiative

## 2. Survey Results – Active care farms and green care providers

### 2.1. Points to note

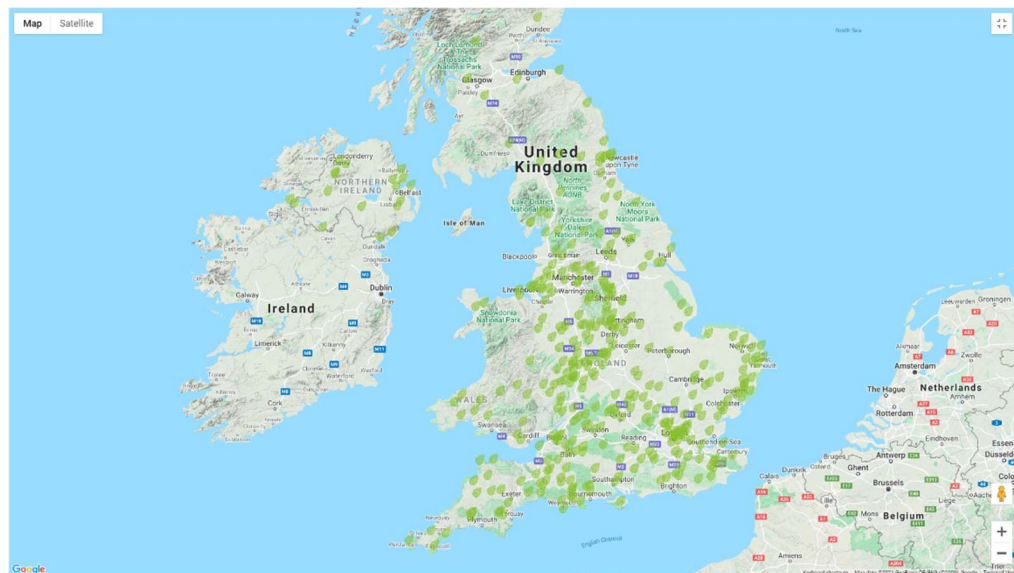
- The care farming survey was open to both care farms that are fully operational and to those in the planning stages, to track scale.
- As there were no significant differences between responses received from care farmers in the four countries, these have been analysed together to add more depth to the results.
- The annual survey was delayed by six months and conducted after the worst of the 2020 Covid-19 restrictions. Any resultant changes in provision due to the pandemic are therefore represented in this survey report.
- In this report, the results from care farms and green care sites are shown in Section 2 and results from prospective care farmers and green care providers are shown in Section 3.

### 2.2. Numbers and location of active and prospective care farms and green care providers, and the response rate of survey

#### 2.2.1. Number of care farms and green care providers and the response rate

According to a database held by Social Farms & Gardens, information held by [Rural Support](#) in Northern Ireland and [Social Farming Ireland](#) in the Republic of Ireland, there are 402 care farms currently operating in the UK and a further 80 in the RoI. There are also an estimated 220 prospective care farms<sup>4</sup> in various stages of development.

In total, the survey was completed by 127 respondents<sup>5</sup>, from care farms and prospective care farms across the UK, there were 79 responses from active care farms and green care sites (representing a response rate of 19%) and 34 responses from prospective care farms (representing a response rate of 15%)



Source: SF&G CiviCRM, Google maps

Both the numbers of care farms and prospective care farms show an increase since the previous survey in 2019/20.

<sup>4</sup> Prospective care farms are those farms/ sites that are in the planning stages or being very close to opening for business.

<sup>5</sup> Not all of these were valid data, duplications and blank responses were removed from the analysis



In terms of new care farms (i.e., sites that have opened since Jan 2020), of the 79 care farms in the survey, 14 had opened since Jan 2020, 13 in England and one in Scotland. The regional distribution of care farm members of Social Farms & Gardens across the UK can be seen [here](#) and for care farms who have achieved the Code of Practice [here](#).

## 2.2.2. Country representation

Care farms from all the regions of the UK completed the online survey, full results are shown in Table 2.1. The majority of the responses were from care farms in England.

**Table 2.1 Number of care farms and survey response rate by country**

Country	Number of care farms		Number of care farms taking part in survey		Response rate as percentage % of total		Number of prospective care farms		Number of prospective care farms taking part in survey	
	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
England	253	344	74	66	30%	19%	99	200	17	27 (14%)
Scotland	12	15	9	5	75%	33%	6	10	1	1 (10%)
Wales	10	17	5	3	50%	18%	3	15	5	3 (20%)
Northern Ireland	24	26	1	2	4%	8%	4	4	2	1 (25%)
<b>Total for UK</b>	<b>299</b>	<b>402</b>	<b>93</b>	<b>79</b>	<b>31%</b>	<b>20%</b>	<b>112</b>	<b>229</b>	<b>25</b>	<b>34 (15%)</b>

A total of 93 people responded to the survey in England, comprising 66 care farmers and 27 prospective care farmers.

The 66 care farmers and green care providers who took part in the survey represent 20% of the estimated total care farming sector in England. There was a good geographical spread of responses to the survey from across the regions of England. 33% of care farms in Scotland completed the survey, 18% of the care farms in Wales and 8% of the care farms in Northern Ireland.

For prospective care farmers and green care providers, there was also some geographical spread of responses, but the majority were in England. The prospectives who took part in the survey represent a response rate of 15%.

## 2.2.3. International responses

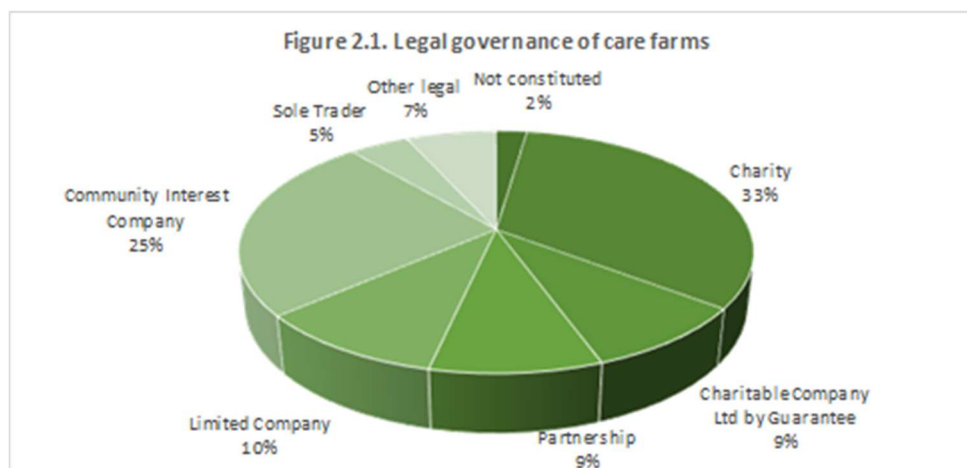
There were three responses from care farms outside the UK, but these have not been included in this report.

## 2.3. About care farms and green care providers in the survey

### 2.3.1. Organisational governance

In terms of legal governance of the care farms and green care providers, this year the question was not asked specifically but data from the last survey indicates that just over a third of care farms are charities and just under a third are Community Interest Companies. Full results from 2020 can be seen in Figure 2.1

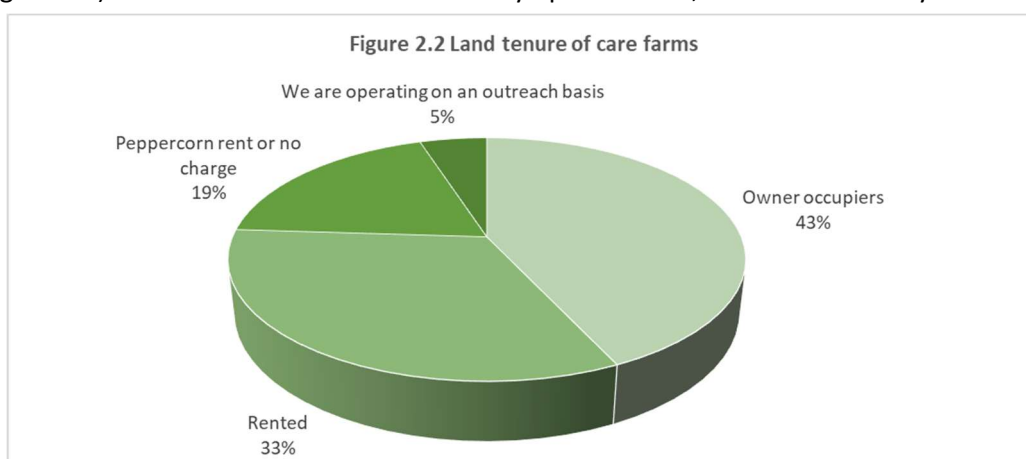
Other legal entities included: Social Enterprise limited by guarantee and others that are both a charity and a Company Limited by Guarantee.



### 2.3.2. Land tenure

Most care farms and green care sites taking part in the survey are either owner occupiers or rent their land (See Table 2.2 and Figure 2.2). Care farms that rent the land they operate from, rent from a variety of

landowners, ranging from Local Authorities, schools, commercial farms, farm trusts and the NHS. 5% of care farms and green care sites are operating on an outreach basis either as their main delivery type or in addition to their on-site delivery.



**Table 2.2**

Land tenure of care farm (percent %)	Year	
	2020	2021
We are owner occupiers	43	43
We rent the land/site	36	33
We have been given the use of the land / site for a peppercorn rent / no charge	21	19
We are operating on an outreach basis	0	5

### 2.4. About the people that attend care farms and green care sites

The majority of care farms and green care providers (79%) work with adults, 59% work with children and 44% work with both. Most care farms work with a variety of different client or service user groups too, with the average being 4 different client groups (5 for those working with young people). The minimum number of groups worked with was 1 (13 care farms in survey) and the maximum 9 (one care farm in survey). Care farms either work with several client groups on site at the same time or where this is not appropriate, with different groups on different days or on different areas of the site.

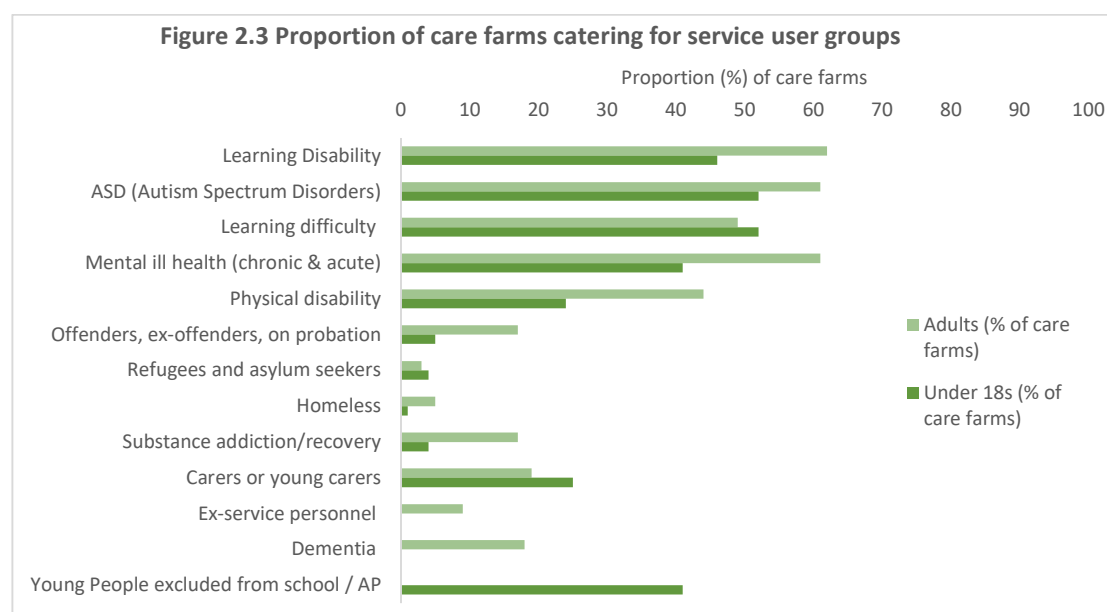
In the UK, the service user groups with the highest proportion of care farms delivering services to them are adults with a Learning Disability (62%) adults with mental ill-health (61% of care farms), and adults with

ASD (61%), with adults with learning difficulties at 49%. For care farms which are delivering services to those under 18, learning difficulty (52%), ASD (52%), Learning Disability (41%) and young people excluded from school or on Alternative Provision (25%) are the most common service user groups catered for. The proportion of care farms working with the main service user groups are shown in Table 2.3 and Figure 2.3.

**Table 2.3 Proportion of care farms and green care providers catering for service user groups**

Service user group	Adults (% of care farms)		Under 18s (% of care farms)	
	2020	2021	2020	2021
Learning Disability	72	62	44	46
ASD (Autism Spectrum Disorders)	65	61	52	52
Learning difficulty (ADHD, dyslexia, dyspraxia etc.)	54	49	53	52
Mental ill health (chronic and acute)	67	61	37	41
Physical disability	47	44	23	24
Offenders, ex-offenders, those on probation	22	17	7	5
Refugees and asylum seekers	11	3	4	4
Homeless	11	5	2	1
Substance addiction/recovery	28	17	5	4
Carers or young carers	20	19	23	25
Ex-service personnel (adults only)	14	9	N/A	N/A
Dementia (adults only)	31	18	N/A	N/A
Young people excluded from school or on Alternative Provision (under 18s only)	N/A	N/A	50	41

Over the last year, other client groups worked with have included local children with and without special needs, home educating families, local disadvantaged (defined as receiving free school meals) under 18s and youth groups from urban areas (usually disadvantaged), victims of domestic violence (both male and female) and family members affected by addiction.



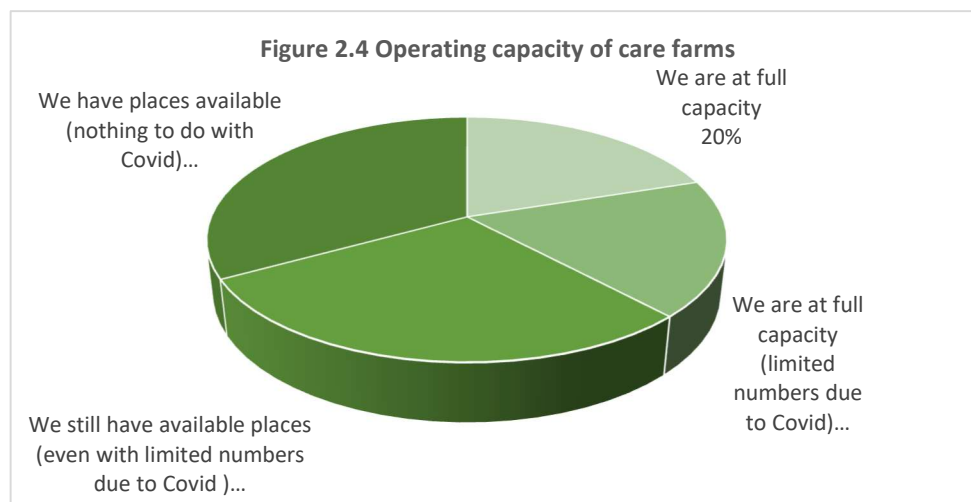
## 2.5. About services provided

### 2.5.1. Care farm and green care site capacity, delivery and effects of Covid-19

### Care farm capacity

- In 2020, two thirds (67%) of care farms taking part in the survey said that they were not running at their full capacity and although capacities obviously varied, the average operating capacity from care farms in the survey was 63% (see Table 2.4 and Figure 2.4).

- In 2021 we refined this question to consider restrictions on total capacity necessitated by Covid-19 social distancing requirements. 62% of care farms are not running at capacity.



- Just under half of the care farms who said they were operating at full capacity said this is due to Covid 19 restrictions.
- Findings suggest that more care farms have spare capacity now than they did pre-pandemic.

**Table 2.4 Operating capacity of care farms**

Operating capacity of care farm (percent %)	
We are at full capacity	20
We are at full capacity (but only because we are having to limit our numbers due to social distancing and Covid)	18
We still have available places (even though we are limiting our numbers due to social distancing and Covid precautions)	29
We have places available (nothing to do with Covid)	33

### Delivery

- The average care farm is open for 47 weeks per year (up from 46 in 2020). Although this can vary from 5 week to 52 weeks a year depending on set up and context.
- The care farms in the survey deliver services on anything between 1 and 7 days a week, with the majority opening for 5 days per week. The most popular days are still Thursday and Tuesday. 31 care farms in the survey (39%) also offer services at weekends (a slight increase since the last survey).
- Although this year the question about residential services was not asked, in 2020, most care farms (93%) provide non-residential services, with only 7% of care farms offering residential provision.
- This year we asked care farmers to tell us how many weeks of delivery they had lost due to Covid-19 lockdowns and continued restrictions. This varied enormously from site to site with some care farms (12%) losing no delivery time and others losing 75 weeks (just over 18 months). On average, care farms lost 23 weeks (almost 6 months) of delivery due to the pandemic restrictions.

## 2.5.2. Services provided – frequency and number

### Frequency

How frequently a person attends a care farm varies enormously depending on individual need and context. Typically, service users attend care farms from once or twice a week<sup>6</sup>.

### Numbers of service users

There is much variation between the number of service users catered for on each day – between 2 and 52, depending on the service user group and care farm set up. However, the average is 11 service users per day, per care farm or green care provider.

## 2.5.3. Length of session

The length of a care farming or green care session varies from care farm to care farm and will depend on the abilities or requirements of each service user. Care farming places are typically for a day session but there are morning sessions, afternoon sessions and hourly sessions available too.

## 2.5.4. Charges for care farming and green care sessions

The cost of care farming sessions also varies widely depending on session length and service user need and ability. Some care farms charge for individual sessions by the hour, others charge for a full day session and some charge for a group between 8-10 service users. Care farmers in the survey were asked how much a 'typical' care farming session costs –

- For care farms that charge per day session, costs ranged from extremes of £12 to £300 with an **average cost per day session of £68** (an increase of £9 on the last survey where the average cost was £59 per session).
- For those charging by the hour, rates varied from £10 to £50, with an **average of £32 per hour**.
- For care farms who charge per group, the costs ranged from £100 to £350 with an **average cost of £210 per group** (up £50 on the previous survey).
- 6 respondents told us that they did not charge for green care services at all, these were either community garden (3), allotment project (1) or school (1) sites.

How the care farmers and providers charge for their services depends on how the service users are referred or services commissioned. Although the service may be free to the service user at point of delivery, funding of the services is usually by commissions or grant funding – see section 2.6 for more details.

## 2.6. Referral routes and funding

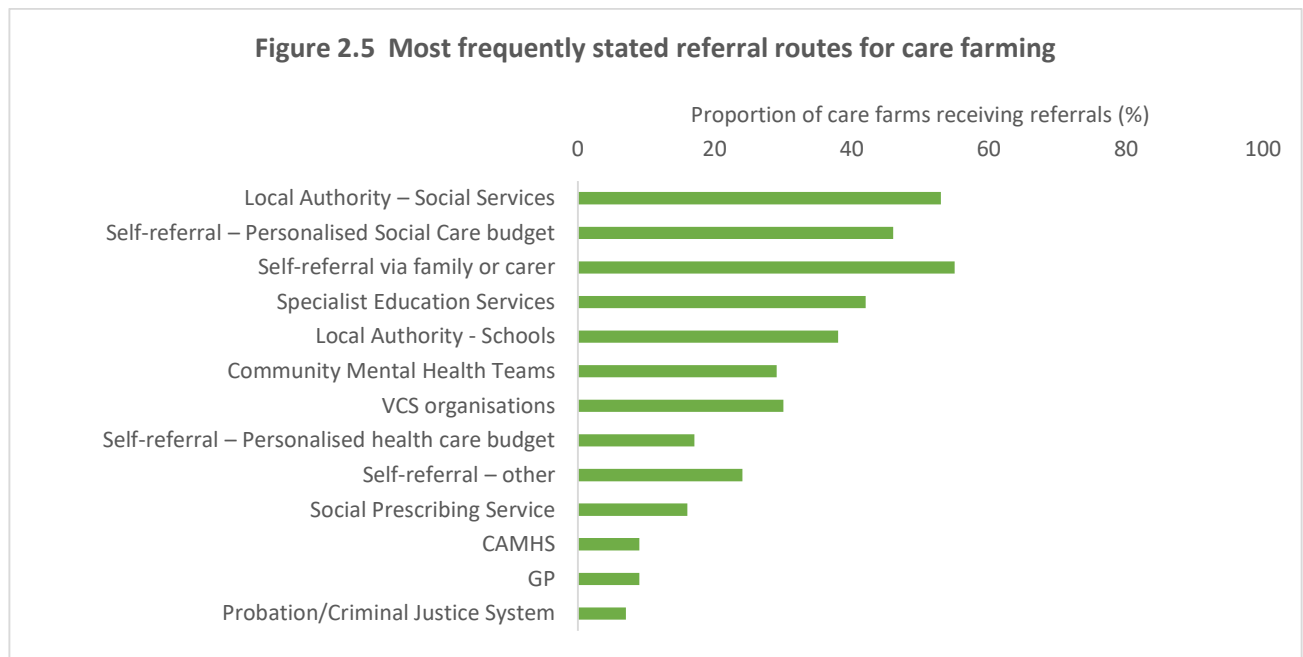
The referral routes and funding for care farming places varies enormously and is often a complex picture to understand. There is variation not only locally and regionally, but also between the different commissioning routes.

### 2.6.1. Referral routes

In 2019/2020, the most frequently cited sources for referrals for service users were via personalised social care budgets, Local Authority Social Services, referrals from families or carers, and Specialist Education services. In 2021 the most frequently cited sources for referrals for service users are still via the same sources but the order has changed slightly (see Figure 2.6). Referrals from families or carers now lead the

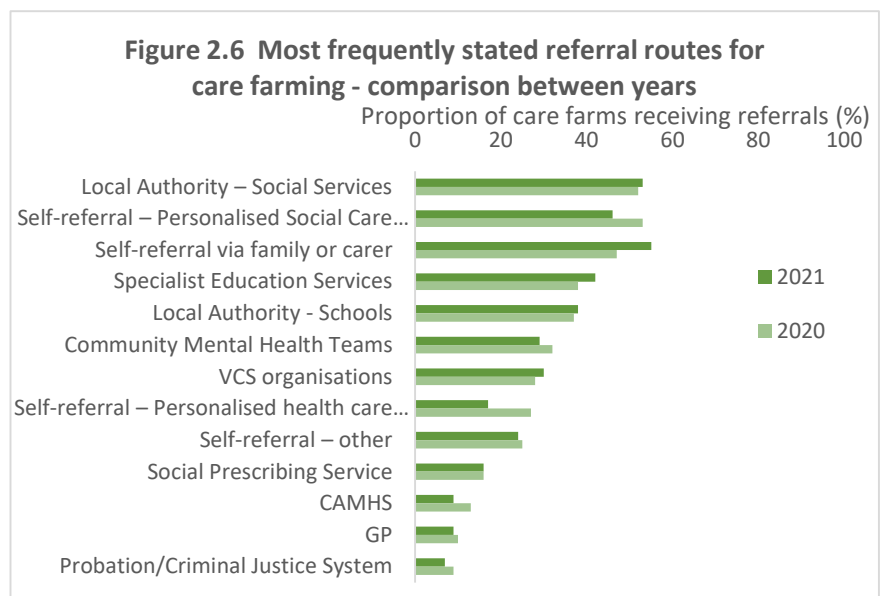
<sup>6</sup> Frequency of attendance was not asked in this survey, but historic data from previous surveys suggests frequency of attendance has remained similar over the last 10 years.

board with 55% of care farms gaining referrals, closely followed by Local Authority Social Services (53%), via personalised social care budgets (46%), with Specialist Education services at (42%). Other referral sources are shown in Figure 2.5. and Table 2.6 (in section 2.6.3).



Additional referral routes mentioned by care farmers include children's residential care homes, colleges looking to support young people with additional needs, referrals from clinical psychologists, housing officers and mutual aid recovery groups (e.g., AA) and other addiction services.

Typically, the average care farm will work with at least 4 different referring agencies and commissioning bodies – although results show it can vary between 1 and 12 different referral routes for service users.



### 2.6.2. Effects of Covid-19 on referrals

37% of care farms have seen an increase in enquiries and 29% an increase in referrals, with 28% experiencing no change (Table 2.5)

**Table 2.5 Changes in enquiries and referrals due to Covid-19**

<b>Changes in enquiries and referrals due to Covid-19 (percent %)</b>	
Increase in enquiries	37%
Increase in referrals	29%
No change	28%
Decrease in enquiries	13%
Decrease in referrals	13%
Other changes	7%

Other changes due to Covid-19 include low number of referrals during lockdowns, followed by surges and backlogs as they were lifted; some service users being hesitant to return due to Covid anxiety; and a change in type of referral and service user 'type'. Additional comments can be found in Box 1.

#### **Box 1. Other Covid-related changes**

*"People who did come are still too anxious to come back" "Caution from existing clients to return when we reopened. Increase in use by special schools as our venue satisfies their Covid risk assessment where other venues they used aren't able to (e.g., we provide exclusive use of toilets)"*

*"Fewer during lockdown - only high risk (suicide, severe MH, Child protection, DV), now higher than usual."*

*"Referrals paused during lockdowns and there are now backlogs with referral agents that are beginning to filter through" "Referral ceased all together during the height of the pandemic (and we weren't taking new people on anyway) Now though, we have a surge of referrals."*

*"During lockdown we lost clients until they felt they could be allowed to return. We were certainly needed, and clients with Autism were still allowed to attend. Still numbers low."*

*"A great deal of interest due to social media with many more visits requested and also to link with farming. Local media visits have been good."*

*"Transport is harder to access"*

*"We received no schools, but a lot of adult community members came to volunteer and work (around 40)".*

*"Increase in individual child referrals, decrease in residential referrals." "Some needed to shield and stopped attending, while others asked for additional days whilst alternative activities were unavailable." "Some service users didn't attend while they were shielding but others asked for extra days because other services were closed."*

*People used us as part of their daily exercise during lockdown"*

*"We were not able to participate during Covid lockdown. We were closed to the public"*

*"We remained open so no change to running structure."*

*"We have a waiting list as more people wish to work outdoors, fresh air and space"*

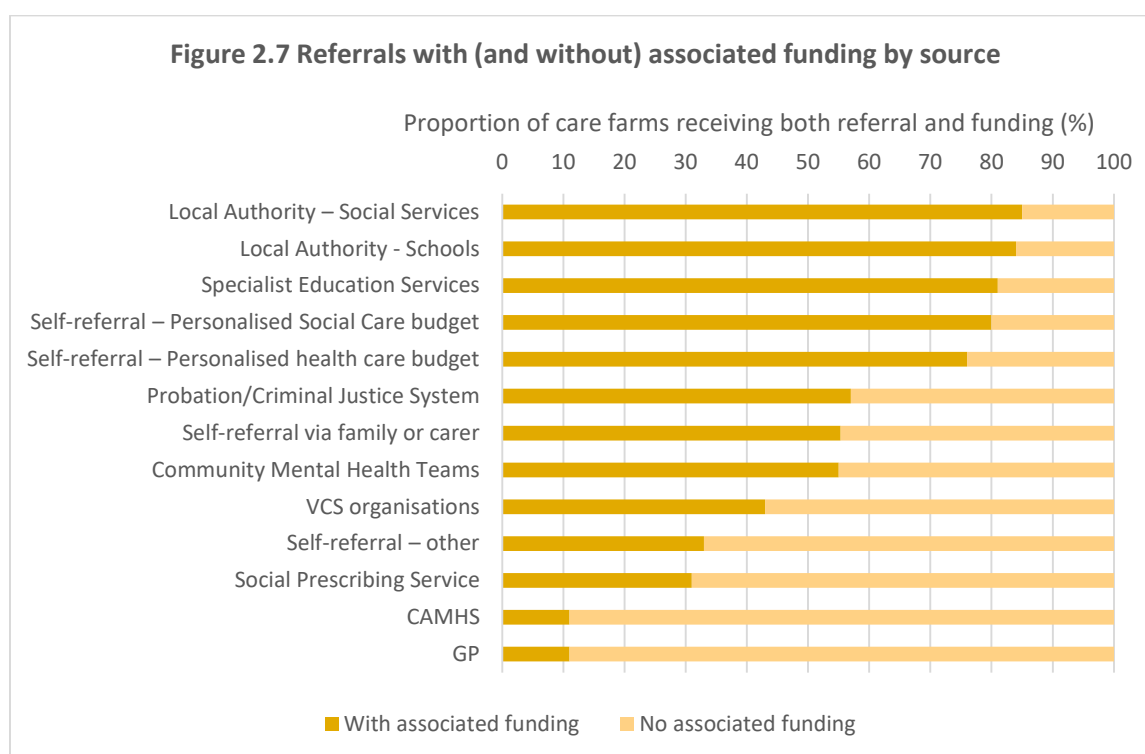
*"Our focus during covid has been changed to outreach rather than bringing in people to the garden - we have far more contact in the local community/online in 2020 than previously"*

*"All activities had to go online. More women have come forward for help. People living in rural areas have withdrawn from the activities. We are trying to address this with a new volunteer programme and mutual aid group structure."*

### **2.6.3. Funding of care farming and green care places**

#### Funding from referrals

Referrals to a care farm may come with or without funding. Some referral routes are better at providing funding for their individual referrals than others – see Figure 2.7 Table 2.6.



Again currently, referrals from social care and education seem to be better funded than those from health. Over 80% of referrals from i) Local Authority social services; ii) self-referrals via personal social care budgets; iii) Local Authority schools; and iv) SEN services, come with associated funding to pay for the service provision, compared to 30% or less from social prescribing and other health referrals. However, associated funding for referrals from probation services, Children’s Mental Health Teams (CMHT) and Voluntary and Charitable Sector (VCS) organisations has increased since the last survey.

**Table 2.6. Care farm referral sources and associated funding**

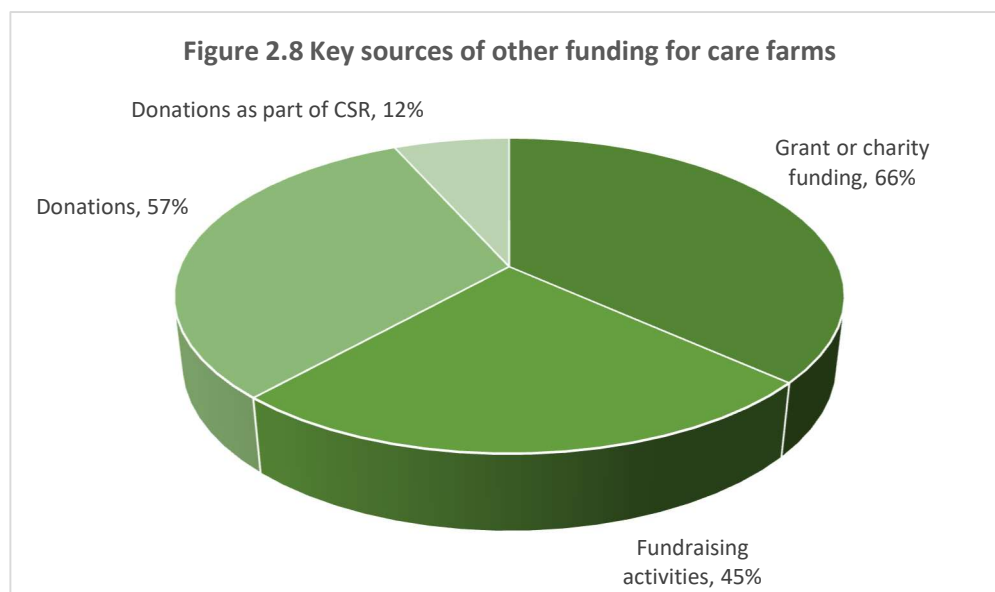
Commissioning/ referral body	Proportion of care farms receiving referrals (%)		Proportion of care farms receiving funding for these referrals (%)		Percentage of places that have associated funding (%)	
	2020	2021	2020	2021	2020	2021
Local Authority – Social Services	52	53	41	45	79	85
Local Authority - Schools	37	38	29	32	78	84
Self-referral – Personalised Social Care budget	53	46	41	37	77	84
Specialist Education Services	38	42	29	34	76	81
Self-referral – Personalised health care budget	27	17	15	13	56	76
Probation/Criminal Justice System	9	7	2	4	22	57
Self-referral via family or carer	47	55	26	30	55	55
Community Mental Health Teams	32	29	10	16	31	55
VCS organisations	28	30	5	13	18	43
Self-referral – other	25	24	8	8	32	33
Social Prescribing Service	16	16	4	5	25	31
CAMHS	13	9	2	1	15	11
GP	10	9	0	1	0	11

When an individual referral comes with associated funding, the care farm can provide the service, as costs are covered. If a referral does not come with funding, the funding needs to be sought from elsewhere. Also, referrals that come with funding, may only cover a proportion of the full cost of service delivery.



As a result, care farmers typically must access other funding sources to adequately cover the costs of providing services and site maintenance.

### Additional funding sources



In the survey, care farmers were asked about additional sources of funding. Grant or charity funding is accessed by most care farms (66%) with donations at 57% (increased from 17% in last survey) and 45% of care farms undertaking fundraising activities - see Figure 2.8.

However, care farmers told us that they regularly access all four of the key funding sources highlighted in Figure 2.8 and identified additional examples of further funding. Typically care farms access funding from at least five different sources.

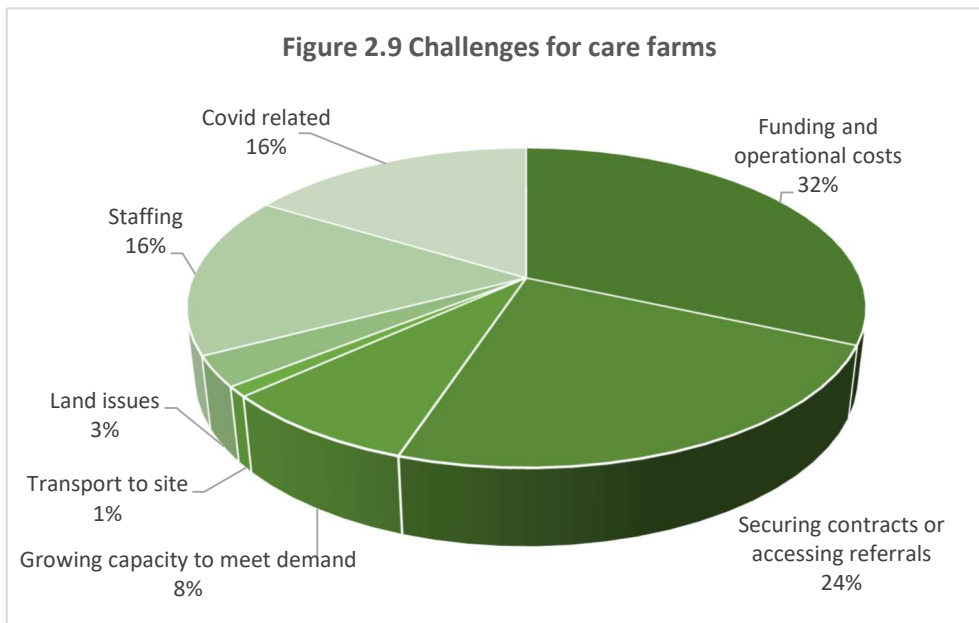
Further funding streams for care farms include:

- from Natural England under Countryside Stewardship HLS scheme
- directly from NHS trust
- from school budgets
- community learning contracts with local authority
- profits from main farming business or additional enterprises (such as shepherds hut accommodation and sale of meat) support the care farm
- contracts for highway maintenance
- schools' adult education programmes
- funding from Lottery and DWP for some of our clients who do nationally recognised qualifications
- venue hire
- hosting corporate team days
- income from community social enterprises

Finding additional funding to pay for the care farming or green care service provided can put considerable strain on care farm resources, planning and the longer-term financial sustainability of the care farm.

## **2.7. Challenges**

In the 2021 survey, care farmers were asked to outline the biggest challenges currently facing their care farm.

**Figure 2.9 Challenges for care farms**

Answers varied but several key challenges emerged – Figure 2.9.

Funding and operational costs were identified as the biggest challenge with 32% of care farmers highlighting it (a decrease since the last survey).

Securing contracts and accessing referrals were second at 24% of care farms, followed

by staffing (finding staff) and Covid related issues both at 16%.

Challenges are similar to those highlighted in the last survey, except that a range of new Covid-related challenges have arisen that have compounded things further. More details on other challenges mentioned by care farmers are shown in Box 2. overleaf.

**Box 2. Other challenges identified by care farmers**

**Site related:** *"We have lost our fixed operation base and have now moved to using outreach locations only. This has changed our model." "Developing the site" "Planning permission" "Insurance costs" "Operational costs such as insurance and other administrative burden, covid, VAT etc."*

**Funding related:** *"Too many referrals not enough funding for additional staffing to offer more places" "Risk of losing contractual funding and need to build voluntary income to de-risk." "Core cost funding." "Raising funds for a building" "Realistic funding, and access to our future clients. Our clients are some of the poorest people in UK. It is very hard to truly recover our running costs. Grants and Funds are very tricky to receive and very time consuming to apply for." "Reduction in county levels of funding (per person for the day services)" "Obtaining funding for mental health referrals" "Funding to cover social prescribing patients," "Reduction in high-needs SEN funding, will limit schools' ability to refer children via self-funded route. Places remain on fully funded route, but waiting list is 8 months". "CCG still don't pay for the MH referrals" "We are only being paid on 'actuals' and so losing funding due to not being able to run at full capacity due to social distancing" "Non-attendance, if a person does not attend, we do not get paid" "Getting referrals and funding for a ltd company with no charitable status"*

**Staffing issues:** *"Finding additional trained staff" "Finding the right helpers." "Gaining staff (we are on Dartmoor - we struggle to gain cooks and cleaners)."* Finding additional staff to deliver. Becoming better organised & rearranging to enable increase in demand." *"Staff recruitment" "Meeting the demand through staff being stretched." "Capacity, we have a very small staff team at present."*  
*"Managing waiting lists and dealing with significant levels of admin with only a small team available for this" "Sustaining a service with skeleton staff"*

**Uncertainty and confidence:** *"Those who would like to come having the capacity and confidence to venture out" "The support workers. Many do not have interest/experience in this area, and I am having to teach them along with their Learner so they can support them better while at the farm. This is especially the case with adult services." "Uncertainty of the future - schools are nervously placing, people are keen but afraid to take steps or go further afield - in a field."*

**Capacity:** *"Not upscaling to quickly" "Being able to meet need of the increasingly complex referrals from all age groups." "We have more referrals than we can accommodate and have to turn people away" "Needing to expand without losing the personal touch and being mindful of group dynamics always." "Demand outweighing capacity and resources"*

**Covid challenges:** *"Reopening for the service users that have the most complex needs. Many are still shielding." "Many of our potential clients are now struggling to leave their home" "Maintaining activities through the winter when we would usually bring individuals up to use our main indoor space during poor weather which is now limited due to Covid." "If we can run sessions outdoors, it's fine. If the weather is bad, we are limited on how many people can be inside and maintain social distancing. This means reduced capacity." "Covid! We are struggling to recruit for the first time in our history. We had a really low churn rate, but we need additional staff to manage smaller groups of Co-workers due to the bubbles. This is massive change to how we worked previously."*

**Referrals:** *"Juggling the usual balls: the ups and downs of referrals with the knock-on impact on staffing; developing new services and improving existing ones; managing capital investment programme. etc etc Covid is just another ball to keep in the air!" "Encouraging schools to come and finding new schools." "Recruiting new clients to become more sustainable, financially" "Receiving referrals and maintaining them. I deal with people who are often lacking in motivation. Simply attending is a significant achievement. My referrals tend to either stick around or disappear quickly." "Attending so many meetings to cover the wide variety of cohorts" "Getting people with particular needs into the garden, in spite of working with social prescribers and DRPSS." "The fact that schools focus on pupils gaining qualifications that count towards the school league tables, rather than what is best overall for the pupil." "Determining what is needed locally and fulfilling that need - and identifying how we promote ourselves to reach those who would benefit" "Getting recognition from social Work as a funded activity fulfilling people's needs"*

**Other:** *"Restrictions on numbers allowed to access our minibus have reduced attendance. There is no public transport to our site. We can transport 4 persons on a 17-seater bus. Low attendance has impacted education funding which is based on attainment. Our cafe, open to the public has been seriously affected - all profit from this supports our day services and the low rate paid by the local authority."*  
*"Capacity and forward planning with regard to potential retirement of owners"*

## 2.8. Additional support, resources and opportunities

As a response to the challenges question, this year we asked care farmers and green care providers what additional support, resources or opportunities that would help either their individual care farm or the wider green care sector. Perhaps given the responses to the 'Challenges' section it is understandable that many of these were around funding requirements (need for stable funding streams, funding to cover core costs, social prescribing etc.). Others highlighted the need for networking and collaboration between care farmers, more advocacy and promotion of the sector at national level, more training opportunities and suggestions for useful support and resources and help to match land available to where land is needed for care farms. Other respondents had specific needs for their particular care farm context. More detailed comments can be found in Box 3.

Box 3. Suggestions and opportunities
<p><b>Funding:</b> <i>"Stable funding, and funding which covers core costs, including the costs of following up referrals." "More grants covering running costs" "Funding for more tools and equipment and staff"</i>  <i>"Knowledge of funding streams from a wider range of areas, who are willing to pay" "Access to a wider range of funding streams, such as social prescription for LD" "A clear link to funding and grants for Care Farming"</i>  <i>For local authority-funded clients, prompt payment and clear communication when there's a change to clients' funding" "Block funding, or at least more sustainable long-term funding rather than fighting for grants. And/or people with defined needs being allocated a budget to spend on services like ours. At the moment, it's only people with substantial support needs that get close to this." "Buy in from Health - with funding to enable us all to work sustainably with people who are at statutory level of need."</i></p> <p><b>Advocacy and promotion:</b> <i>"More promotion" "Recognition of the impact/value of the care farming approach, a national understanding of care farming, PR and lobbying at a national level." "National advertising explaining the excellent work we do! Also, a supportive funding link with the NFU."</i></p> <p><b>Networking and collaboration:</b> <i>"Nationwide collaboration and shared learning" "Continued contact with peers and like-minded people" "A programme of peer placement exchange. An extension of the scheme of exchange visits to other care farm/gardens. Spending a few days helping out at another project would give a good insight"</i></p> <p><b>Support and resources:</b> <i>"Guidance on administration, how to share work. Template forms which really work for gathering feedback etc." "Perhaps have an adviser visit us to advise us on what we are doing and evaluate us, help us do better" "Information aimed at GPs, psychologists, and counsellors" "A County representative for care farmers."</i></p> <p><b>Social prescribing:</b> <i>"I think SF&amp;G and GCF are doing a good job at making care farming more widely known e.g., getting involved with green prescribing networks etc." "Better social prescribing - so far we have had interest in referring people but no funding available." "Support to link into GP or Social prescribing referrals (with funding attached) for children" "Get social prescribing to actually work rather than simply pay for staff to act as signposts" "Social prescribing systems being less patchy area wise"</i></p> <p><b>Staffing and training:</b> <i>"We notice that the students now need more care and support - some additional help for students here - hands-on staff to help our work." "Funding for staff training" "Access to free safeguarding training, Learning Disability training and first aid training for volunteers" "Free or subsidised training in hands on subjects: working with LD, Health and Safety, farm management." "Online training" "Training outside work hours" "Free/subsidised training in fundraising and gaining corporate funding"</i></p> <p><b>Specific requests:</b> <i>"Help finding land/buildings and or farmers who would be willing to host us." "We need help with developing interactive learning diaries that allow farm helpers to develop a portfolio, and also allow us to establish outcomes and feedback to carers where necessary." "We require an efficient, inexpensive way of providing power for lighting and laptops for the winter period in our Garden's facilities. This would help use the space better." "I run two allotments, but I need funding, which is not currently available to make the area more socially attractive and to provide things like a compost toilet and shelter." "Despite having been in existence for 40 years we are not well known to schools and the wider community. Improved marketing could help us reach a wider audience." "Running a mixed land and animal-based Care Farm offers our clients the best of both worlds. The costs involved with Management/Core costs, staff numbers, and Insurance are high. This is not recognised by funders it seems. Some way of expressing this need to others would be important when funding is allocated."</i></p>

## 2.9. Innovations

We know that care farmers have developed new ways of working and have created innovative ways to stay in touch with their service users during the pandemic. So as part of this year's survey, we asked care farms and green care sites to let us know about any changes their organisation made, and which of these were so successful that they will be continuing them in the future. Some key responses are shown in Box 4. Most organisations told us that they would be continuing with their innovations such as engaging on social media, online newsletters, online support sessions and changed operating procedures but about 10% told us that they would be stopping their remote delivery after Covid.

### Box 4. Pandemic innovations

**Facebook and social media:** *"We approached the students through social media - which went viral so a great deal of interest for farming across the globe - featured our project across the world." "Created a Facebook page to stay in touch with service users" "We kept our Facebook page updated and are hoping to keep this up in the future"*

**Newsletters and increased communication:** *"Internal newsletter for volunteers and service users to keep the community connected with the service. We are continuing these" "We started a monthly newsletter and contacted clients by phone to check in with them. We will probably continue the newsletter once we return to full sessions, but on a quarterly basis." "We will continue to send out a weekly newsletter to service users and parents/carers as a way of communicating news and messages. It also helps to involve people in the farm and what's going on."*

**Online support and activity sessions:** *"We developed zoom sessions with those that were unable to return because of their need to isolate. This was hugely appreciated by those that took part and will be continued as a stepping-stone for those wanting to attend, but find their anxiety gets the better of them." "Online recovery groups. Women have come forward who weren't accessing help before. We are now offering women only groups and activities.*

*Online Cooking group was successful, so we intend to bring this as a face-to-face group too" "Providing online virtual tours of the farm and activity sessions online." "We are looking at giving a member of staff dedicated time to continue with remote service provision. This will not only help support those who can't attend due to Covid but also other long-term conditions that prevent attendance." "Set up a group WhatsApp, which we will keep up."*

**Welfare checks:** *"The increased communications we had with farm helper families will definitely be built upon. (We were phoning them weekly)." "Zoom calls with service users phone calls with service users - this has continued for service users who aren't able to come to the farm. email updates, blog posts online, weekly newsletter emailed - this has continued for everyone." "We had zoom meet ups for our groups but now they are able to come onsite. We also did welfare checks on all past participants (c160/year) which we are continuing." "Newsletter. Updates. Increase in social media. Countrymen receive regular phone calls, always appreciated." "Welfare calls"*

**Resources and activity packs:** *"We provided home activities such as growing and planting and nature-based crafts. Only one of our clients uses social media/internet so we didn't use Zoom meetings/activities etc." "We provided Activity Packs with resources and ideas for children with SEND and we have now developed this into an extended offer." "We sent out activity packs every week but will not be continuing post covid"*

**Changes to operating procedures:** *"We have found that the less densely spaced break and lunch times have suited most service users." "We opened up to adults, when originally we were open for school groups and families only." "We had to set-up 'family pods' on our Care Farm site, this has proved very helpful with our clients with Autism, so we no longer work as a large group, but allow clients to choose how and where they sit. This allows for more quiet, personal space which we will continue to use." "Better collaboration with other local programmes" "Small Groups - we always assumed that big teams were great, we all decided on what we would do each day in the big Tea Barn but as Covid restrictions have prevented this we have worked in smaller bubbles with a dedicated member of staff supporting up to 4 Co-workers - this has actually improved behaviours, progression and achievements." "Shorter sessions, Specific courses targeted to meet current needs" "Various hygiene-related changes." "We are going to continue with the extra cleaning regime." "Switched from half days to full days to accommodate cleaning regime. More successful and will retain."*

**Outreach:** *"We focused on reaching outside our gates rather than inviting people in: via Lockdown Gardening, fruit forest and we also ran playscheme for 5-11 year olds as normal children's summer schemes were not running due to covid. we are repeating the children's play scheme this year due to demand!" "We did outreach work during the first lockdown, but we were able to open up (as we operate a service outside) so people were able to return in a measured way quite soon last in June 2021. We do not need to carry on outreach services unless there is another*

lockdown” “We set up 1:1 social distancing walking to help people get out of the house for exercise within the rules and stay connected to us.”

**Other innovations:** “We began CHAOS TV an online channel predominately for our participants which is now funded until March 2022 by DWP” “We took on AirBnB just to bring in funding over the pandemic in the holiday periods. If we can maintain staff to clean, we can do this at the weekends to continue to bring in flexible funding which will support our farming activities that cost a lot and pay little (horses, milking animals etc).” “Supplying food banks - we are continuing to do this but as our residential increase we will probably need the food for our visitors.”

“Volunteering - we put out a land army style appeal and received a massive swell in volunteers wanting to help - we have a list of around 50 regular volunteers now connecting with our charity on a weekly basis” “Unfortunately some people couldn't access our garden due to no personal transport and no reliable bus service. We now have 9-seater bus to facilitate those from further away accessing our service. We will keep on with this even after restrictions due to poor bus service” “We built an extension to our kitchen, so we have more indoor space to sit at break times”

**No changes:** “We haven't found new ways of working. We tried Zoom sessions, but people didn't want these, the point of the farm is to actually be there!” “None really. We try and maintain good communication with families and schools anyway.”

## 2.10. Number of care farming and green care places

Our annual survey shows that most care farms deliver services on 5 days per week. Although there is much variation between the number of service users catered for on each day, the average is 11 service users per day, per care farm or green care site. This creates an average weekly total of 55 places per care farm (not including weekend places).

Currently, there are approximately 402 care farms known to be operating in the UK. To give an estimate of the extent of care farming services for the whole of the UK, the results of this annual survey can be scaled up.

### 2.10.1. UK figures

- For the UK as a whole, the total number of weekly care farming places reported by care farms in this survey is 3,124<sup>7</sup>.
- This is from 20% of care farms. If we included numbers from 100% of care farms, the total increases to approximately 15,620 places per week
- Care farms are delivering services for an average of 47 weeks per year, so it is reasonable to conservatively estimate that **care farms and green care sites are currently delivering 734,140 places per year in UK** (a rise in 57% since the last survey where annual places were estimated at 469,660).
- Furthermore, most care farmers in this research stated that their care farm was not currently running at full capacity, with the mean operating capacity standing at 62%<sup>8</sup>. Theoretically therefore, if all the places at existing care farms were filled, they could provide around 25,194 places per week which equates to around 1,184,000 care farming places per year in the UK.

### 2.10.2. England figures

- In England, the total number of weekly care farming places reported by care farms in the survey is 2,730
- This is from 19% of care farms. If we included numbers from 100% of care farms in England, the total increases to approximately 14,368 places per week

<sup>7</sup> If weekend places are included this rises to 3,316 places

<sup>8</sup> similar to 65% in 2017 and 63% in 2019/20 – if the effects of Covid social distancing restrictions were removed, this increases to 80% of care farms having capacity – however, this may not be an accurate representation as the last survey period has been exceptional due to the pandemic and so future surveys will indicate if any capacity changes have occurred.

- Care farms are delivering services for an average of 47 weeks per year, so it is reasonable to conservatively estimate that **care farms are currently delivering 675,296 places per year in England** alone, representing a 54% increase since last survey up from 438,656 places.
- Considering capacity of care farms as above, if all the places at existing care farms were filled, care farms could provide around 23,174 service user places a week, which equates to over 1,089,000 places per year in England.

There is therefore a significant amount of latent potential for care farming to expand as an option in health, social and educational care.

## 2.11. Further Comments

Finally, we asked respondents if they had any further comments - several were received, and these were around how the pandemic has affected them and feedback on support given by the Growing Care Farming team.

### Box 5. Further comments received

**How care farms and green care sites told us they had been affected by the pandemic:** *“We completely lost all funding streams due to local authorities not sending pupils out, charities were doing the same as schools, so footfall was zero in most cases” “As a care farm we survived the pandemic well compared to other social care providers/therapeutic interventions, because outdoor activities is a lot ‘safer’ than indoor activity” “I don’t know how supportive other councils were around the country, but Sheffield City Council commissioners were very helpful and supportive and continued to pay everyone’s direct payments all the way through the pandemic even when we had to close and they have recently increased the amount all day service providers are allowed to charge.” “Thank goodness for grant funding that has helped us through the pandemic! We still don’t feel safe to open as normal” “We are pleased to have offered supported gardening through covid when other services were not available. This was due to not being under the restrictions of care commission” “We have had to rethink how we represent ourselves on our FB page and how we enable others to engage and interact with the page as we now have so many more contacts off site and virtually - how we influence, engage and encourage others.” “One item recently posted of our peacock displaying has attracted 15.4 million likes/hits.” “We have been busier in a different way during the pandemic offering more varied and bespoke sessions to young people with SEND. We decided to go down this route so that we could have people in the community join our garden group in the very early stages of coming out of lockdown.”*

**Feedback:** *“The webinars Social Farms and Gardens (Care farming) ran during lockdowns were brilliant and motivational. Thank you” “Thank you to SF&G for the professional support. Your technical, lobbying and networking support is invaluable. Thank you” “SF&G GCF online meetings have been really helpful, especially also being able to access them as recorded sessions. Thank you!” “SF&G do an amazing job. Thank you :)” “Happy to share any of our learning with others and link up via email or teams.”*

### 3. Survey Results - Prospective care farms and green care providers

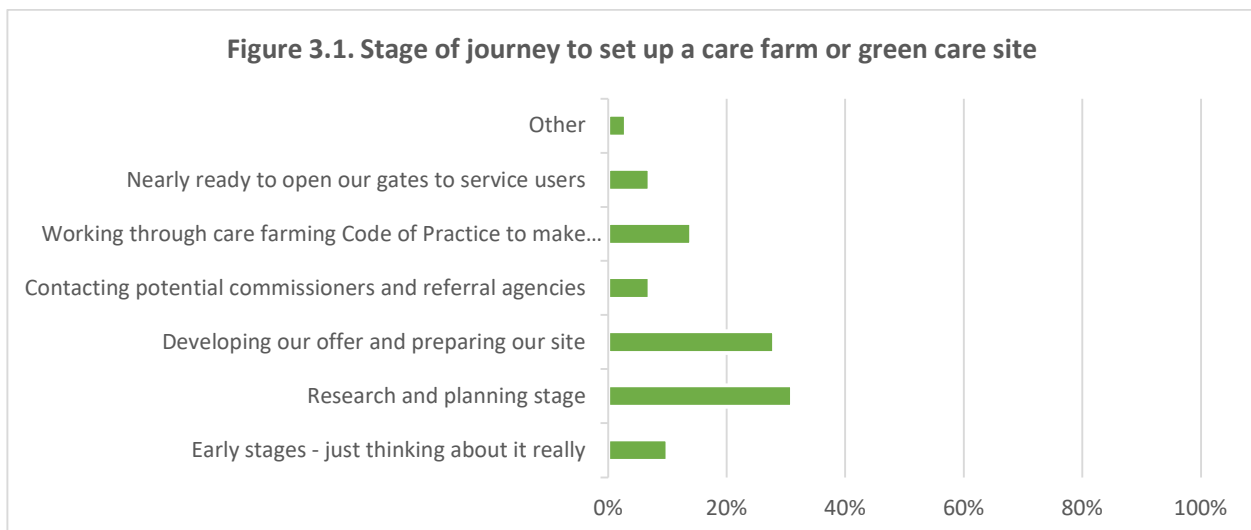
Prospective care farms and green care sites are those in the planning stages or being very close to opening for business. We estimate that there are around 220 prospective care farms in the UK. This year we introduced a suite of more in-depth questions for prospectives into the survey, to find out where they are in their journey to set up, what challenges they are facing and how Covid has affected them.

#### 3.1. Stage of set up

Prospective care farmers and green care providers were asked how far they were on their journey to set up a care farm or green care site. Just over a third were at the planning and research stage and just under a third at the stage of developing their offer and preparing their site. Further details are shown in Table 3.1 and Figure 3.1.

**Table 3.1. Stage of journey to set up a care farm or green care site**

Stage of journey to set up a care farm or green care site	
Early stages - just thinking about it really	10%
Research and planning stage	31%
Developing our offer and preparing our site	28%
Contacting potential commissioners and referral agencies	7%
Working through care farming Code of Practice to make sure we have covered all the legal, policy and safety requirements	14%
Nearly ready to open our gates to service users	7%
Other	3%

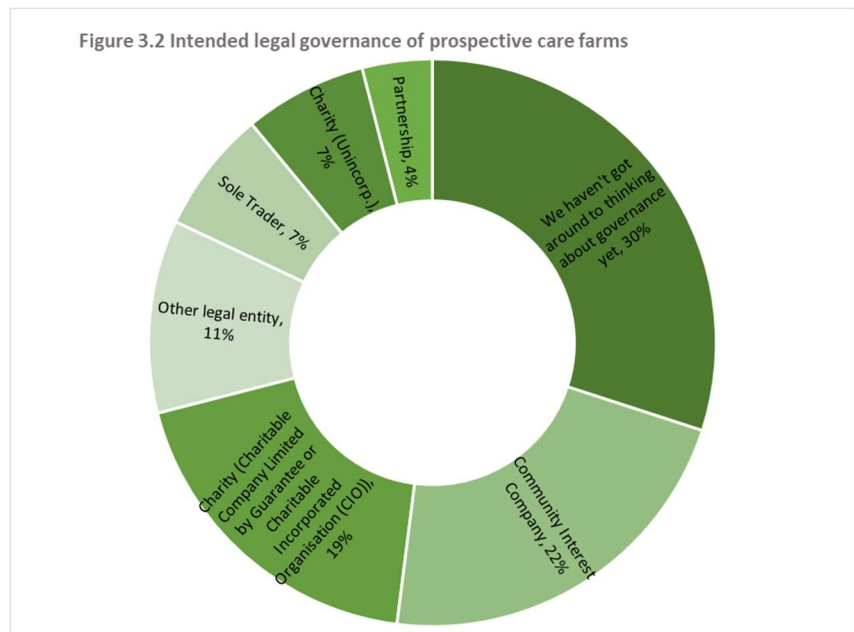


#### 3.2. Intended legal governance

The question about the best legal governance structure to adopt to deliver care farming and green care services has been a common enquiry to the GCF team over the last few years, resulting in the delivery of a webinar to explore this issue. Subsequently a question on intended legal governance was added to the survey and for prospective care farmers and green care providers, around a third (30%) have not yet thought about their intended governance, 22% intend to become a Community Interest Company and 19% intend to become a charity (either a Charitable Company Limited by Guarantee or Charitable Incorporated Organisation (CIO)).



Other answers included a Cooperative structure, several people were not sure which option to take, and a couple of people mentioned becoming a Social Enterprise (indicating that there may be confusion around the difference between a legal structure and description of types of activities or venture). More information is contained in Table 3.2 and Figure 3.2.



**Table 3.2. Intended legal governance of prospective care farms and green care sites**

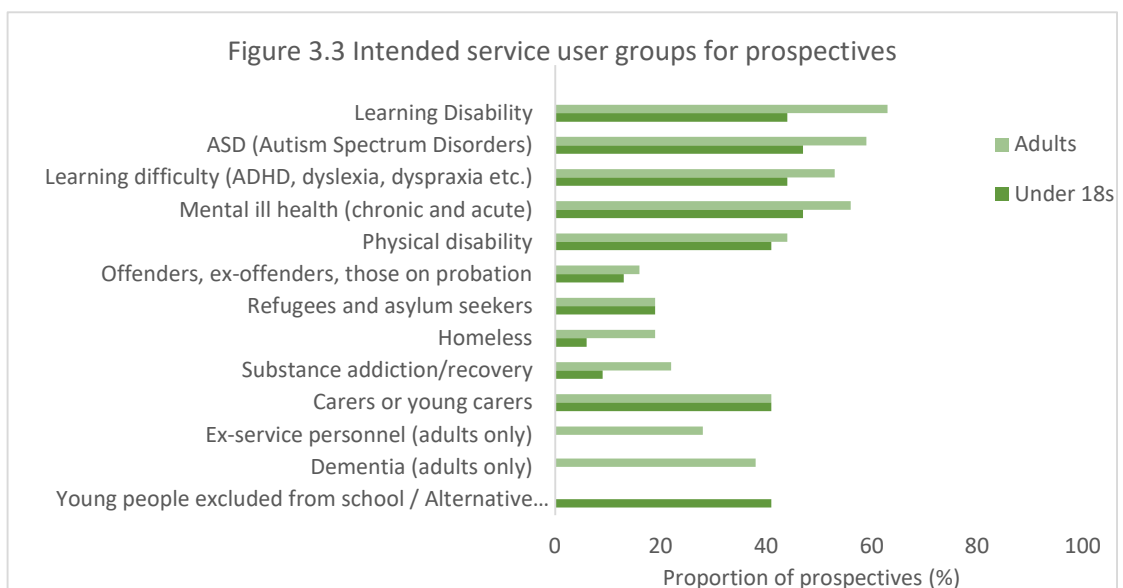
Which best describes the legal governance route you plan to take for your new care farm or green care site?	
We haven't got around to thinking about governance yet	30%
Charity (Unincorporated)	7%
Charity (Charitable Company Limited by Guarantee or Charitable Incorporated Organisation (CIO))	19%
Partnership	4%
Community Interest Company	22%
Sole Trader	7%
Other legal entity	11%

### 3.3. Intended service users

In the 2021 Survey, we asked prospectives to tell us about the people that they plan to work with, and the results were very similar to the care farms and green care sites already operating. 75% of prospective care farms and

green care sites plan to work with adults; 69% plan to work with children and 45% want to work with both.

In terms of adults, people with a Learning Disability at 63%, Autism



Spectrum Disorders (59%), mental ill-health (56%) and learning difficulties (53%) were the most frequently

occurring responses and for young people below the age of 18, mental ill-health and ASD (both at 47%) and Learning Disability and learning difficulty (both at 44%) were the most cited intended service user groups. See Figure 3.3 and Table 3.3. Other intended service user groups included victims of domestic abuse.

**Table 3.3. Proportion of prospective care farms that intend to cater for service user groups**

Service user group	Adults (% of prospective care farms)	Under 18s (% of prospective care farms)
Learning Disability	63	44
ASD (Autism Spectrum Disorders)	59	47
Learning difficulty (ADHD, dyslexia, dyspraxia etc.)	53	44
Mental ill health (chronic and acute)	56	47
Physical disability	44	41
Offenders, ex-offenders, those on probation	16	13
Refugees and asylum seekers	19	19
Homeless	19	6
Substance addiction/recovery	22	9
Carers or young carers	41	41
Ex-service personnel (adults only)	28	N/A
Dementia (adults only)	38	N/A
Young people excluded from school or on Alternative Provision (under 18s only)	N/A	41

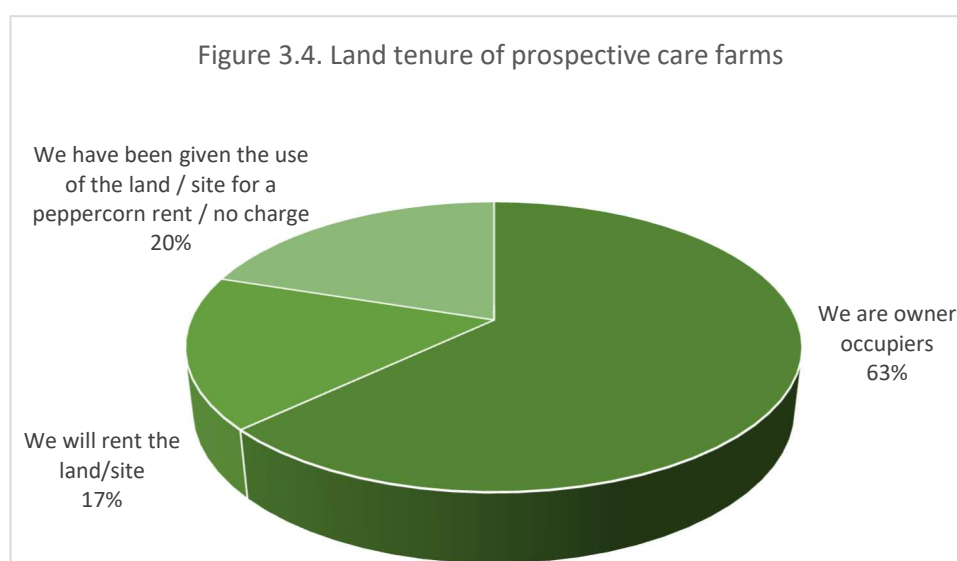
### 3.4. About the site

#### 3.4.1. Site availability

Respondents were asked if they currently have a site from which to deliver their care farming or green care provision, the majority (86%) told us they have a site lined up compared to 14% who have not. Two people stated that they were struggling to find a suitable site.

#### 3.4.2. Land tenure

Of those who have a site lined up for their care farming provision, 63% own the land, 20% have been given the land for no charge or a peppercorn rent and 17% plan to rent the land. Those prospectives that answered the survey told us they had no plans to operate on an outreach basis. See Figure 3.4 and Table 3.4 for more details.



**Table 3.4. Land tenure of prospective care farms and green care sites.**

Land tenure of prospective care farm (percent %)	
We are owner occupiers	63
We will rent the land/site	17
We have been given the use of the land / site for a peppercorn rent / no charge	20
We will be operating on an outreach basis	0

### 3.5. Challenges

As with the care farmers and green care providers who are up and running, we also asked the prospective care farmers and green care providers about the biggest challenges facing them at the moment as they are setting up as prospective care farms or green care sites.



Responses varied widely but there were some re-occurring challenges identified (see Figure 3.5) including finding start-up funding (23%), accessing referrals and planning and preparing for delivery (both at 16%) followed by funding for referral and planning permission / legal issues (both at 12%). Key challenges identified are shown in Box 6.

#### Box 6. Key challenges identified by prospective care farmers and green care providers

**Site related:** "As a prospective care farmer, at the moment the biggest challenge by far is finding land to rent" "Planning permission" "Acquiring a site" "Finding a site- local district Council has been very unhelpful with regards to available land/potential sites." "Obtaining planning permission."

**Funding related:** "Funding to start up and get the site prepared" "Funding, and our farm is new/being developed from fields, so we are in the early stages" "Getting capital funds to secure the site" "Funding and planning programs" "Funding for facilities" "Appropriate funding attached to Government's green prescribing agenda." "Start-up funding, maybe for a project manager for the first year or two."

**Practicalities:** "Not enough policies and procedures in place & evidence of these" "Moving from general weeding and harvesting volunteering towards more structured activities" "Learning all that we need to learn before setting up properly, e.g., governance, funding, and so much more!" "Getting all health and safety up together" "Awaiting to hear back from whether our application is successful and then having the time to link with others and develop what we want to offer as there are only 2 staff and maintaining the site and animal care take a lot of time"

**Referrals and staffing:** "Access to funding and guidance of how to attract service users. A step-by-step guide on the nitty gritty would be good." "Knowing where to go to source clients" "Sourcing suitable service users" "Ensuring we have sufficient service users to keep us financially viable" "Getting known amongst care providers" "Understaffed and resourced" "Recruitment of active volunteers"

**Other:** "Time for HR, admin, forward planning, marketing and PR whilst also supporting delivery" "Transport" "Knowing who to contact for advice on legal aspects and funding" "Knowing how to define our offer" "Difficulty planning activities/ events due to COVID restrictions" "Finding the right level that will best suit us."

### 3.6. Resources, support or opportunities needed

We also asked prospective care farmers to tell us what resources, support or opportunities they would find useful to help them on their journey to set up a care farm or green care site. Around a third of prospectives (33%) said they would like help with finding funding (both for start-up and referrals etc), others said they would like mentorship and general operating advice on all aspects of care farming (both at 14%) and some would appreciate networking opportunities with other green care providers and business planning advice (both at 11%). Other items on the wish list included referral contacts, a start-up checklist – step by step guide (both at 8%) and training and online resources. Some key comments are highlighted in Box 7.

Box 7. Opportunities and support needs identified by prospective care farmers and green care providers
<p><b>Funding related:</b> <i>“Start-up funding options” “exploring any grants or funding available” “Where to find funding for initial set up and how to continue to access funding to be able to provide free of charge places - Also advice on salary of the care farmer.” “A catalogue of potential funders” “Funding advice and support -Business plan support” “Funding and legal sources”” Information about funding (including what stage to apply for it) and the legal governance would be very handy.”</i></p>
<p><b>Advice, networking and support:</b> <i>“learning from other care farmers.” “Local links with care farming reps and care farmers” “understanding how it fits in with actual farming” “Connections with other organisations our scale / age to help us make a shift from an ad hoc volunteer-run farm to one which is middle scale &amp; well-resourced with clarity over who we are here to help, how &amp; why. We are beginning an organisation-wide visioning exercise at the moment.” “Consultancy advice. Someone to come to the farm and discuss progress - Hand holding” “I’d love a mentor.” “Community advisors to help with support from finding a site to developing a therapeutic programme”” Meeting with, talking to and sharing experience/knowledge with other providers is most helpful. Clearer route into our regional health board/green prescribing network, we’re struggling to access it! And joined up thinking/planning of our local/regional provision/need with commissioners”” Project manager to show us the ropes for the first year.”</i></p>
<p><b>Practicalities:</b> <i>“Best buy info on insurance, equipment, etc” “!” “A start-up check list. What to do first and how to find out who to contact. Maybe there is such a list?” “Safety advice, insurance recommendations, risk assessment advice” “A step-by-step how-to guide would be amazing! We have ideas, and lots of experience of working with people on the land, but this is something quite different.” “Some risk assessments that are already in use elsewhere would help give us a good basis for writing our own. A list of smart targets that users can aim to achieve during the project would also be good.” “Referral contacts”</i></p>
<p><b>Other:</b> <i>“I’m not sure yet tbh ... I’ll let you know as I get further involved!” “Just interested to find out more” “more for gardens rather than farms” “I want to have time to attend meetings and training, but this is difficult.” “Probably ok at present- just need restrictions to lift so we can put existing plans into action”</i></p>

### 3.7. Effects of Covid on progress

Finally, we were interested to hear how the Covid-19 pandemic has affected progress in developing care farms or green care sites over the last year. About half of the prospectives said that their plans and progress had been delayed in some way but that things were now moving forward, around a third told us that Covid made no difference to how they were progressing, and others said that the pandemic gave them more planning time which enabled them to progress faster. See Table 3.5

**Table 3.5 Effects of Covid on setting up a care farm or green care site**

Effect of Covid on progress to set up a care farm or green care site (percent %)	
We have put our plans on hold due to Covid	0
We put our plans on hold due to Covid but are now moving forward	21
Covid delayed our plans and progress	31
Covid did not make any difference to how we were progressing	28
Covid meant that we had more time to develop our plans and we progressed faster	17
Other	3

Some other comments received regarding the effects of Covid-19 restrictions on progress of prospectives are shown in Box 8.

<b>Box 8. Effect of Covid on progress to set up a care farm or green care site</b>
<p><i>"I wanted to access cevas training which was put on hold. I also wanted to visit sites which I haven't been able to do."</i></p> <p><i>"We continued to operate during lockdowns, meeting a massive rise in demand for crops but with skeleton volunteer support. We launched an employment project and incorporated keywork of food harvesting as part of our project albeit with half the number of recruits and working in smaller teams. We were unable to hold celebratory events for our volunteers and we lost our older volunteers who were isolating. The results of our employability project are very positive with most people in work or training or in an ideal volunteering placement of their choice. We recruited new Board Members during covid who are learning about our existing activities, looking towards the future and trying to re-focus, resource and streamline. Some of our demand for veg has dropped off in recent months but the demand for local produce is still higher than before covid."</i></p> <p><i>"I'm procrastinating and seeing obstacles instead of opportunities."</i></p> <p><i>"Covid made me want to seek new opportunities and follow a dream of opening a care farm."</i></p> <p><i>"Lack of volunteers has meant the progress has been slower than planned"</i></p> <p><i>"We've really only been working on it over the last couple of months."</i></p> <p><i>"Covid brought us volunteers who have been affected by the pandemic and have benefited from time at the farm, which has confirmed our beliefs about the importance of access to the natural environment on people's well-being and made us want to push forward with our long-standing desire to establish care farm provision on site."</i></p>