Care farming and green care in Salford
Gibbons, AR, Hardman, M, Howarth, ML, James, C and Sherriff, GA

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Care Farming and Green Care in Salford

Dr Andrea Gibbons, Dr Michael Hardman, Dr Michelle Howarth, Candace James, Dr Graeme Sherriff

September 2017
About the authors

The Sustainable Housing & Urban Studies Unit (SHUSU) is a dedicated multi-disciplinary research and consultancy unit providing a range of services relating to housing and urban management to public and private sector clients. The Unit brings together researchers drawn from a range of disciplines including: social policy, housing management, urban geography, environmental management, psychology, social care and social work.
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1. Introduction

1.1 Purpose of the report and project

This report presents a University of Salford (UoS) investigation into the potential for care farming in Salford as part of the University’s teaching, research and enterprise activities.

The work has critically engaged with the notion of care farming with a view to better understand how this approach can contribute to helping communities with diverse needs in terms of physical and mental health as well as wider determinants of health such as social inclusion and employability. Through the establishment of, and engagement with a network of key local stakeholders, the work developed a model that has explored the potential of a care farm. What has emerged is a first step towards the design and establishment of an urban care farm that that could serve as a centre for learning and research as well as integrate existing activities as part of a green and blue network identified through the stakeholder engagement work. This report provides a direction for future work on care farming in Salford in general, and in terms of the University’s teaching and learning activities in particular.

1.2 What is Care Farming?

First, a note on our terminology. The combination of food growing, animal husbandry and other nature-based interventions in a greenspace setting as a form of social care or health promotion can be referred to as ‘care farming’. Whilst for the purpose of this report, the term care farm will be used, it is acknowledged that other terminology may be more accessible and familiar to a range of populations and is used by a number of professionals and non-professionals. ‘Social farming’ can therefore seem more encompassing, whilst ‘nature-based interventions’ can capture a broad range of approaches that reflect the potential therapeutic value of activities within and amongst green and blue spaces. As the first step in a longer process, this report therefore situates the concept within a national context and connects it to existing networks. It therefore uses the nationally recognised name ‘care farm’, whilst acknowledging that the project to be collaboratively established in Salford is leaning towards an alternative title such as ‘social farm’. We are keen that care farming be understood as something that can be approached flexibly and creatively within a broad framing, and as the project moves forward into the planning stage, we will be guided by stakeholder preference.
1.3 Aims and objectives

The research has been funded by the University of Salford through the Higher Education Innovation Fund (HEIF). The aims and objectives of the research were as follows:

- Establish the University of Salford as a key lead in the development of a local care farm.
- Generate a sustainable network of key stakeholders, including but not limited to RHS, Federation of City Farms and Community Gardens, local CCG and Community Assets group.
- Produce a model of working that tests innovation.
- Deliver a session at a major international conference.
- Critically engage with the concept of a care farm to explore research, teaching and learning and enterprise opportunities.
- Identify opportunities for work-based learning in a care farm for student placements, research, and student projects.
- Research stakeholder interests, analyse and prepare a paper for a high quality international journal.
- Engage with local businesses to establish potential financial interests and philanthropic opportunities.
- Provide a report that recommends future direction of the care farm in terms of teaching & learning, research and innovation.
- Co-produce a white paper on the feasibility of a care farm.
- Use the report to explore options for further funding through research councils and similar bodies.
- Disseminate the findings through social media, local community groups, media and the care farm network.

1.4 Structure

The report starts with an overview of the concept of care farms, including consideration of the evidence base for the effectiveness of the approach for mental and physical health with particular reference to the notion of social prescribing. We then turn to the engagement activities carried out in Salford as part of the research and present our findings concerning the network of organisations already in place, the identified opportunities for care farming in Salford, and the organisations that could potentially be involved in its development and delivery. We place these findings in the context of our proposal for a ‘green and blue network’ as part of a future Salford ‘Natural Health Service’. We have mapped out the next stages for these initiatives and for teaching, learning and enterprise at the University.
2. Care Farming in Theory and Practice

2.1 Provision of ‘Green Care’ through Care Farming

It is acknowledged that there are a range of nature based activities that can promote health and wellbeing for individuals and the community (Sempik & Bragg, 2013). Nature based activities are often referred to using a range of terms such as ‘ecotherapy’, ‘green care’, ‘therapeutic horticulture’ and ‘social horticulture’. Correspondingly, nature-based projects include gardening, farming, walking, community gardening, running and a range of other activities traditionally undertaken using green and blue spaces within a natural context. Within the concept of care, nature based activities have been defined as being ‘an intervention with the aim to treat, hasten recovery, and/or rehabilitate patients with a disease or a condition of ill health, with the fundamental principle that the therapy involves plants, natural materials, and/or outdoor environment, without any therapeutic involvement of extra human mammals or other living creatures’ (Annerstedt & Währborg, 2011). More simply, they are the ‘therapeutic application of nature-based interventions’ (Pretty, 2006; Sempik & Bragg, 2013; Sempik, Hine, & Wilcox, 2010).

The evidence base for a wide range of positive impacts on health and wellbeing through ecotherapy and other green care initiatives continues to grow. Natural England (2016) suggests that greater levels of access to natural environments are associated with lower levels of mortality and morbidity across common long-term conditions such as cardiovascular disease, respiratory disease and type 2 diabetes. Nature based activities can help people to reconnect with others through reducing social isolation (Howarth et al, 2016), help combat childhood obesity (Alexander et al, 2013) and improve general wellbeing (Gonzalez et al, 2010). Most significantly, increasing access to nature and nature based activities are believed to reduce broader health inequalities, benefitting both targeted communities as well as the wider society (Faculty of Public Health & Natural England, 2010; Marmot & Bell, 2012). An exciting, but much less well studied area is that involving the health and wellbeing to be found in ‘blue spaces’ as well as green spaces. These are defined by Foley and Kistemann (2015, 157) as ‘health-enabling places and spaces, where water is at the centre of a range of environments with identifiable potential for the promotion of human wellbeing’. Green care, and potentially blue care, offer asset-based approaches with very broad positive impacts through targeted activities suitable for social prescription, a medical approach to connecting people to non-clinical support (community assets). Social prescribing is discussed further in Section 2.3.1.
## Nature, Health and Wellbeing Sector

<table>
<thead>
<tr>
<th>Everyday life - General population</th>
<th>Health promotion - Nature-based activities General population</th>
<th>Green Care - Nature-based therapy or treatment intervention People with defined need</th>
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</thead>
<tbody>
<tr>
<td>View from window (at home or work)</td>
<td>Restorative landscapes and gardens</td>
<td>Green exercise (as a treatment intervention) nature as therapy; wilderness therapy</td>
</tr>
<tr>
<td>Experiencing nature</td>
<td>Green exercise initiatives (e.g. walking for health)</td>
<td>Social Therapeutic Horticulture (STH) Community food growing &amp; gardening</td>
</tr>
<tr>
<td>Gardening/Horticulture (at home or work)</td>
<td>Social Therapeutic Horticulture (STH) Community food growing &amp; gardening</td>
<td>Social Therapeutic Horticulture (STH) Community food growing (as treatment intervention) Horticultural Therapy (HT)</td>
</tr>
<tr>
<td>Forestry, environmental conservation (at work or at home)</td>
<td>Environmental conservation groups</td>
<td>Environmental conservation (as treatment intervention) Ecotherapy</td>
</tr>
<tr>
<td>Interacting with nature</td>
<td>Farming</td>
<td>Community farming, city farms, one-off care farm visits</td>
</tr>
<tr>
<td>Human animal interactions Animal-based recreation (e.g. dog walking, horse riding)</td>
<td>Animal Assisted Activities (AAA)</td>
<td>Animal Assisted Therapy (AAT)</td>
</tr>
</tbody>
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**Figure 1** - Range of Nature Based Activities (based on Bragg et al, 2010, Sempek & Bragg 2014, Bragg 2014).
There are three reported levels of engagement with nature that demonstrate health benefits which include ‘viewing nature’, ‘being in the presence of nature’ and ‘active participation with nature’ (Pretty, 2004). Such engagements range from the general health benefits of every day exposure to nature, to the health promotion of general activities undertaken with some level of community or organisational mediation, to medically prescribed activities undertaken as treatment for defined conditions (see figure 1).

Care farms provide nature based activities that both include health promotion and/or green care. Importantly, care farms, are highlighted as providing green care used to support people with a defined need (Bragg & Atkins, 2016; Sempik & Bragg, 2013) and are part of wider ‘social prescribing’ approaches used in contemporary health and social care practice. Natural England recommends that healthcare professionals should be exposed to the concept of care farms through the social prescribing context, and recognise the potential benefits for patients and service users (Hine, Peacock & Pretty, 2008). Moreover, they advise that care farming be incorporated into the social prescribing context as a service that people can access within a health and social care context.

2.2 The Care Farm Concept

As discussed, although the term ‘care farm’ is most frequently used, our consultation with stakeholders identified that for some, this term was unhelpful as it was thought to represent a medical model that does not fit with the vision and current work of Salford’s ‘Realising the Value’ strategy, which emphasises person-centred approaches within an asset based context. It was therefore considered that the concept of social farms may be more appropriate for an initiative in Salford. As an initial report relating local possibilities to the national context and existing networks, however, the term care farm will be used here for ease of comparison.

Care farming is commonly defined as the use of commercial farms and agricultural landscapes as a base for promoting mental and physical health, through normal farming activity (Hine, Peacock & Pretty 2008). However, care farming has developed over the past decade and it is recognised that care farms offer a range of interventions that may be associated with the voluntary sector through social enterprises. Hence, the later definition reported in the Natural England Commissioned Report (Bragg, Egginton-Metters, Elsey, & Wood, 2014) suggests that a care farm “utilises the whole or part of a farm to provide health, social or educational care services for one or a range of vulnerable groups of people, providing a supervised, structured programme of farming-related activities, rather than occasional one-off visits”. This definition reflects the broader scope of care farms and interventions that can provide effective support for diverse populations (Hine, Peacock, & Pretty, 2008).

Figure 2 - Common examples of person- and community-centred approaches to improved health, from Realising the Value. Ten key actions to put people and communities at the heart of health and wellbeing (Health Foundation / Nesta, 2016) as found in the Greater Manchester Population Health Plan 2017- 2021

Typically, care farms provide structured nature-based activities that use person-centred approaches to support an individual. Significantly, care farms are able to provide such structured approaches for people with learning disabilities, anxiety, mental health disorders and can help promote physical activity. They can also provide a mix of nature-based activities that promote health more generally, and green care, which includes ‘complex interventions’, such as animal-assisted therapy, therapeutic horticulture and others (Sempik et al. 2010). These nature-based and green care activities can be prescribed by GPs, link workers and health & social care professionals under a social prescribing framework.

There are currently over 250 care farms across the UK, many of which are registered with the charitable organisation Care Farm UK. In addition to Care Farm UK, the Federation of City Farms is an equivalent organisation that supports the development of urban care farms. The examples across the UK range from small urban care farms in the heart of housing estates to working agriculture farms. For example, ‘PossAbilities’ (www.possabilities.org.uk) in Heywood includes small animal livestock, therapeutic horticulture activity and a community café, Botton Social Farm (www.cvt.org.uk/communities/botton-village), arguably at the other end
of the spectrum, is an extensive working, agricultural rural farm that provides support for people with learning disabilities and includes access to a creamery, bakery, herbarium, café, large livestock and much more. It is understood that both of these care farms provide green care to a range of populations, with diverse needs using nature and nature-based interventions.

2.3 Green space, Activity and Health: Benefits of Care Farming

Social Prescribing
Social prescribing is defined as being a “formal means of enabling primary care services to refer patients with social, emotional or practical needs to a range of local non-clinical services and provides a framework for developing alternative responses to meet need” (Brandling & House, 2009). The evidence base detailing its benefits indicates that this form of initiative is person-centred, improves quality of life and reduces social isolation (Realising the Value 2016). Social prescribing now forms part of the Greater Manchester Population Health Plan (2017-2021) which, in common with Salford’s Locality Plan, also promotes person- and community-centred approaches (see figure 2). At a National level, social prescribing is highlighted in the GP Forward View (2016) and has become one of NHS England’s 10 high-impact changes for general practice. In 2016, the Social Prescribing lead for NHS England was appointed to take forward its development across the UK and look towards bringing together disparate social prescription provision.

According to the National Indices of Deprivation, Salford is the 16th most deprived area in the UK, a statistic reflected in the health outcomes of its residents. According to the Greater Manchester Local Health Plan (2017), less than 30% of presenting issues at GP surgeries actually require clinical intervention, moreover, 70% of appointments are due to issues related to wider social determinants. Thus making progress in the Salford Joint Strategic Health Plan, which aims for a healthy city that enables residents to “Start Well, Live Well, Age Well”, will require innovative approaches that are able to encompass both health and environment. Against this backdrop, it is evident that social prescribing offers an opportunity to connect patients to services and groups outside of formal health or social care.

In evaluating the effectiveness of social prescribing, the methodologies used are often mixed and there are no ‘gold standard’ experimental approaches that have been used to measure the effectiveness on clear health and social care outcomes. This is partly due to the diversity of nature-based interventions and range of population to which social prescribing is provided, making outcome measures challenging to capture. Initial efforts are promising, however. The Rotherham’s Social Prescribing initiative ( piloted 2012-14) undertook one of the few economic evaluations of the impact of the social prescribing model using patient-level Hospital Episode Statistics (HES) provided by their local CSU (Commissioning Support Unit). Their findings identified that social prescribing influenced a reduction in A&E attendances, outpatient appointments and inpatient admission by 20-21%. This equates to potential cost savings of £1.98 for every £1 invested (Dayson et al, 2016) and could therefore make this and other nature based activities an attractive approach for commissioners.

The role of a Natural Health Service in facilitating Social Prescribing
A ‘Natural Health Service’ is a model that uses nature based activities to promote health, and packages those activities in a way that allows the formalisation of a relationship with social prescribers. Focussing a focus on health rather than disease in order to support community resilience and the wellbeing of individuals, Natural Health Services are promoted by Natural England and the Faculty of Public Health as a means by which planners, health professionals, policymakers and communities themselves can promote health through access to green spaces (Faculty of Public Health & Natural England, 2010).

One example is the Natural Health Service (NaHS) across Merseyside & Cheshire. Led by The Mersey Forest, it has been using nature based activities to improve the health and wellbeing of individuals for a number of years. The NaHS consortium is comprised of 20 organisations which include charities, councils, Higher Education Institutions and National organisations such as the National Trust, Natural England and the Wildlife Trust. Services offered with the NaHS are similar to those existing in Salford, for example, Therapeutic Horticulture, Health Walks & Forest Schools (Nolan, 2015).

2.4 Case Studies of Care Farming: Local and National

There are many diverse examples of care farms across the UK, with some schemes featuring animals whilst others explicitly focus on gardening. A glimpse into local and national exemplars of care farming show both successful practice on the ground, as well as potential challenges and opportunities. One local example is the Wythenshawe Care Farm situated in South Manchester, serving one of the most deprived areas in the country. Our second example, which seeks to benefit a population over a wider area, is almost at the opposite end of the spectrum: Botton Social Farm is a rural co-housing scheme with care farming at the heart of its activity.
Wythenshawe Care Farm

Established for over 30 years in the heart of Wythenshawe Park, Wythenshawe Care Farm is a working farm, with Herefordshire Cattle, pigs, horses, sheep/lambs and other animals. The farm operates as a social enterprise and works closely with the local authority, housing group and, more recently, Real Food Wythenshawe. The latter is a Big Lottery funded project started in 2013; it aims to enable urban agriculture in Wythenshawe through the initial £1million funding and further grants achieved in its years of operation.

The farm has suffered recently due to a lack of funding, predominantly due to local authority cuts and a lack of apprenticeships and traineeships coming through the business. This changed with an intervention from Real Food Wythenshawe that helped the social enterprise consider new opportunities, such as building an on-site farm shop and other facilities. The farm is also working more closely with charities and schools to enable better use of the space. These activities have resulted in a resurgence of the care farm. More activity and more funds being generated has allowed the construction of a larger shop on the farm and the recruitment of more staff, for example someone to coordinate the shop’s activities.

Botton Care Farm

Botton Social Farm is almost at the opposite end of the spectrum from Wythenshawe Care Farm: rural, larger scale, and operating in a somewhat wealthy area. The farm is part of a larger co-housing community, in which the population all play an active role in running the village; the space feels large and occupies a valley within the North York Moors National Park. Botton is part of a larger network of co-housing projects, under the Camphill Village Trust organisation, which helps to support activities and run the wider project.

The main focus of the care farm, or ‘Social Farm’ (as it presents itself), is to cater for adults with special needs or disabilities. The farm acts as an escape, and lodgers tend to stay on-site to gain the most from the experience. The scheme is seen as an exemplar by Care Farming UK due to its structured programme and pioneering practices. Its importance is shown through its prominence in this network – it hosts the national conference, for example - and its presence in national media.

Figure 3 - Wythenshawe Farm

Figure 4 - Botton Farm (right)
2.5 Chapter Summary

An urban care farm in Salford could provide an opportunity for organisations to work collaboratively to co-produce an approach that promotes community and individual resilience. Building on the asset-based approach, situating a care farm in Salford would be appropriate for social prescribers such as GP’s, social services, and the voluntary and community sector to use in addition to other providers. Our two case studies provide evidence of the range of quite different settings, scales and approaches that can constitute care farming.
3. Stakeholder Engagement

3.1 Community workshops

Introduction
Initial contacts with a range of community services and voluntary sector organisations were made through the Community Assets Work stream of the Salford Together integrated care programme. This work stream is facilitated by Inspiring Communities Together Mapping Work (ICT), stream. The ICT is an independent multipurpose community anchor organisation that works to support the community by providing ‘holistic solutions to local problems and challenges’. As such ICT was an ideal organisation to engage with to ensure that local community groups and residents were involved in the Urban Care Farm feasibility work. In the process of determining the feasibility of an urban care farm, the engagement events revealed a range of nature-based activities in Salford that currently provide nature based activities for local residents.

Three workshops were held across three different sites across the city. The first event was held on 8th February 2017 at St Sebastian’s community centre. This introduced both the research team and the idea of a care farm to seventeen attendees, who were then invited to work in small groups to discuss the potential benefits and challenges relating to a care farm in Salford. A favourable initial response led to nineteen community representatives attending a second workshop at the START centre with guest speaker Robin Asquith from Botton Village Care Farm. The final engagement event was held at the University of Salford on 19th June, with 14 stakeholders and guest speaker Jon Ross, Director of ‘Sow the City’.

Workshop 1: Introduction and Initial Discussion
The first workshop included a short presentation which introduced the key partners to the project, and provided a brief background to and outline of the care farm model. Small group discussion was used to gage the level of stakeholder interest in the model, explore potential partnerships and collaborations, and decide on next steps. The benefits and the challenges of implementing a care farm in Salford were discussed in small groups, the benefits are summarised by key themes in Table 1, and challenges in Table 2.

The majority of participants found the care farm concept interesting and potentially a good opportunity to promote empowerment and community wellbeing. However, participants had some reservations about the title ‘care farm’. Other titles suggested included ‘social farm’ and ‘green space’. After an initial discussion around what a care farm might look like in Salford, there was a
general consensus that it should serve to support and link existing activities. Participants suggested a hub and spoke model to support this.

Participants advised that local communities could shape activities, depending on their needs and the space available. Some potential activities suggested were beekeeping, fish farming, both food and flower growing, the raising of animals, and the planting of orchards. It was agreed that there was a potential for research to take place across any and all sites in the model to ensure robust evaluation.

There was a clear sense about the populations who would benefit most from the care farm – older people, people with learning disabilities or mental health issues, people with dementia, carers, veterans, the long-term unemployed – as well as the potential for interest from the broader community and students, with the potential to strengthen connections within and between groups. An initial list of potential stakeholders included local councillors and MPs, community members and groups, housing associations, educational institutions and youth organisations from nursery age through college and university, health professionals from the CCG to hospitals to local GPs, food banks, other local growers and farmers.

Workshop 2: Development of the model, and a presentation from Botton Social Farm

To contextualise the key components, advantages and challenges of care farms, Mr Robin Asquith, Farm Manager from Botton Village Social Farm, was invited as guest speaker. Robin provided an overview of his experience starting and managing a care farm, the services provided at Botton Village, some aspects of its business model, and some of the challenges encountered. Always run as a social enterprise, Botton has increasingly steered towards the therapeutic use of farming practices. Robin shared his views on what could constitute a care farm, stating that such sites could be developed on a large or small scale, and would not necessarily need to feature animals. Significantly, the key advantages to any care farm approach was the ability to ensure multi-functional use of the natural environment and to be both as accessible and person-centric as possible.

A number of key questions, he continued, need to be discussed when developing a care farm:

- What is the offer?
- Who are the target groups?
- What is the size of the site – how does that define what you provide?
- What are your end goals?
- How will it become sustainable?

There was a consensus that the development of a Salford social care farm should be relevant to the people in Salford and ensure that its speciality or areas of expertise were based on community assets. Anecdotal evidence supports this, suggesting that nature-based interventions should encourage community involvement thus enabling communities and individuals to participate in developing similar nature based initiatives.

Discussions about the farm as a social enterprise suggested that this would ensure that the care farm was sustainable in the long term. In the context of Botton Farm, it was noted that individuals that attended the farm used their personalised budgets to pay for their time at the farm. The average cost per day per person at Botton Village was £50, generally paid by charities or through individual benefit programmes. The farm has also sought a niche market position, selling organic foodstuffs to high-end restaurants at a premium price. Further examples of the ways different groups across Europe have created financially-sustainable initiatives were also discussed. In one area of Italy, for example, various farms sell co-operatively, pooling their outputs. An additional income-generating stream could be generated through leasing out parts of the site for others to run their businesses, such as cheese making, weaving, or bee keeping.

A potential care farm model emerged based on the feedback from the participants. The model attempts to illustrate current nature based activity that occurs within Salford and, using an inclusive approach, builds on existing provision. The care farm would act as a ‘hub’ into which local schools, health and social services, local community groups and the voluntary sector could feed into. The two-way relationship could result in a range of partners within a ‘green & blue network’ that includes nature based activities which could be used to support social prescribing. This aligns with the UoS ICZ strategy and supports the person-centred, community based approaches within Salford.

An emerging model for the care farm was then presented for discussion and feedback, shown in Figure 4.

Workshop 3: Social Prescribing and a presentation from Sow the City

The third and final event with community stakeholders expanded on previous discussions to explore social prescribing in more detail along with potential links to the Greater Manchester Population Plan and Salford’s Locality Plan. Both policies focus on person-centred, co-designed and co-produced approaches to health, and both involve social prescribing. These plans therefore dovetail with the idea of linking social prescribing in Salford through the creation of a hub at the centre of a network of existing activities.

Guest speaker Jon Ross the Director from Sow in the City (www.sowthecity.org) presented an overview of their work at the final event to illustrate how nature-based activities could develop and became part of a social prescribing framework. Sow the City is a social enterprise in Manchester established in 2009. It now
### Direct Health and Community Benefits
- Benefit of physical activity on physical and mental health
- Opportunities for green therapy -- animal therapy etc
- More green space
- Reclaiming of derelict land
- Growing fresh food for households and foodbanks
- Safer spaces

### Connection to People
- New friendship networks
- Building cross-generational networks
- Incorporating into local, regional and national farm and food networks
- Reduced social isolation and loneliness

### Connection to Place
- Increased sense of community and cohesion
- New connection to lived environment
- Regeneration of local areas

### Connection to Opportunity
- Skills learning and course
- Volunteer opportunities and return-to-work experience
- Accredited qualifications
- Income generation

### Sustainability
- Costs
- Ownership, management and staffing
- Ability to generate income

### Accessibility
- Transport and location
- Openness / Welcome feel to community
- Accessible to people with disabilities

### Engagement
- Broad community understanding of project and engagement
- Able to receive NHS referrals
- Balances generational needs
- Links and strengthens provision that currently exists

### Day to Day Issues
- Security
- Waste
- Health and Safety
- Noise

---

**Table 1 - Identified benefits of a Care Farm, Workshop 1**

**Table 2 - Initial Exploration of Challenges involved in implementing a Care Farm: Workshop 1**
supports over 60 community and school food growing projects involving thousands of people through course participation and volunteering. The experience of mapping the city was discussed as well as the desire to see a variety of such projects across Manchester. While Sow the City currently receives funding from the NHS through Clinical Commissioning Groups (CCGs) that recognise the value of social prescribing, it is clear that more research is needed to evidence the health impacts of green care in ways that CCGs understand. The mapping of potential sites for social prescription is also needed so that local GPs know what possibilities exist for patients in their local area.

This led into the workshop activity to begin mapping existing green care initiatives in Salford, discussed in section 3.3.

### 3.2 Summary of Workshop Findings

#### Introduction

Over the duration of the three workshops, enthusiasm grew regarding the creation of a green space that could serve as both a centre of learning and research as well as be a centre for a larger blue and green network in Salford. Rather than working under the label of a ‘care farm’, a more inclusive term was desired and the actual terminology remains to be finalised.

Envisioned as a kind of ‘hub and spoke’ model, the group reached a consensus that a farm as a central hub could tie everything together while meaningfully engaging local communities with spoke facilities in local areas. The group also suggested that this new project should link together and support existing provision rather than entering into competition with it, serving to empower existing green care providers and hone in and build on the various expertise that already exists in Salford. A hub would also make it easier to link with green care and care farm providers across Greater Manchester and the country. Becoming part of the UK’s growing social prescribing and green networks will both help provide for local projects’ sustainability and resilience into the future, as well as providing services that are very much needed in the Salford and Greater Manchester area.

There is clear direction that this project should aspire to full financial sustainability through a social enterprise model. The workshop identified a range of potential ideas that could be developed, serving as a foundation towards the co-production of a meaningful space.

The rest of this section discusses the specific themes arising from the workshops. It considers the following outcomes in turn, each on building on the previous:

- Challenges in implementing care farming, and their potential solutions (Section 3.2.2)
- Strengths, weaknesses, opportunities and threats relating to care farms (Section 3.2.3)
- Mapping existing nature-based activities in Salford (Section 3.2.4)
- Developing a potential network for nature-based activities in Salford from these activities (Section 3.2.5)
- The possibility of such a network forming the basis for a Natural Health Service for Salford (Section 3.2.6)
Summary of Challenges and Potential Solutions
The chart below illustrates the richness of discussion around challenges and possible solutions across the course of the workshops to help support discussion going forward and ensure that stakeholder views are captured.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Questions</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>How and where we fit</td>
<td>What already exists? How do we link them, and make sure we are not competing with existing provision?</td>
<td>Salford mapping exercise</td>
</tr>
<tr>
<td></td>
<td>Where are potential spaces and sites?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Site visits, learning from existing models</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What specialisms and skills do we have to draw on? How do we get a good mix?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What are other urban farm models we can visit, learn from, network with?</td>
<td>Best practices and model research</td>
</tr>
<tr>
<td></td>
<td>What are existing business models we can learn from?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>What is our provision for community members? How might social prescribing and non-medical prescribing work? Do we have animals, bring in pets for therapy? What is our blue space provision? Do we provide services or further referrals? Trainings (hard landscaping, engineering)</td>
<td>Further discussion based on site/partners</td>
</tr>
<tr>
<td>Governance</td>
<td>What is our provision for research?</td>
<td>Work with relevant programmes/schools, recruit post-graduate dissertation and PhD work</td>
</tr>
<tr>
<td></td>
<td>Need clear form of governance and some level of central coordination</td>
<td>Develop Hub and spoke model</td>
</tr>
<tr>
<td></td>
<td>Is this a physical centre, or just a network?</td>
<td>- need at least one position with a team in support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- need someone who can deal with BOTH the farm and the people, though in Asquith’s example he fills the first role, his wife the second</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Need a bespoke set of skills through staff or volunteers: health care, social work, horticulture, husbandry, forestry</td>
</tr>
</tbody>
</table>

Table 3 - Challenges and Potential Solutions
SWOT Analysis
Participants were asked to consider what they perceived to be the S(trengths), W(eknesses), O(pportunities) and T(reats) of an urban care farm in Salford. The responses were mapped and are presented below.

The strengths and opportunities that a care farm could offer were significant and signalled a general acceptance of the potential to support an assets-based approach. However, key weaknesses included lack of knowledge about the practicalities such as location, resources, sustainability and expertise. In particular, the current provision of nature-based activities within Salford was highlighted by many of the participants. This revealed the extent of potential expertise across Salford that could be involved in the development of an urban care farm. The range of nature-based activities included allotments, arts-based approaches, community gardens, work with schools and promotion of sustainable food resources. Collectively, this represented a network of activities that are currently fragmented. This showed the clear need for a mapping of the nature based activities across Salford, to which we now turn.

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vast amounts of expertise in Salford</td>
<td>No current idea of what/who/where SNHS</td>
</tr>
<tr>
<td>Potential to be a hub and spoke model</td>
<td>No current idea of what the costings would be</td>
</tr>
<tr>
<td>UoS involvement and research opportunities for outcomes for the REF</td>
<td>UoS has no real experience of care farming</td>
</tr>
<tr>
<td>Social enterprise with lots of ownership</td>
<td></td>
</tr>
<tr>
<td>Able to monitor all the outcomes as this is a UoS expertise</td>
<td></td>
</tr>
<tr>
<td>UoS able to create a new initiative to umbrella other projects</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Opportunities</th>
<th>Threats/challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social prescribing by medical practitioners</td>
<td>Location and transport issues</td>
</tr>
<tr>
<td>Create an experimental green space</td>
<td>Has to be a longterm project of 5 years +</td>
</tr>
<tr>
<td>Develop a Salford Green Co-operative</td>
<td>Security of the site from vandals</td>
</tr>
<tr>
<td>Placements for learning, training and data collection</td>
<td>Linking with current initiatives</td>
</tr>
<tr>
<td>Plenty of potential users</td>
<td>Costs</td>
</tr>
<tr>
<td>Link up with existing services, groups</td>
<td>Waste (unused products)</td>
</tr>
<tr>
<td>Accredited qualifications</td>
<td>Employment</td>
</tr>
<tr>
<td>Establish a working cost point in Salford for users</td>
<td></td>
</tr>
</tbody>
</table>

Table 4 - Thematic analysis of challenges and opportunities
Mapping of Nature-Based Activity in Salford

An unintended but significant outcome of the engagement work was the identification of current nature-based activities in Salford. These included local social enterprises that provided a range of nature-based activities that in some way promoted health (figure 6), whether or not part of their core service and whether or not they would refer to themselves as such. Some of the activities promoted access to green space, and others provided more structured nature-based activities that could be used to promote health. There were fewer examples of places that specifically used ‘green care’ approaches (a defined structured outcome for a defined population with a need) as defined by Bragg et al (2016).

The engagement event enabled participants to describe the extent to which these types of practices had supported people in local communities from a range of age groups. Typically, the nature-based activity used various methods of therapeutic horticulture or social horticulture to support local people from schools, community groups and those with mental health problems, or elderly and socially excluded (people with a defined need).

The map indicates that there is a range of relevant activities. However, the exercise also suggested that organisations that do provide green care or nature-based activities could benefit from more joined-up working and are not clearly sign-posted. This latter issue could present challenges to professionals who may want to refer people to the range of nature-based activities.

The map is in embryonic stages and as yet does not show the purpose and function of the nature-based activities identified. There will be further work to develop the mapping in collaboration with the local community, social enterprise groups, public health practitioners and other relevant parties.

The map has been a useful exercise, and we are not aware of previous attempts to develop such a network that could support the development of nature-based activities in a way that is accessible for all Salford residents. This can be considered an initial snapshot of the scene and once the mapping is complete, we will have a better understanding of the extent of nature-based activities provides in Salford and how many of these provide ‘green care’.

Figure 5 - A on-line map showing different types of nature based activity across Salford – mapped by participants in the third and final workshop (Google Maps, 2017)
Developing a Network of Nature-based Activities

Our map provides the basis for identifying and building a network of nature-based activities in Salford, and this could provide a structure for facilitators of nature-based activities to work together in enabling community groups, local residents and social prescribers to identify and access the support needed. It was agreed that a ‘green and blue network’ could also be a useful social prescription tool and guide for local GPs, advanced nurse practitioners and other social prescribers.

Such network-based and multi-disciplinary approaches to the provision of community care are becoming a more common feature of health and social care provision within the UK. Typically, a range of different organisations develop partnerships or consortiums within a social enterprise framework to establish a cohesive approach that can help tackle a range of health, social and well-being challenges. The 2016 ‘Review of Nature-Based Interventions for Mental Health Care’ (NECR204) described these nature-based interventions as examples of ‘Multispecialty Community Providers’ (MCP’s) within the NHS ‘Five Year Forward View’ (NHS England 2014). As such, MCP’s are acknowledged as using ‘hub and spoke’ models that provide health commissioners with a ‘single point’ of access to a range of nature based providers.

In a Greater Manchester context, examples where similar maps have been used to promote services or guide referrals include ‘Sow the City’, which together with Big Dig Manchester supports a live online map of existing community food growing garden provision within Manchester (http://www.bigdig.org.uk/manchester/). There is scope to align the two networks to ensure a Greater Manchester coverage that can support social prescribing and integration of health and social care. This work dovetails with the current GM Population Plan (2017-2020) and the integration movement across Salford (Salford Together) and the GM Population plan.

Our map currently provides some detail about a range of nature-based interventions and is a first step towards understanding and mapping providers that use a range of nature-based interventions. This resource should be further developed to include more detail about the services provided and also used as an evidence-based guide for local social prescribers, and/or as a self-referral route for local residents.

Once complete, the mapping and network formation could be used as a resource to complement social prescribing and asset-based (or equivalent) approaches in Salford. This would contribute to fulfilling the aims of the proposed GM Population Plan’s (2017) second Objective to ‘map existing provision “To build a Greater Manchester framework for person and community-centred Approaches”, part of which seeks to map and capture existing practice on asset-based approaches across Greater Manchester (GM 2017). Importantly, this approach would also be aligned with Salford Locality Plan and the Salford Greenspace strategy.

Similar networks have demonstrated success in improving health and wellbeing outcomes. For example, Tower Green Care Partnership works in partnership with local community organisations to enable residents to access nature based therapeutic interventions and have been funded by a partnership of organisations led by Women’s Environmental Network (WEN). The network provides opportunities to share news, events and work together to support local community needs.

As illustrated in Figure 7, then, the care farm provides an opportunity for the UoS to engage with other providers of nature-based activities that could be integrated with the care farm where a range of different nature-based interventions could be researched. Equally, working in partnership with other nature-based providers will help to sustain the development of a green and blue network that could be used as a single point of contact for social prescribers. The network can provide a platform for providers to ensure that their services or products are visible to others - and as a result, increase the visibility of the individual services via the network.

Developing a Natural Health Service for Salford

Our proposed green and blue network provides the basis for increasing the visibility of green care and creating a single point of contact for social prescribers. Further developing it into the Salford Natural Health Service (SNHS) could build on and formalise this potential to integrate asset-based community providers that use nature-based interventions with healthcare providers to promote health and wellbeing.

The focus of the Natural Health Service model on supporting community and individual wellbeing is distinct from the traditional medical model as it is person-centred and therefore aligns with Salford Realising the Value and GM Population plan. Once formed, the advantage of an SNHS would lie in its ability to provide a single point of contact for social prescribers, and our green and blue network would be a significant step towards this.
The creation of Salford Natural Health Service (SNHS) would provide an opportunity to develop a co-produced asset based approach to the provision of integrated nature based activities across Salford to promote health and wellbeing. This dovetails with the Salford Together strategy to ‘Start Well, Live Well, Age Well’ in its potential to offer innovative, evidence-based alternative approaches to care provision in the community, and could help to tackle some of the health inequalities grounded in environmental and societal factors outlined in the Marmot Review (2010).

It follows that the green and blue network, as part of a Salford Natural Health Service, would represent a strong social movement that embraces existing community- & person-centred approaches. In developing such a network of community groups and organisations, there is the potential for the UoS to work in partnership to co-design and co-deliver a peer support network for local residents. This aligns with the work undertaken as part of the ‘Realising the Value’ work that has moved towards supporting people to have the knowledge, skills and confidence to play an active role in managing their own health and to work with communities and their assets, and the continued developments through ICT & Unlimited Potential. The green care network would therefore represent an asset-based approach building on strengths.

It is proposed, therefore that the mapping undertaken by this research team in conjunction with ICT should be further developed to ensure its accuracy, sustainability and utility for Salford residents, nature based and green care providers and social prescribers. In doing so, there is a potential to develop a ‘Natural Health Service’ similar to existing models in Mersey and Cheshire as discussed in section 2.3.2.

Figure 6 - Model showing the operation of the proposed Salford Natural Health Service
4. Future Directions

4.1 Developing the Care Farm as a green space for learning and study

This project provided an opportunity for academics across the University to engage with local community groups to understand existing community based assets and explore the feasibility of an urban care farm. Results suggest that this would be a welcome opportunity for Salford. The main impetus to develop the care farm would be the co-production of a model that could provide nature based health promotion, and if required, green care activities. Combined, these could provide an important opportunity for the population of Salford to access a broad array of health interventions through some form of the care farm model, whose title as well as the activities encompassed would be tailored both to build on local expertise and to serve local needs.

The feedback from the participants suggests that this should be aligned to a person-centred approach to reflect the current work of the community. It was considered therefore, that the next steps to developing this opportunity would be collaborative work to develop a green space serving as a hub for experiment and study, and based on principles of a care farm to provide a range of nature-based activities that could support a range of people in the community. This broader approach would build on the strengths of the university as a teaching and research institution through collaboration with experts in Salford to deliver a truly exceptional partnership that could support the people of Salford.

Such a green space could provide opportunities for the UoS to use its expertise working in partnership with local organisations to research and develop a range of nature based activities within a care/social farm context. The green space would also act as a potential hub to draw together the nature-based activities across Salford through the Natural Health Service as part of the social prescribing movement and help facilitate student placements within this context and across the green and blue network, enhancing the student experience. Additional potential potential exists for the care farm to be developed as a social enterprise, supported by local and national partners, with involvement from local service provision.

The green and blue network map (Section 3.2.4) currently provides some detail about a range of nature based interventions and is a first step towards understanding and mapping providers that use a range of nature based interventions.

The next steps are to apply for further funding to investigate further options for the site(s), as well as to help resource the start-up of the new project and identify and establish strategic partnerships from across a variety of sectors to help make it a reality.
Figure 7 - The Care Farm and Study Hub as part of a mapped network of sites of nature-based activities, leading to a social prescribing model as part of a Natural Health Service.
Care Farm Location
There is scope to develop the care farm in a range of locations within Salford. One option is to align with existing work to support the development of the Irwell Vale basin as an ‘Oasis’ as part of a National Heritage bid. This site is located within the Castle Irwell Campus facility and was historically Salford’s race-course. The site was later used for student accommodation, however the student housing has since been demolished and the site is not currently being used (see figure 6).

Teaching and learning
There is an array of activities within the practice of care farming which would enable teaching and learning within the space. Schools from across the university could play a part in this area, for example:

- Environment and Life Science – geography, wildlife, environment and science students interested in greening the city, soil testing and urban wildlife.
- Nursing Midwifery Social Work and Social Science – nursing student placements, social policy and sociology students could also benefit.
- Health Sciences – public health students and those interested in alternative treatment methods.
- School of the Built Environment – construction students and architects can play a role in establishing and maintaining the space.
- Business – students could play a role in establishing a social enterprise and devising a strategy to ensure economic sustainability for the care farm.
- School of Arts and Media – students interested in community art or documentary projects.
- School of Computing, Science and Engineering – space for the development and testing of new green technologies or social networking/gardening apps.

There are many more opportunities not listed here, with specialists from each school able to provide more detailed information on how it can be utilised. Effectively, this could be an excellent teaching and learning space which would allow students to undertake placements and use the resources in a wide range of ways.

Figure 8 - Irwell Vale Flood Basin
Research
The creation of a care farm and study hub offers ample research opportunities for academics across the university; almost parallel to the student opportunities in the list above. Broadly speaking these are:

- Joint funding applications to evaluate nature-based activities, with particular scope to do pioneering work around developing and evaluating the concept of the Natural Health Service and the impact of interventions around ‘blue spaces’ in addition to green spaces for health and wellbeing.
- Research on the impact of social prescribing
- Opportunities for PhD students

From research council funds to charitable and other resources, perhaps the most obvious research grant opportunity is to assess the impact of the space on the community during its development. The experimental green space provides a unique opportunity to pull together academics across multiple disciplines and enable further collaboration across the institution.

Developing the social enterprise partnership
It is key to ensure that the care farm is not solely a University of Salford effort, but rather is a collaborative project with key actors from across Salford. In this sense, the care farm acts as an incubator for industrial collaboration with organisations ranging from the RHS to the local authority, NGOs, charities and beyond. A social enterprise model will form this partnership and ensure a collaborative approach to the creation and operation of a care farm in Salford. Through working with experts in the establishment of a social enterprise model, we will ensure that the path adopted is financially-sustainable and has the University’s Industry Collaboration Zone (ICZ) agenda at its heart. Access to the greenspace network map will be shared with all local social prescribers and will be available online. We will seek to promote it through Salford City Council, NHS, CCG and other relevant webpages.

4.2 Taking it Forward: Recommendations
This project has resulted in a potential to develop the following:

1. an urban experimental greenspace that integrates and builds on community assets
2. a Green Network through continued mapping
3. a Salford Natural Health Service as a single point of contact for the social prescribing movement in Salford.

However, our engagements with individuals and groups in the local community identified that nature-based activities are fragmented and that there is a need to consolidate the range of groups and activities available in Salford to support social prescribing. The creation of a green network as part of a Salford Natural Health Service, therefore, seems a logical approach that is both responsive to community needs and meaningful for individuals and organisations.

This work will ensure the continuation of a co-produced development of the care farm. To support the ongoing work, a series of aims and objectives have been developed to enable the work to continue and facilitate collaborative bid development. These include:

- Work with partners to develop a business model for an experimental green space:
- Align with Care Farm UK and Federation of City Farms to guide and support the development of the experimental green space.
- Seek out support from relevant organisations such as Salford Primary Care Together, Salford CVS and Salford Strategic Housing Partnership, local Council, CCG’s and Public Health Salford to facilitate support for the experimental green space.
- Identify site location for the green space, potentially as part of the Irwell Vale Flood Basin development.
- Work with local partners to establish Salford Natural Health Service development as a single point for commissioning and support of nature based interventions for social prescribing
- Engage with Local & National Social Prescribing Networks to help garner support and establish a sustainable framework.
- Continue to work with ICT, local commissioners and VSO’s to develop bid opportunities to support sustainability.
- Develop a sustainable Green Network using the online map of nature based activities as a single point of contact that identifies existing nature-based provision.
- Work in partnership with Green Network providers to develop a bid that will support the management and sustainability of the greenspace network map

A platform for the greenspace network map will be provided by the University of Salford SHUSU Research Centre
5. References


Front cover, rear cover, page 25 photos: Ciara Leeming
Appendix 1: Q & A

The following summarises a question and answer session with Robin Asquith of Botton Social Farm that took place in Workshop 2. Please note that these are not direct quotations.

What opportunities are there for placements?

Botton Village gets placements from Teesside University – Nurses come on a 2-week placement and OTs have done 8-week placements. Hull University sending students on the MBA for the business side.

The drug and alcohol addiction element, how and what would you do differently?

Botton Farm chose a focus on working with adults with disability, has found it important to stay focused where your strengths are so has not really expanded their services.

How did you set-up the various income streams?

Choose your niche, bring in the right people - Botton decided to focus on quality over quantity and sell to the high-end restaurants.

Sell the story (create a brand), try to specialise in unique and heirloom veg impossible to get elsewhere

Sell the social and organic aspect.

Is there a difference in setting-up in an urban area compared to a rural one?

Urban people can’t understand the ethos of farming per se – you can look to good example of city farm across the UK e.g. Rising Sun in Newcastle and one in Rochdale.

With regards to small animals, if there are no animals would we lose some of the care element?

No – plants need care too, so the horticultural element is equally as nurturing. Small animals could be introduced at a later date if appropriate.
Appendix 2: Stakeholders involved

The research team would like to thank the following Salford-based stakeholders for their involvement in the project. They attended one or more of the workshops and contributed to ongoing discussions.

Age UK: Dave Haynes
City West Housing Trust: Bec West
Incredible Edible Salford: Hoon Teo
Incredible Education: Ian Bocock
Inspiring Communities Together: Bernadette Elder, Antonia Dunn, Andrea Whelan,
Moss Lane Farm: Andy Green
Salford Allotment Federation: Don Booth, Geoff Hamilton
Salford City Council: Helen Chambers, Annie Surtees
Salford Council Neighbourhood Development Officer: Fay Flatt
Start: Bernadette Conlon, Michelle Dennett
University of Salford: Michelle Howarth (lead), Kathy August; Andrea Gibbons, Mike Hardman, Candace James; Jackie Leigh; Graeme Sheriff
Unlimited Potential: Chris Dabbs
Members from the Inspiring Communities Together Network.