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The authors would like to thank all the care farmers and green care practitioners 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.
Key Findings

- In 2020, there are an estimated 299 care farms currently operating in the UK and a further 90 in the Republic of Ireland. There are also an estimated 150 prospective care farms in various stages of development. Both the numbers of care farms and prospective care farms show an increase since the previous survey in 2017.

- Most care farms are either charities (33%), Community Interest Companies (25%) or Limited Companies, Charitable Companies Limited by Guarantee and partnerships. Just under half of care farmers (43%) are owner occupiers, 35% rent their site, and 21% of care farms have been given the land that they use at no charge or a peppercorn rent.

- Care Farms in the UK provide services for a range of people, including adults with a Learning Disability (72%) adults with mental ill-health (67% of care farms), adults with ASD (65%), and with learning difficulties at 54%. For service users under 18, learning difficulty (53%), ASD (52%), young people excluded from school or on Alternative Provision (50%) and Learning Disability (44%) are the most frequently catered for.

- This year we have seen an increase in care farms delivering services to adults with mental ill-health. Care farms typically provide services for individuals from different client groups simultaneously (where appropriate) – on average, 5 different service user groups.

- The number of service users attending a care farm per day varies from farm to farm, but the average number of clients attending per day is 10 and the majority of sites open for 5 days per week. 93% of care farms in the survey provide non-residential services. The average operating capacity level of UK care farms is 63%.

- Care farming places are typically for a day session but there are morning sessions, afternoon sessions and hourly sessions too. The cost of care farming sessions varies widely depending session length and service user need and ability, but the average cost is £59 per day session.

- The referral routes and funding for care farming places varies enormously and are often a very complex picture to understand. Frequent referral pathways include via personalised social care budgets (53% of care farms), Local Authority Social care referrals (52%), referrals from families or carers (47%) with Specialist Education services at (38%). Typically, the average care farm will work with 7 different referring agencies and commissioning bodies.

- Referrals to a care farm may come with or without funding. Some referral routes seem to be better at providing funding for their individual referrals than others. Currently, referrals from social care and education seem to be better funded than those from health. Nearly 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.

- 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. As a result, care farmers typically have to access other funding sources to adequately cover the costs of providing services and maintaining their organisation.

- Grant or charity funding is accessed by most care farms (63%) with donations and fundraising activities both at 17%, but mainly care farmers told us that they regularly access funding from at least five different sources.

- The biggest challenges currently facing care farms at the moment as identified by care farmers in the survey include: funding (identified as the biggest challenge at 63%), securing contracts and accessing referrals (both 16%) followed by growing capacity to reach demand (11%) , transport and land tenure issues.
• In England, the total number of weekly care farming places reported by care farms in the survey is 2,861 (from 30% of care farms). If we included numbers from 100% of care farms in England, the total increases to approximately 9,536 places per week. Care farms are delivering services for an average of 46 weeks per year, so it is reasonable to conservatively estimate that care farms are currently delivering **438,656 places per year in England alone and 469,660 in the UK.**

• Taking into account current average of 63% operating capacity of care farms, if all the places at existing care farms were filled, care farms could provide around 15,136 service users a week 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.
1. Introduction

1.1. What is care farming and who is it for?

1.1.1. What is care farming?

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 for?

Care farms 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 while 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. 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 regional networking. The project vision is for these core project elements to 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.

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1 Supported by Defra, funded by the Department for Education and managed by Natural England
1.3. Annual survey of care farms

Social Farms & Gardens\(^2\) 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 has changed slightly, with some adapted and new questions contained in the survey, in line with requirements for GCF. It is therefore not a direct comparison with surveys from previous years. However, this survey is considered the baseline for subsequent surveys that will occur annually until the end of the GCF project in March 2023.

The 2020 annual survey was created using SurveyMonkey and then sent out via email to all care farms and prospective care farms on the Growing Care Farming (Social Farms & Gardens) database in February. The link to the survey was also publicised via our twitter account and forwarded onto other networks by Thrive and other stakeholder organisations.

\(^{2}\)Including predecessors Care Farming UK and the National Care Farming Initiative
2. Survey Results

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, in order to track scale. However, to highlight current care farming provision in this report, results are taken from care farms and other sites that are fully operational.

- 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. Any notable differences by country are highlighted in the text.

- The annual survey was conducted prior to Covid-19 restrictions. Any resultant changes in provision due to the pandemic are therefore not represented in this survey report.

2.2. Numbers and location of care farms, prospective care farms and the response rate of survey

2.2.1. Number of care farms and 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 299 care farms currently operating in the UK and a further 90 in the RoI. There are also an estimated 150 prospective care farms\(^3\) in various stages of development.

In total, the survey was completed by 118 respondents, from care farms and prospective care farms across the UK, only responses from the active care farms (n= 93) are shown in this report – representing a response rate of 31%.

Both the numbers of care farms and prospective care farms show an increase since the previous survey in 2017.

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>
<thead>
<tr>
<th>Country</th>
<th>Number of care farms</th>
<th>Number of care farms taking part in survey</th>
<th>Response rate as percentage % of total</th>
<th>Number of prospective care farms</th>
<th>Number of prospective care farms taking part in survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>253</td>
<td>74</td>
<td>30%</td>
<td>99</td>
<td>17</td>
</tr>
<tr>
<td>Scotland</td>
<td>12</td>
<td>9</td>
<td>75%</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Wales</td>
<td>10</td>
<td>5</td>
<td>50%</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>24</td>
<td>1</td>
<td>4%</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Total for UK</td>
<td>299</td>
<td>93</td>
<td>31%</td>
<td>112</td>
<td>25</td>
</tr>
</tbody>
</table>

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](#).

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\(^3\) Prospective care farms are those farms/ sites that are in the planning stages or being very close to opening for business.
A total of 91 people responded to the survey in England, comprising 74 care farmers and 17 prospective care farmers.

The 74 care farmers who took part in the survey represent 30% of the estimated total care farming sector in England.

75% of care farms in Scotland completed the survey, half of the care farms in Wales took part in the survey and less than 5% of the care farms in Northern Ireland participated.

2.2.3. England regions

There was a good geographical spread of responses to the survey from across the regions of England, as shown in Table 2.2.

Table 2.2. Geographical spread of care farms in England taking part in the survey

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of care farms in survey</th>
<th>Percentage of total responses %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yorkshire &amp; Humberside</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>North West</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>North East</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>South West</td>
<td>13</td>
<td>18</td>
</tr>
<tr>
<td>South East</td>
<td>18</td>
<td>24</td>
</tr>
<tr>
<td>London</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>West Midlands</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>East Midlands</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>East of England</td>
<td>8</td>
<td>11</td>
</tr>
</tbody>
</table>

2.3. About the care farms in the survey

2.3.1. Organisational governance

In terms of legal governance of the care farms in the survey, just over a third are charities and just under a third are Community Interest Companies. Full results are shown in Table 2.3 and Figure 2.1.
2.3. Land governance of care farms taking part in the survey (percent %)

<table>
<thead>
<tr>
<th>Legal Structure</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not constituted</td>
<td>2%</td>
</tr>
<tr>
<td>Charity</td>
<td>33%</td>
</tr>
<tr>
<td>Charitable Company Limited by Guarantee</td>
<td>9%</td>
</tr>
<tr>
<td>Partnership</td>
<td>9%</td>
</tr>
<tr>
<td>Limited Company</td>
<td>10%</td>
</tr>
<tr>
<td>Community Interest Company (CIC)</td>
<td>25%</td>
</tr>
<tr>
<td>Sole Trader</td>
<td>5%</td>
</tr>
<tr>
<td>Other legal entity</td>
<td>7%</td>
</tr>
</tbody>
</table>

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 taking part in the survey are either owner occupiers or rent their land (See Table 2.4 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.

2.4. Land tenure of care farm (percent %)

<table>
<thead>
<tr>
<th>Tenure Description</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>We are owner occupiers</td>
<td>43%</td>
</tr>
<tr>
<td>We rent the land/site</td>
<td>36%</td>
</tr>
<tr>
<td>We have been given the use of the land/site for a peppercorn rent/no charge</td>
<td>21%</td>
</tr>
<tr>
<td>We are operating on an outreach basis</td>
<td>0%</td>
</tr>
</tbody>
</table>

Although no care farms that took part in the survey said that they were working on an outreach basis, we know anecdotally that several care farms do operate on this basis.
2.4. About the people that attend care farms

2.4.1. Service users receiving care farming services

In the UK, the service user groups with the highest proportion of care farms delivering services to them are adults with a Learning Disability (72%) adults with mental ill-health (67% of care farms), and adults with ASD (65%), with adults with learning difficulties at 54%. For care farms which are delivering services to those under 18, learning difficulty (53%), ASD (52%), young people excluded from school or on Alternative Provision (50%) and Learning Disability (44%) 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 2.5 and Figure 2.3.

<table>
<thead>
<tr>
<th>Service user group</th>
<th>Adults (% of care farms)</th>
<th>Under 18s (% of care farms)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning Disability</td>
<td>72</td>
<td>44</td>
</tr>
<tr>
<td>ASD (Autism Spectrum Disorders)</td>
<td>65</td>
<td>52</td>
</tr>
<tr>
<td>Learning difficulty</td>
<td>54</td>
<td>53</td>
</tr>
<tr>
<td>Mental ill health</td>
<td>67</td>
<td>37</td>
</tr>
<tr>
<td>Physical disability</td>
<td>47</td>
<td>23</td>
</tr>
<tr>
<td>Offenders, ex-offenders, those on probation</td>
<td>22</td>
<td>7</td>
</tr>
<tr>
<td>Refugees and asylum seekers</td>
<td>11</td>
<td>4</td>
</tr>
<tr>
<td>Homeless</td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Substance addiction/recovery</td>
<td>28</td>
<td>5</td>
</tr>
<tr>
<td>Carers or young carers</td>
<td>20</td>
<td>23</td>
</tr>
<tr>
<td>Ex-service personnel (adults only)</td>
<td>14</td>
<td>N/A</td>
</tr>
<tr>
<td>Dementia (adults only)</td>
<td>31</td>
<td>N/A</td>
</tr>
<tr>
<td>Young people excluded from school or on Alternative Provision (under 18s only)</td>
<td>N/A</td>
<td>50</td>
</tr>
</tbody>
</table>

Other client groups include people with brain injuries, cancer survivors, those who have experienced a bereavement, people looking to build confidence and skills to get back into work and children in care.

Most care farms work with a variety of different client or service user groups – the average being 5 different client groups (although the minimum number was 1 (4 care farms in survey) and the maximum being 21 (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.

**Country variation**
In England, the service user group with the highest proportion of care farms delivering services to them is adults with mental ill-health (72%), this represents a change from the last survey, where Learning Disability was in the lead. When the data from all care farms is analysed, Learning Disability leads with 72% and mental ill health is at 67% of care farms. The leading service user group attending care farms in Wales, Scotland and Northern Ireland is adults with Learning Disability.

2.5. About care farming services provided

2.5.1. Care farm capacity and delivery

- The average care farm is open for 46 weeks per year. Although this can vary from 1 week to 52 weeks a year depending on set up and context.

- Two thirds (67%) of care farms taking part in the survey said that they are not currently running at their full capacity and although capacities obviously varied, the average operating capacity from care farms in the survey is 63%.

- 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 frequently attended days are from Tuesday to Thursday. 26 care farms in the survey (22%) also offer services at weekends.

- The majority of care farms (93%) provide non-residential services, with 6% of care farms offering residential provision.

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.

**Numbers of service users**
There is much variation between the number of service users catered for on each day – between 2 and 40, depending on the service user group and care farm set up. However, the average is 10 service users per day, per care farm.

2.5.3. Length of session

The length of a care farming 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 too.

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* Frequency of attendance was not asked in this survey, but historic data from previous surveys suggests frequency of attendance has remained fairly similar over the last 10 years.
2.5.4. Cost of care farming 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 of 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 £23 to £160 with an average cost of £59 per session.
- For those charging by the hour, rates varied from £8 to £70, with an average of £26 per hour.
- For care farms who charge per group, the costs ranged from £50 to £280 with an average cost of £152 per group.

How the care farmers 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 very complex picture to understand. There is variation not only locally and regionally, but also between the different commissioning routes.

2.6.1. Referral routes

The most frequently cited sources for referrals for service users are via personalised social care budgets (53% of care farms), and Local Authority Social care referrals (52%), referrals from families or carers (47%) with Specialist Education services at (38%).

Other referral sources are shown in Figure 2.4. Additional referral routes mentioned by care farmers include children’s residential care homes, colleges looking to support young people with additional needs, housing officers and addiction services.

![Figure 2.4 Most frequently stated referral routes for care farming](image)

Typically, the average care farm will work with 7 different referring agencies and commissioning bodies – although results show it can vary between 1 and 18 different referral routes for service users.

2.6.2. Funding of care farming places

**Funding from referrals**

Referrals to a care farm may come with or without funding. Some referral routes seem to be better at providing funding for their individual referrals than others – see Figure 2.5 Table 2.6.
Currently, referrals from social care and education seem to be better funded than those from health. Nearly 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.

Table 2.6. Care farm referral sources and associated funding

<table>
<thead>
<tr>
<th>Commissioning/ referral body</th>
<th>Proportion of care farms receiving referrals (%)</th>
<th>Proportion of care farms receiving funding for these referrals (%)</th>
<th>Percentage of places that have associated funding (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Authority – Social Services</td>
<td>52</td>
<td>41</td>
<td>79</td>
</tr>
<tr>
<td>Local Authority – Schools</td>
<td>37</td>
<td>29</td>
<td>78</td>
</tr>
<tr>
<td>Self-referral – Personalised Social Care budget</td>
<td>53</td>
<td>41</td>
<td>77</td>
</tr>
<tr>
<td>Specialist Education Services</td>
<td>38</td>
<td>29</td>
<td>76</td>
</tr>
<tr>
<td>Self-referral – Personalised health care budget</td>
<td>27</td>
<td>15</td>
<td>56</td>
</tr>
<tr>
<td>Self-referral via family or carer</td>
<td>47</td>
<td>26</td>
<td>55</td>
</tr>
<tr>
<td>Self-referral – other</td>
<td>25</td>
<td>8</td>
<td>32</td>
</tr>
<tr>
<td>Community Mental Health Teams</td>
<td>32</td>
<td>10</td>
<td>31</td>
</tr>
<tr>
<td>Social Prescribing Service</td>
<td>16</td>
<td>4</td>
<td>25</td>
</tr>
<tr>
<td>Probation/Criminal Justice System</td>
<td>9</td>
<td>2</td>
<td>22</td>
</tr>
<tr>
<td>VCS organisations</td>
<td>28</td>
<td>5</td>
<td>18</td>
</tr>
<tr>
<td>CAMHS</td>
<td>13</td>
<td>2</td>
<td>15</td>
</tr>
<tr>
<td>GP</td>
<td>10</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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 have to access other funding sources to adequately cover the costs of providing services and site maintenance.
In the survey, care farmers were asked about additional sources of funding. Grant or charity funding is accessed by most care farms (63%) with donations and fundraising activities both at 17% - see Figure 2.6.

However, care farmers told us that they regularly access all four of the key funding sources highlighted in Figure 2.6 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 (4 care farms)
- directly from NHS trust
- from school budgets
- community Learning contracts with local authority
- Profits from main farming business support the care farm
- contracts for highway maintenance
- schools’ adult education programmes
- venue hire
- hosting corporate team days but this is not a donation.

Finding additional funding to pay for the care farming 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 survey, care farmers were asked to outline the biggest challenges currently facing their care farm at the moment. Answers varied but several key challenges emerged – Figure 2.7. Funding was identified as the biggest challenge with 63% of care farmers highlighting it, with securing contracts and accessing referrals second at 16% of care farms followed by growing capacity to reach demand (11%), transport and land tenure issues.

Other challenges mentioned by care farmers are shown in Box 1.
Box 1. Other challenges identified by care farmers

“Finding a way to expand as we have a waiting list, without compromising high supervision levels and the ability to build good individual relationships whilst being mindful of the dynamics of the group.”

“The balance between generating income and expanding”

“Brexit, austerity and climate crisis.”

“There is virtually no direct funding for the support we deliver, where we do charge it is never on full cost recovery as the referring organisations cannot (will not) afford the cost.”

“The local mental health services are so stretched, and we have to work hard to get support for our service users when they need it. This has also meant that we have had less referrals from this sector recently.”

“Time!”

“Getting GPs to use social prescribing”

“There are so many people that could benefit from attending the sessions for such a variety of reasons, however the closure of adult day care facilities for adults with learning disabilities across the city has definitely had an impact on our small charity. Coupled with the increasing poverty in the local area and higher rates of poor mental and physical health, it has meant that we rely on our funding, able bodied volunteers and local businesses on community volunteering days more than ever.”

“Our local authority .... haven’t referred a single person to us but other local care farms are over-subscribed. We have been waiting 6 months for them to confirm funding for one client and 2 months to organise transport for another. We are on a list for social prescribing, but the places aren’t funded so I have no idea how they will afford it.”

“Lack of information about events, training”

“Access to statutory referral systems and securing contracts with NHS and Local Authority”

“Trying to do too much and stretch resources too thinly.”

“Lack of a core service contract so dependent on spot purchasing contracts which impacts on cashflow & staffing. Lack of referrals as we are small.”

“Getting enough skilled staff and volunteers”

2.8. Number of care farming 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 10 service users per day, per care farm. This creates an average weekly total of 50 places per care farm (not including weekend places).

Currently, there are approximately 299 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.

2.8.1. UK figures

- For the UK as a whole, the total number of weekly care farming places reported by care farms in the survey is 3,063
- This is from 31% of care farms. If we included numbers from 100% of care farms, the total increases to approximately 10,210 places per week
- Care farms are delivering services for an average of 46 weeks per year, so it is reasonable to conservatively estimate that care farms are currently delivering 469,660 places per year in UK.
- 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 63% (similar to 65% in 2017). Theoretically therefore, if all the places at existing care farms were filled, care farms could provide around 16,206 clients per week with care farming services in the UK.
2.8.2. England figures

- In England, the total number of weekly care farming places reported by care farms in the survey is 2,861.
- This is from 30% of care farms. If we included numbers from 100% of care farms in England, the total increases to approximately 9,536 places per week.
- Care farms are delivering services for an average of 46 weeks per year, so it is reasonable to conservatively estimate that care farms are currently delivering 438,656 places per year in England alone.
- Taking into account capacity of care farms as above, if all the places at existing care farms were filled, care farms could provide for around 15,136 service users a week 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.