



University of Essex



Growing Care Farming

Insight Report

March 2022



Funded by



Department
for Education



Department
for Environment
Food & Rural Affairs



In 2022, Social Farms and Gardens commissioned the University of Essex to independently evaluate the Growing Care Farming project, part of the Government's Children and Nature Programme.

This insight report aims to: explore the success of the Growing Care Farming project's four core elements through the experiences of various stakeholders. Recommendations are provided based on lessons learned to support sustainability and scalability of care farming.

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1 Introduction

Care farming – ‘the therapeutic use of farming practices’ is a form of ‘green care’, an umbrella term to describe a broad and diverse range of nature-based services delivered for individuals with a defined need. Care farming offers people with such a defined health, social or educational need the chance to participate in a variety of farming activities for their therapeutic benefit – from animal husbandry to woodland management. The synergistic benefits of a powerful mix of nature, social interaction, and meaningful farming activity that care farming provides, leads to improvements in health and wellbeing and increased social skills for service users in line with increased self-confidence, self-worth, and reduced social isolation.

Supporting a national expansion of care farming and increasing the number of care farming places for children and adults in England was identified in the Government’s 25 Year Environment Plan (25YEP). The Children and Nature programme (supported by Defra, funded by the Department of Education, and managed by Natural England) is the £10M flagship programme for the 25YEP and the Growing Care Farming (GCF) project is part of this programme. Social Farms & Gardens (SF&G) in partnership with Thrive, delivered the GCF project from January 2019 to March 2022. The Project aim was to expand and transform care farming services across England through a programme of:

- i) Advocacy, central support, and resource development
- ii) Training development and delivery
- iii) National and regional networking
- iv) Quality Assurance via the care farming Code of Practice.

GCF worked to transform the scale of the care farming sector across England, creating more opportunities for both children and adults with a defined need, to benefit from health, social and specialist educational care services delivered on care farms.

1.1 Project Partners

1.1.1 Social Farms & Gardens

SF&G is a UK wide charity that assists nearly 2,000 organisations to support the health and wellbeing of individuals, communities, and the environment through engagement with nature-based activities. SF&G works with and supports a wide spectrum of organisations delivering services such as Green Care and community and social nature-based activities, across the whole of the UK, working in both urban and rural settings.

Their remit includes:

- Demonstrating the importance and benefits of nature-based activities, advocating on behalf of nature-based organisations.
- Providing support and advice for community growers nationally and internationally.
- Delivery of training programmes and resources to grass roots organisations.
- Promotion of quality assurance via the Green Care Quality Mark to support members to provide commissioned services and to demonstrate delivery of high-quality provision.

1.1.2 Thrive

Established in 1978, Thrive is the gardening for health charity that uses gardening to make positive changes to the lives of people who are living with disabilities or ill health, or who are isolated, disadvantaged, or vulnerable. Thrive delivers social & therapeutic horticulture programmes from its centres in London, Reading and Birmingham to improve an individual's physical and psychological health, communication and thinking skills. Thrive also offers a variety of training, education and advice services for practitioners and professionals using nature-based interventions for health and wellbeing (ranging from introductory workshops to extended learning) and offers practical information and gardening advice to help people realise the health benefits of gardening in their own space and time.

1.2 The Evaluation Team

The evaluation was undertaken by members of the Green Exercise Research Team at the School of Sport, Rehabilitation and Exercise Sciences, primarily the staff members Dr Carly Wood and Dr Jo Barton. A research assistant, Claire Wicks, was employed to conduct data collection, analysis and report writing for this project, with oversight by Dr's Wood and Barton.

The University of Essex Green Exercise Research Team have been researching the concept of Green Exercise for over nineteen years and are world leaders in the field. The extensive programme of research undertaken at Essex has demonstrated that Green Exercise can benefit both physical health and mental wellbeing. Their research acknowledges the physical, social, and psychological health benefits of green exercise and explores how the outdoor environment can be used to promote health and wellbeing and reduce health inequalities. The Green Exercise Research Team consists of experts in the areas of exercise physiology, psychology, public health, environmental sustainability, community engagement and behaviour change. The Team has also been actively engaged in various forms of Green Care research. As part of this research, they work with numerous organisations in the evaluation of their nature-based interventions. These interventions tend to use natural environments and green exercise to facilitate health and wellbeing within communities and target people from all walks of life including adults, children, and young people. Many of these Green Care projects work with vulnerable groups, such as those with mental or physical illness, people with learning difficulties, youth at risk, the homeless, refugees and asylum seekers.

2 Methodology

The data presented was collected throughout the duration of the delivery of the GCF project which ran between May 2019 and March 2022. All survey data was collected by SF&G and anonymised prior to being sent to the University of Essex Researchers for independent analysis. Additional interviews were conducted and analysed independently by University of Essex Researchers.

Participants of all GCF project activities were asked to complete an online evaluation via Survey Monkey. Attendees were asked which event they had attended or which resource they had accessed, their role, geographical region, to rate their level of knowledge of care farming on a scale of

0 - 10, pre and post the activity, and the level of usefulness of the activity on a scale of 1 - 10. Three open ended questions asked what the attendee felt worked well about the activity, what did not work so well and for any further comments. Feedback was received over the duration of the project.

Changes and improvements to the activities and to the project precipitated by Covid-19 and subsequent budgetary and timescale adjustments were made throughout the duration of the project and therefore some comments may be contradictory or no longer relevant.

GCF project staff, from both SF&G and Thrive, were also asked to respond to an online survey that asked about the successes of the project, improvements, future opportunities, and impact of the coronavirus pandemic on the project and sector. Staff were also asked to respond to the following questions on a scale of 0 to 100, with a higher score indicating greater levels of success: i. How successful do you think that the networking element (both regional and national) of GCF has been? ii. How successful do you think the developing supporting resources element of GCF has been? iii. How successful do you think that the advocacy and promotional element of GCF has been? iv. How successful do you think that the quality assurance element (via the care farming Code of practice) of GCF has been?

Semi-structured interviews were conducted with stakeholders via Zoom between 2 November 2021 and 24 January 2022. The stakeholders included care farmers, prospective care farmers and individuals involved with the project at health, care, or policy levels. Interviewees were purposely selected by SF&G to ensure representation from a range of stakeholders. Interviewees' contact details were shared with the University of Essex research team. All stakeholders provided written informed consent prior to being interviewed. Interviews lasted between 16 and 37 minutes. Interview participants were asked a series of questions about the aspects of the GCF project they felt had worked well, aspects that had not worked so well, what could be done differently and the impact of the Coronavirus pandemic on both the project and the care farming sector.

3 Analysis

The results are presented under the four key elements of the project; (i) Advocacy, support and resources, e.g. advocacy, support and promotional work, a wide range of resources including presentations, webinars and webpages, social media analytics; (ii) National and regional networking, e.g. face to face and online networking events; (iii) Training: e.g. starting with care farming, care farming for mental health, developing good practice on care farms, delivering Alternative Provision etc.; and (iv) Quality assurance: via the Care farming Code of Practice.

Interview transcripts were automatically generated by Zoom and checked for accuracy and anonymised prior to analysis. Interview data was coded deductively using NVIVO software, using the four project elements and evaluation objectives as themes. All survey data was categorised into the four project elements.

4 Results

4.1 Participants

A total of 298 individuals who attended GCF project activities completed the online activity evaluation survey including current care farmers (n=99), prospective care farmers (n=122), healthcare professionals (n=40), academics (n=23), individuals from the agricultural or nature sector (n=56), service users or families of service users (n=7), or other backgrounds (n=26), with some participants falling into more than one of these categories. Nine members of staff from SF&G and Thrive involved with the GCF project completed the online staff evaluation survey. Interviews took place with eight stakeholders, including care farmers (n=4), prospective care farmers (n=1) and individuals involved with the project at health, care, or policy level (n=3).

4.2 Quantitative findings

4.2.1 Care farming knowledge levels

In total, 292 respondents rated their level of knowledge before and after engaging with GCF activities. A statistically significant increase in knowledge levels was found with scores increasing from 5.98

before engagement with GCF activities to 8.13 afterwards¹, demonstrating a 36% increase in knowledge levels as a result of the project work (Figure 1). Knowledge levels for the 122 prospective care farmer attendees was also analysed separately. A statistically significant increase in knowledge levels² about care farming was also found for this sub-group, with scores increasing from 5.68 to 7.98, demonstrating a slightly higher increase in knowledge levels (40%) after engaging with GCF project activities (Figure 1).

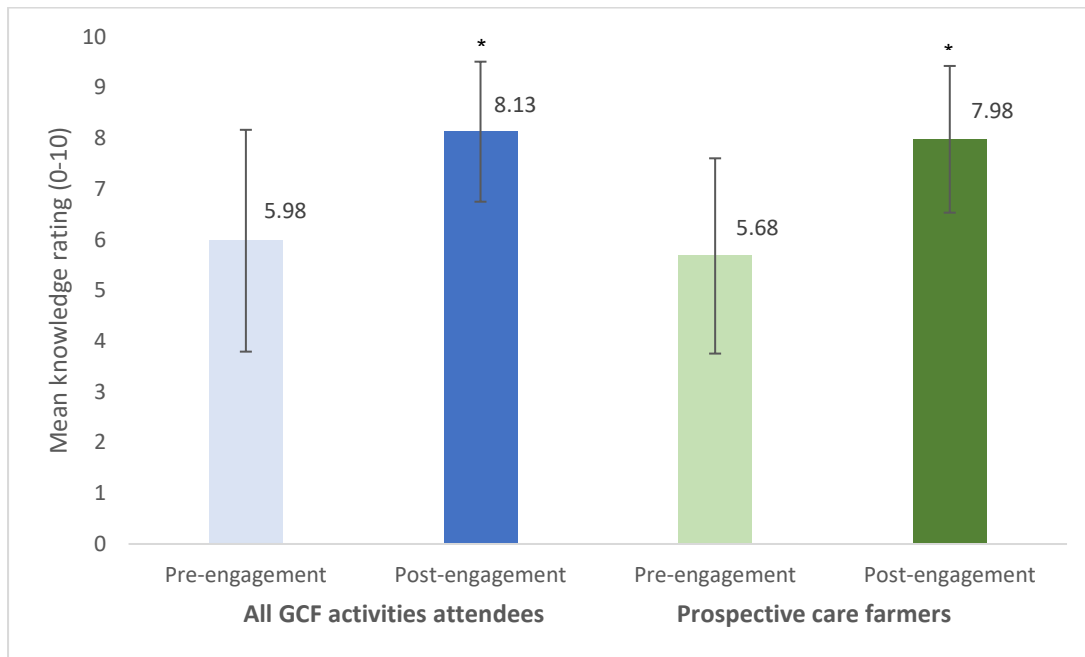


Figure 1. Knowledge of care farming pre and post engagement with Growing Care Farming activities. Error bars = ± 1 standard deviation. * denotes a significantly higher score from pre-engagement.

4.2.2 Usefulness

Respondents were asked to rate how useful they had found the project resources to be. The mean attendee score for the usefulness of the activity provided was 8.61. Responses were dichotomised, with scores of ≥ 5 used to indicate that the activity had been considered useful and scores < 5 indicating the activity may not have been useful. In total, 288 attendees responded to the question, with 98.6% indicating the activity was useful (score of ≥ 5). Of the 122 attendees who indicated they

¹ (t (291) = -20.68, $p < 0.001$) with mean engagement scores increasing from 5.98 to 8.13

² (t (121) = -14.99, $p < 0.001$) with mean engagement scores increasing from 5.68 to 7.98

were prospective care farmers, 120 responded to the question. Scores indicated that 98.3% found the activity attended useful (score of ≥ 5).

4.2.3 Perceptions of success

Staff ratings of the success for the project were highest for developing resources, followed by advocacy and promotion, networking and quality assurance. Overall staff perceived that all aspects of the project were successful (Figure 3).

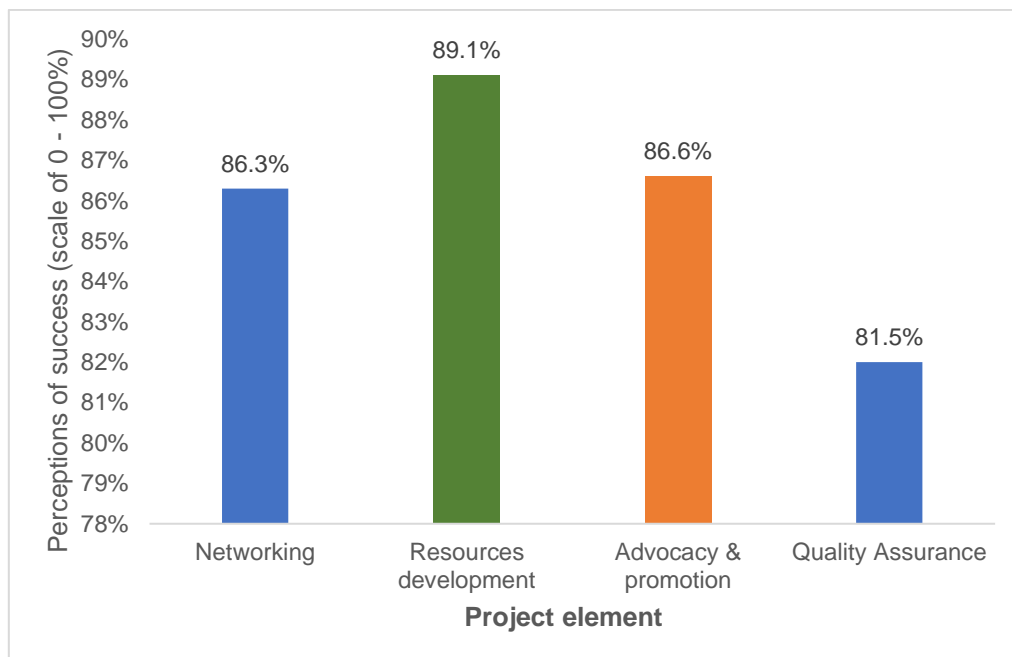


Figure 3. Staff perceptions of success for project elements (networking, resources development and advocacy and promotion)

4.3 Qualitative findings

4.3.1 Advocacy, support, and resources

Advocacy

Successes

Stakeholders felt that the project had helped improve the perception of care farming and had successfully reached the farming community, others outside of the farming community who might want to get involved in care farming (e.g., individuals from other non-farming, healthcare, social care,

and educational backgrounds) and increased awareness of care farming in government agencies such as DEFRA and Natural England. Stakeholders spoke of the value of care farming in helping to reduce the societal financial burden of mental ill health by keeping people well, preventing deterioration, reducing need for long-term medication, or preventing individuals from being sectioned or sentenced to prison.

Stakeholders valued the GCF team's role in advocating for the sector with higher level policy makers, which they hoped might influence positive change for the sector. The project's work consulting with the Government's new Environmental Land Management (ELM) scheme³ was specifically mentioned. A survey respondent also mentioned the value of the project providing information about the need to evaluate outcomes of care farming to demonstrate effectiveness, which helps advocate for the sector.

What hasn't worked so well

There is still work to do to increase awareness of care farming and the contribution that it can make to the healthcare sector. Engaging with key decision and policy makers to increase awareness is challenging, for example, arranging for key figures to visit care farms to help initiate or support policy changes has historically been difficult. It was recognised that the diversity of the care farming offering makes it difficult to advocate, as farms serve different social outcomes that sit within different parts of Government. This makes the messaging about care farming complex. It is noted that raising awareness of the sector and engaging with policy makers is an ongoing issue more broadly, rather than a specific failing of the project.

"I think there's something very useful about having a kind of Centre of expertise that you know that [GCF staff name 1] and [GCF staff name 2] kind of hold. And, knowing that they are communicating at that higher level with policymakers and so on, so you've, you've kind of feel like you're, as, as a world your concerns are going somewhere, you're not working in a vacuum. I think that's really important."

³ Historically, many care farmers have received funding for care farming delivery via the educational access strand of Higher-Level Stewardship in the Government's Countryside Stewardship scheme. This scheme is being replaced by the Environmental Land Management scheme and consultations as to the content and format of this new scheme is currently underway, the GCF team have been involved in discussions to try to ensure care farming provision is included as part of any new scheme. ELM is due to be rolled out in 2024. See: <https://www.gov.uk/government/publications/environmental-land-management-schemes-overview>

Through contact with the team and engagement with the training and resources on offer, the GCF project was in the process of supporting and empowering individual care farmers to approach and engage with commissioners at a local level. However, this was a 'work in progress' and potentially not achieved to its full extent in the shortened time scale of the project

Further opportunities

There are further opportunities to work with organisations that are already engaging with farmers to promote and support care farming as a prospect. It is felt that there is the potential for care farming to be recognised at policy level and become a paid for therapeutic offering, with this recognition being the goal for the sector. This change in culture would help increase capacity and funding in the sector, providing opportunities for existing farmers to build capacity, infrastructure and diversify their offer. However, there is still much work to be done to achieve this, such as establishing consistent referral pathways and funding streams, which the GCF project was helping to work towards. Learning from the project can be applied to expand and help build capacity for a broader range of nature-based services across the green care sector, to deliver high quality commissioned services to individuals with a defined need.

Stakeholders described the negative impact of the coronavirus pandemic on service users who were no longer able to access care farms, and on wider society through decreased mental health at population level. It was felt the care farming sector could have a key role in addressing this post-pandemic. The impact of the pandemic and public health messaging has increased awareness of the connection between spending time outside in natural environments and mental health and has provided a unique opportunity to maximise awareness of care farming and translate this into increased support for and demand in the sector. It was hoped this would also result in greater support for care farmers themselves. However, this relies on the investment and commitment of external organisations (e.g., CCGs, social prescribing) to care farming, not just members of the public. Without adequate funding to increase capacity in the sector, this may increase pressures on existing care farmers who want to serve their communities.

The shift in localised living post-pandemic (i.e., residents are no longer leaving their communities to commute to work) might also have a positive impact on the relationships between care farmers and community members.

“...you know the challenges that Covid has presented for a mental health point of view are immense, and so, therefore, what a fantastic opportunity for care farms to promote what we do to get people out.”

Stakeholders spoke of the changing landscape of farming (e.g., under-used assets on farms, reliance on subsidies) and care farming as an opportunity to develop different uses of green space and new ways for farmers and landowners to generate income and to stay relevant in terms of the social goods and services they are able to offer. There is still work to be done to reframe care farming as a mainstream activity for farmers to consider. Improved clarity about where care farming fits within the rural community may support this.

“... those farms are embedded culturally and geographically in local communities, they're often in parts of the country that have no other services available to them to support the sorts of groups in society that care farming is supporting so they are, they are in a unique position”.

Changes to the healthcare system also offer opportunities for care farming, such as working within the new Integrated Care System, which may help to overcome some of the complexities of the healthcare system. However, to be successful, this needs to be driven by a project such as GCF. There are also opportunities to link in with social prescribing, however, some stakeholders shared concerns that the organisation/management of social prescribing has limited its potential to enhance public health.

Comments included social prescribing not currently being a well-formed offer and a lack of mainstream understanding of social prescribing. Care farmers and green care providers also shared a need for guidance on how to engage with initiatives such as social prescribing. It is also necessary to provide clearer guidelines to social prescribers about the offer on individual care farms and to build confidence in the ability of care farming to meet health care needs. Opportunities also exist to incubate new partnerships to support innovative working aligned with priority needs, themes, and audiences, including local infrastructure organisations that represent non-profit or charity start-ups.

The care farming and broader green care sector will benefit from support from various organisations regardless of the size of the initiative.

GCF is positioned to work with care farmers to help build the evidence-base to demonstrate the effectiveness of care farming and communicate this to commissioners and funders or provide support to care farmers in communicating evidence at local or national levels. Further, opportunities exist to demonstrate links with other outcomes, such as educational attainment which will help to build relationships with schools to ensure children have early contact with nature. The beneficial impact of care farming needs to be demonstrated and unequivocal so that there is an ongoing commitment to care farming regardless of changing governments/ministers.

Future work includes monetising the benefits of care farming, to demonstrate the costs savings to the NHS (e.g., diverting people from accessing GPs and other Primary and Secondary healthcare services) and other sectors (e.g.. education). Care farming also provides an opportunity to support the health and wellbeing of farmers themselves through increased value and pride in their work at a time of change and uncertainty in the farming sector and can reduce isolation of farmers who often work alone in remote spaces. In addition, there are clear opportunities to link in with wider policies, (e.g. COP26) to generate support for care farming.

Support

Successes

Stakeholders spoke of drawing on the expertise and support of the GCF team for a multitude of reasons and considered them as a central point for concerns and advice. The project team were described as “well organised” and able to provide a “wealth of information” and “comprehensive guidance”, including signposting to resources at a national level. Care farmers described feeling “supported”, “not alone”, “more motivated” and “part of something larger” because of the support received. One attendee of the ‘Celebrating Care Farming: Adapting to change’ national conference held in March 2021 shared that the conference had enabled them to “feel part of the bigger picture”.

Care farmers felt able to reach out to the team when feeling overwhelmed, in need of information or support and expressed gratitude for the support received. The level and tone of support was well received with one participant describing the communication with a member of the team as “sensitive”. The support received has enabled growth of individual farms. This support helped care farmers to feel more confident in their practice and that there was potential for them to take steps forward. GCF project participants valued opportunities to talk to real people about real issues and come together with others to consider strategies, develop ideas that help care farmers to grow and develop their offer, helping to increase financial viability and exploit opportunities offered by green space. Stakeholders also found the team extremely helpful in keeping up and understanding wider changes and issues relevant to the sector, such as developing links with social prescribers and the sector’s response to the coronavirus restrictions.

Staff shared that the pandemic saw increased demand for tailored work around the safety/risks of the care farming activities, to which the project responded with suitable webinars and network meetings. It was noted that the funding for the project has enabled the support and resources for care farming to significantly improve. Project staff were valued for their knowledge and expertise and described as “responsive and skilled” and “competent and committed”. Stakeholders had high praise for the staff and concern was expressed about where care farmers will receive the support needed to continue to the work and positive steps initiated by the project once funding has ended.

“I can honestly, honestly say that they [GCF project staff] have been absolutely amazing. The depth of information, the dedication of the staff. If I had to query and sort of you know I emailed [GCF staff name 2] or [GCF staff name 3], if they didn't know the answer, with lots of sorts of links and well try this, try that. I honestly just can't praise them enough.”

“I can't speak highly enough of the organisation. I would be absolutely devastated if it wasn't there as a source of information.”

The GCF project supported care farmers throughout the pandemic. Two specific areas were particularly valued; support navigating the changes to the sector and seeking funding which enabled care farms to stay afloat while regular income stopped due to the restrictions. Support in applying for funding ensured that core operating costs could be covered, allowed care farms to operate on lower

numbers, or simply be there when restrictions were lifted. The restrictions resulted in several care farms having to remain closed, although one stakeholder spoke of being identified as a key service by their council and were able to keep operating throughout the pandemic. The pandemic has made it extremely difficult for prospective farmers to start up.

Care farmers are at risk of experiencing social isolation and this was exacerbated by the pandemic. GCF created an inclusive community, with opportunities to engage in the activities believed by care farmers to have had a positive impact on loneliness.

Future opportunities

There is potential for increased demand of care farming post-pandemic, therefore care farmers may need support to increase capacity. There is a tension between matching need and demand, and whilst there is huge need for mental health support, the benefits/demand for care farming are not always realised by individuals until it is experienced. This demand has been exacerbated by coronavirus pandemic.

“And the proof of the pudding is people coming out bringing a group of kids and you know, seeing how they are and seeing how they then behave in school as result of being here. So, actually, is there a demand? i.e., are there lots of people going “wow I wish I had a care farm near me I'd like to do that” - probably not. Is there a need, and can you create a demand? - massively I would say.”

The lack of alternative and adequate sources of support for care farmers demonstrates the need for the GCF project. It was felt that SF&G do not have the knowledge to give specific advice and can only signpost enquirers to the knowledge base and that there is a need in the sector for dedicated support. As funding remains a key issue for a lot of care farmers, additional support to access and apply for funding opportunities would be beneficial.

Other comments included the need for more regional/support opportunities. Whilst funding for regional support officers and face-to-face regional networking was included in the original iteration of the project, budget changes and the impact of the pandemic resulted in later iterations having to focus

on online delivery and networking. Increased focus on continuing resource development in the future (post GCF) would complement the training and networking offer.

Resources

Successes

The project offered a “good level” of resources providing “rich information”, which included resources on the project website, films, webinar recordings, fact sheets, case studies and newsletters (including the “Resources Round-up”). The information around funding was particularly valued by existing care farmers, more so during the pandemic when they were reliant on external funding to keep them afloat. In some cases, funding facilitated development of a broader service offering for both existing and prospective farmers (e.g., videos of farms). For prospective care farmers, the resources were helpful in demonstrating when and how care farming works, encouraging, and motivating prospective care farmers to start up.

“I really liked the bulletins, the newsletter bulletins and just having that regularly so you can know because grants change over time, and grants was one of the main things that I'm looking out for just to subsidise places. That's mainly what we use them for as well. Because without those places being subsidised, we might not be able to fill our service, you know capacity and then we're you know we're more vulnerable to not existing.”

Themed webinars were a useful space to generate ideas and solutions in collaboration with others, e.g., creating outdoor spaces for delivery to operate within coronavirus restrictions or diversify their services to guarantee an income. Stakeholders described positive experiences of being involved in the delivery of training and felt valued when being asked to contribute.

“...that felt really good to be like I've got something to contribute, I felt a heightened sense of value as an individual, cos I've been on my own so much yes, it can be quite lonely I guess a bit akin to being a farmer they have, they can be you know quite isolated in their in their role. I felt like that, even though, I have you know people around me all the time, but, I think when you're responsible for the business solely, ultimately, then I felt a bit alone at times yeah. So,

it's good to be asked to contribute and then I felt like okay yeah, I've got something perhaps to pass on to others through my experience and that felt good."

Attendees at the themed webinars and regional online events described speakers as "inspirational", "knowledgeable" and "articulate" and hearing from a range of relevant professionals (e.g., GPs, social prescribers, and representatives from NHS England and Growing Well), service users and care farmers who offered a range of perspectives was valued.

What didn't work so well

Some improvements were suggested regarding resources. Stakeholders felt it would be beneficial for resources to be more specific and focussed, for example the bulletin could be shorter and more specific, offering specialist meetings, aimed at farms with different specialisms, target populations (e.g., dementia) and at different stages of set-up (e.g., funding options). While the support and resources were valued, they could at times be overwhelming for care farmers who may not have time to search long lists of information⁴. Having a dedicated person to signpost to resources was suggested and sending more specific and a manageable quantity of links, to create a more individualised offer. There was some frustration that the project is not suited to care farmers with very individual or specific needs.

Future opportunities

It was shared that producing a directory of care farmers with special interest and more information about which groups care farms support (e.g., specific learning/physical needs, special educational needs pupils) would be advantageous. Information on additional learning or joining groups would also be welcomed.

⁴ Growing Care Farming responded to this feedback during the project. During the last year of delivery, a shorter, streamlined and more accessible newsletter was offered, and resources and funding opportunities were shared via the resources round up.

4.3.2 Networking

Successes

Networking opportunities were valued by care farmers for peer support between care farmers at different stages of the process, listening to others' experiences, connecting with like-minded people with shared visions, good practice success stories, problem solving and giving advice. Networking events were seen as an informal arena for all to speak and share, with care farmers from all over the country joining networking meetings providing rich and diverse experiences and helping to build provision nationally. Care farmers described sharing contact details and how connections made through Networking events resulted in site visits and the identification of potential partnerships, which may otherwise have been difficult to establish. These opportunities helped to integrate previously isolated farmers into care farming communities created by SF&G.

“For me, that that was an eye opener because people talking and they, they were mentioning things that I hadn't even heard of even thought of and being able to say “oh yeah that would work” or “yeah I'd like to know that a bit more about that” and, at the end of the sessions, there was always links, as to how to get in touch with people and so on.”

“But I think that's been really good being able to meet, I've met probably 30, 40, 50 people that I wouldn't have met otherwise from all over the country.”

What didn't work so well

Ensuring events are useful for care farmers at all stages can be difficult. There is a balance between events combining care farmers at various stages, to enable learning from each other, whilst still ensuring events are relevant to all. Facilitation of regional groups could have been improved to ensure inclusivity and continued engagement, for example, one attendee felt that they didn't have a chance to speak and that a more skilled facilitator would have enabled this.

Future opportunities

Provision of a directory of care farmers with special interests would help care farmers form connections and partnerships. With increasing numbers attending networking events, setting a topic ahead of time and having a shorter agenda was thought to be beneficial.

4.3.3 Training

Successes

Training (and themed webinar sessions) were received positively by attendees. Training was highly relevant, up to date and covered a good breadth and depth of information, topics (e.g., strategic and delivery), geographical areas and targeted care farmers at various stages of the process. Training was received positively by many attendees and sessions described as “informative”, “thought provoking”, “inspiring”, “enjoyable”, “helpful”, “fun” and “clear to follow”.

Themed training (e.g., dementia, learning difficulties) was particularly well received. Video content produced by care farmers was considered inspirational as were testimonials from clients. Existing care farmers felt different training sessions specifically for stages of development might be beneficial, but they also described the benefit of learning from each other and wanting to support prospective farmers and deriving a sense of value from this. The personal and practical nature of the content presented by other care farmers provided an opportunity for attendees to listen and learn from others, including hearing about different approaches to care farming, opportunities to ask for advice, and understand the value and personal benefits of being a care farmer.

Stakeholders described the importance of working towards having established qualifications in place for the sector, to increase the credibility of, and confidence in care farming, attract funders and build capacity. Provision of adequate training is particularly important as the individuals being referred may have more severe or complex needs and the training offer should reflect the changing needs of service users. The confidence of referrers (e.g., social prescribers) is essential for care farming, and training, qualifications and quality assurance are vital to achieving this.

“... one of the key things that's needed in the sector is access to qualifications. Erm so that people can feel secure in their practice and, and have that credibility to go to funders and to be able to say look everyone's properly trained properly qualified, we're running a good outfit here.”

“... there will be a nervousness to be offering that care farming as an opportunity, unless, for that growing proportion of people with more complex needs, unless the referrer is confident about the skill sets that are going to be offered by those who are providing the service.”

Online delivery of the courses via Zoom helped to increase accessibility of training and helped to keep the community and links going throughout the pandemic. The online sessions brought together a wide range of people from across the country and beyond. The use of the live chat sessions and breakout rooms enhanced opportunities for interaction. The combination of delivery methods e.g., presentations and videos, were well received as was the flexibility of accessing pre-recorded content. Tutors were described as supportive and helpful in answering questions. Attendees appreciated the printouts, use of accessible language, and access to additional literature and support. The duration of training was generally felt to be appropriate where speakers ran on time.

What didn't work so well.

Time commitments of running care farms sometimes made it difficult for care farmers to find time to attend training, particularly if training did not appear to be directly relevant to care farmers or an issue that they were tackling. For some farmers, being closed during the pandemic increased time available to engage in training, however, preparing to re-open after the pandemic reduced available time. Some technical issues, such as poor sound quality, were experienced which negatively impacted experience. Some attendees also experienced issues with passwords and navigating the course. For care farmers to engage in sessions fully, it was important for them to know what hardware was required for events ahead of time.

Attendees asked for additional training in some areas, for example how the sector sits within current policy and government and the vision for growing the sector. Information around funding, practicalities of being a care farmer (calculating salary, staffing, etc.), starting out, application or

referral procedure, evaluation, and feedback, and understanding how membership with SF&G is beneficial would be useful. Training related to specific service user groups was mentioned, including nurturing young people with anxiety and depression, autism, and challenging behaviours. Attendees felt training would benefit from having additional emphasis on practical rather than professional support and less theory and more practical examples.

There were some inconsistencies in feedback around the content of presentations. Some attendees felt presentations were overly complex or in-depth, while others felt they were too general or broad, lacking sufficient detail. Some comments indicated documents were difficult to read, e.g., too much detail on individual slides, the visual presentation of slides (which contained mainly text) could be improved, and some links to resources were out of date. Attendees who attended multiple modules described overlap between modules. Clearer information about the content of individual modules so that attendees can identify overlap and relevance was suggested, as well as titles accurately reflecting the content. Some attendees felt the presenters could be more dynamic and several attendees shared that they would have preferred seeing speakers, rather than simply having slides with a voice over.

For the blended learning client specific training, groups sizes varied, and some attendees felt smaller groups would help to facilitate discussion, while other comments received were around being a sole learner on a training session, which then lacked input from others. Other improvements suggested included longer to access training content, more question-and-answer sessions, interactive activities to consolidate learning and more site visits.

Staff fed back that the project could have benefitted from more face-to-face opportunities, but also recognised the improved accessibility of online delivery and the impact of coronavirus restrictions on training delivery. It was acknowledged that some aspects of training are hard to replicate online, and that onsite delivery adds value to the training as does including current care farmers to share their experiences.

Future opportunities

Training provision could be further enhanced by ensuring care farmers are adequately trained to respond to the requirements of individuals with more complex needs. This includes recognition that the traditional care farming model (husband and wife) might not be sufficient and additional staffing may be required (e.g., mental health care professionals). One stakeholder described being part of the 'Think Tank' that developed the training content, however, their experience was that the content was guided by Thrive rather than the needs of care farmers. Future events and training should be designed in equal partnership and be inclusive for care farmers.

Whilst the remit of the project was to provide support for care farmers in England, online delivery resulted in a much broader geographical reach and some attendees requested information on a broader geographical area. This demand demonstrates potential to build on the momentum established by the project in different geographical areas.

Additional input into training from current care farmers would be beneficial for prospective care farmers; and for existing care farmers consideration of succession planning and work on developing resilient operating structures for care farms that have been running a long time. Attendance at training activities would be supported by offering additional times outside of working hours (e.g., weekend and evenings).

4.3.4 Quality Assurance

Successes

Quality Assurance is one of the key ways to increase the confidence of referrers in care farming. The level of support received from staff around the care farming Code of Practice⁵ was described as "excellent". It is believed that the Code of Practice is a valuable tool for regulating care farming, again building credibility and confidence around the sector. One participant gave an example of a young person being exploited by a farmer; such cases can damage the reputation of care farming; whilst another stakeholder described working in partnership with a third-party organisation who take on

⁵ Soon to be renamed the Green Care Quality Mark

responsibility for ensuring the farm operates within the Code of Practice. However, this is not the case for all care farmers.

“...so one really important thing was their Code of Practice. I was very keen to adopt that and go through that quite rigorous process with them to check our quality and standards and policies, and that I found that very useful.”

Future opportunities

Care farmers are typically time poor and have limited time to attend training and workshops to ensure they have adequate training to maintain quality standards. Tailored and more specific training and resources would help tackle this.

5 Summary and Recommendations

5.1 Summary

There are clear successes from the GCF project that can be used to build momentum in the care farming sector, supporting prospective care farmers in start-up and existing care farmers to build capacity and diversify their offer. However, learning from the GCF project should not be limited to care farming but should also be used to support similar projects within the wider green care sector. There is a strong sense of community and support between care farmers, and the networks established during the project have enabled connections and partnerships to develop. Ensuring continued opportunities are available for care farmers to engage with each other, particularly new prospective care farmers, is critical.

Changes in society (e.g., impact of coronavirus) and the needs of potential service users (e.g., more complex cases) present immense challenges and opportunities for the sector and where there is not a central source of information, training and support challenges may become unsurmountable and opportunities unrealised. Ensuring there is a coordinated effort to support care farmers and green care providers in responding to such changes is essential.

Changes within the healthcare sector (e.g., social prescribing and Integrated Care Systems) offer opportunities for care farmers to work in a structured way within the sector, however, navigating and negotiating the role of care farming requires some coordinated effort. Furthermore, continuing to enhance the credibility of the sector through training and quality assurance is essential to support the integration of care farming into the wider health and social care sector. Additional work is also needed to raise awareness of the sector and demonstrate the potential benefits of care farming and green care as a routine therapeutic offering. This can only be achieved through continuing work advocating for the sector and supporting care farmers to engage with policy makers at local and national levels. A culture change would further support care farmers through established, consistent referral routes and funding streams facilitating upscale and diversification.

Research is demonstrating that there are cost benefits associated with investment in nature-based and green care interventions. The health and social benefits of green care are reducing demand on strained NHS services and helping to improve population health. A commitment to funding projects such as GCF is called for.

5.2 Recommendations

The following recommendations have been made based on the feedback presented in this report.

The recommendations outlined are intended to support capacity building of the sector through increased awareness and credibility of the care farming, via training, quality assurance and advocacy.

Care farmers themselves are a key resource to achieving growth in the sector and as such, recommendations also highlight the importance of ensuring existing and prospective care farmers have networking opportunities allowing for peer support, knowledge exchange and partnership building.

- Demonstrate relevance of care farming to wider Government policies (e.g., COP 26, Levelling Up), for example by generating additional empirical evidence around the environmental, social, educational and wellbeing impact of care farming.
- Expand the geographical remit of resources and support to all UK regions.

- Develop specific resources for specialised care farms (e.g., relating to working with different groups of service users) and produce a directory of care farmers with special interests.
- Provide dedicated support to help increase accessibility of the vast resources available via the GCF project.
- Use lessons learned from the GCF project to broaden work and support to the wider green care sector.
- Co-produce any new training materials with care farmers in a more inclusive way and ensure training content captures what is most relevant to care farmers (e.g., practical advice, Code of Practice). It is acknowledged that care farmers all have different ways of working, and it is a challenge to develop training that represents all approaches and models. Inclusivity and engagement of care farmers can also be improved through ensuring appropriately trained individuals facilitate networking sessions.
- Continue advocating for the sector at local and national levels and continue to work towards care farming as a paid for therapeutic offering.
- Continue helping care farmers to adapt to changes and opportunities in the healthcare system (e.g., social prescribing and Integrated Care Systems).
- Continue to provide the core offer of the GCF project, including space for care farmers and green care providers to network and connect, share knowledge, ideas, and form partnerships and support to care farmers, including funding, Code of Practice, etc.
- Continue to offer training and networking in a flexible way (e.g., online via Zoom), but with a move to a blended learning approach as appropriate (e.g., visits to care farms)
- Continue offering relevant training and qualifications as the care farming sector evolves (e.g., responding to different needs) to support diversifying of offer and build credibility of the sector.