



# HEREFORD COMMUNITY FARM IMPACT EVALUATION



Final version, November 2022

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## Foreword

When we founded Hereford Community Farm, we had no idea how it would develop. We had personal and professional experience of seeing the benefits of being in nature and around animals - the effects of which can be transformative - and we shared a vision of creating a space that wasn't about ticking boxes but would be welcoming to everyone and provide them with the opportunities and support to achieve their potential.

We're sometimes asked about what it is that has made the HCF model successful and in conclusion it isn't necessarily about having the best set up or the latest equipment (because we don't!)- but it is the people and the characters and the ethos, everybody helping each other and the sense of community, it really is a team effort, and we are so grateful for that.

Now looking forwards, it is our goal to ensure that Hereford Community Farm is safeguarded to continue what it does best and be here for those people who will be a part of its future.

## Acknowledgements

We would like to thank everyone who has participated in producing the report, given feedback, told their story and contributed their time, and to Data Orchard for bringing it all together. We hope it will give you an insight into Hereford Community Farm.

We would also like to thank the many people who have attended over the years, their families and care givers, our fantastic team of staff and volunteers and the many professionals, funders, organisations, and supporters who have helped us and believed in us. You have all enabled us to bring a vision to reality - Thank You. If you would like to visit HCF or find out more please get in touch.

Julie Milsom and John Trimble, Directors

## Summary

Hereford Community Farm was established to service unmet need for day activities in an outdoor and natural setting, providing therapeutic support for people who need it. It has had to move site twice since its inception as it has grown and developed, and new facilities have had to be built every time. To ensure its long-term future, it is now working towards a proposal for a permanent home that would enable it to continue delivery services for the community.

The information presented in this report provides evidence of the range and growing need for support in Herefordshire. Hereford Community Farm has demonstrated sustained trends in attendance and growing capacity, in response to the needs in the local community, and connected to a wider network of 'green care' provision. Information about the range of need and circumstances of attendees is also provided. The analysis and research show clear evidence of the positive impact Hereford Community Farm's provision is having on the individuals who attend, using a range of feedback and case studies. Common themes are that, regardless of the particular barriers individuals may face, they are supported to learn new skills, socialise, improve their wellbeing, become more independent, have fun and have a sense of purpose. Overall, Hereford Community Farm is achieving positive impact where 'people feel valued and self-manage their health and wellbeing'.



# 1. Introduction

Hereford Community Farm CIC (HCF) offers inclusive therapeutic activities, training and skills to a range of people who face disadvantage from disability, ill health, social need or any other condition or situation which has an impact on their daily life. The focus is on facilitating people to take part in the activities of their choice regardless of ability and where every achievement is celebrated. A range of accessible and inclusive land-based activities are provided, such as therapeutic horticulture, working with large and small animals, equine assisted learning, cookery and life skills, arts and crafts, eco carpentry (recycling and up cycling scrap materials into useful items), green woodworking and traditional crafts, orchard skills, land management and environmental activities.

The HCF model as it is today evolved from an original concept by the Founding Directors in 2004 to address unmet need and in response to the publication of the Government White Paper 'Valuing People' in 2001 which stated that:

*'Each individual should have the support and opportunity to be the person he or she wants to be' and 'To enable people with learning disabilities to lead full and purposeful lives in their communities and to develop a range of friendships, activities and relationships.'*

This remains a core guiding principle alongside strong social, ethical, and environmental objectives written into the organisation's constitution. Since its inception HCF has remained 'community led'. This ensures provision remains relevant, meaningful, and sustainable with an ethos of self-reliance, forming strong local networks and with an holistic approach to all that it does. A committed team of staff and volunteers with a diverse blend of professional backgrounds and personal experience facilitate service provision and ensure the smooth running of the organisation.

As an asset locked social business (Community Interest Company Limited by Guarantee) the organisation generates its own income from the service provided with any cash surplus reinvested for community benefit.

Data Orchard CIC was commissioned to support HCF to gather evidence of the need it addresses and to evaluate the impact it makes.

Data Orchard combines specialist skills in research, statistics, and data, with a passion for making the world a better place socially, economically, and environmentally. Its mission is to enable organisations to use data for better decisions and greater impact.

## 2. Approach

Data Orchard's research focused on four key areas: evidence of need; evidence of impact; prevention and savings; and impact evaluation framework.

### 2.1 Evidence of the need

Desk research and analysis of evidence on the extent and different types of need for support, based on characteristics of people who attend HCF.

### 2.2 Evidence of impact

A review and analysis of evidence of impact on attendees already collected by HCF. This included reports they had previously produced, activity data and feedback forms collected from attendees and/or their carers over the summer of 2021. Qualitative research using interviews of attendees and their support workers to capture more in-depth real-life stories of HCFs impact on people's lives, was done in 2022.

### 2.3 Prevention and savings

A review of the evidence for preventative support and potential cost savings this may yield for government.

### 2.4 Impact evaluation framework

Work developing a theory of change and future outcome measures are presented here as part of looking to the future for HCF.



### 3 Evidence of need in the local population

The types of people who are currently supported at HCF are summarised in the table below.

People who are supported at HCF	Characteristics of people who attend
People in need of support to be active in society, and to achieve their personal goals	Physical disability (multiple and profound, visual, hearing, mobility, life limiting illnesses) Mental ill health (inc. dementia, anxiety) Learning disability (huge range) Autism spectrum disorder People with adverse childhood experiences People who have experienced abuse

A summary of evidence on the extent and types of need of those who would benefit from support at HCF, is presented in the following sections. However, please note anyone who may benefit from nature related activity to support wellbeing is catered for and welcomed.

#### 3.1 Overall health

The 2011 Census showed that in Herefordshire around 34,000 people (19% of the population) said that they had some form of limiting long-term health problem or disability - similar to the national rate of 18%. The areas with highest reported levels were in areas in Bromyard, North Hereford, and Leominster. About half of adults with a reported disability/long-term health problem had a progressive or chronic illness, and/or physical/mobility difficulties. Two-thirds of those who said they had a long-standing illness or disability said it affected their daily activities to some extent with 12% being severely affected (such as needing help to bathe or dress). (2018 Quality of life survey, 2011 Health and Well-being survey).

#### 3.2 Mental health

One in four adults in the UK will experience a mental health problem every year. Mental ill-health is the largest cause of disability in the UK. 19,300 people are estimated to have a common mental health problem in Herefordshire (e.g.,

depression)<sup>1</sup>. During 2017/18 a total of 8,395 Herefordshire residents were known to be in contact with secondary mental health, learning disabilities and autism services. This represents 4.4% of the population, similar to the proportion for England as a whole (4.5%). 345 people in Herefordshire spent time in hospital as part of being in contact with these services, in line with national rates.<sup>2</sup>

Parental mental illness is one of the most common reasons for children needing social services involvement. Around 4,900 under 18-year-olds in Herefordshire are living with a parent with severe mental health issues. In 2015, over 2,100 children and young people aged 5 to 16 were estimated to have a clinically diagnosed mental health disorder in Herefordshire. This is 9% of this age-group which is similar to the national rate.

The Covid-19 pandemic is likely to have a lasting negative impact on mental wellbeing. Known risk factors for mental health, such as loneliness, relationship breakdown, or domestic violence have all increased and are expected to result in higher numbers of people experiencing mental health problems - with depression being the most common. Half of 700 children and young people who responded to a survey in Herefordshire in 2020 said their overall mental health and wellbeing had become worse since the start of the pandemic.<sup>1</sup>

### 3.3 Dementia

Dementia is an umbrella term for a progressive neurological disorder that affects how the brain functions. There are over 200 different types of dementia, with Alzheimer's disease being the most common, accounting for almost two-thirds of all dementia cases. Symptoms vary depending upon the part of the brain affected, and can include difficulties with memory, communication, decision making, planning, and orientation to place and time. All of these impact upon a person's ability to carry out activities of daily living. In the early stages, when dementia is mild, most people are able to carry out their usual activities either independently or with a low level of support. There are around 900,000 people in the UK living with dementia and the likelihood of developing it increases with age: 1 in 14 people aged over 65 which rises to 1 in 6 for people aged over 80. In Herefordshire there are an estimated 3,200 older people with dementia, just over half of which have mild dementia. The number

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<sup>1</sup> Director of public health report 2020: Impact of Covid-19

<sup>2</sup> *Understanding Herefordshire website, Herefordshire CCG Mental Health Needs Assessment, 2017*

of people in the county with dementia is predicted to rise to 4,100 by 2025 and 5,500 by 2035.<sup>3</sup>

### 3.4 Autism

The charity [Ambitious about Autism](#) has a helpful definition:

*"Autism affects the way a person communicates and how they experience the world around them. It is considered a spectrum condition. While autistic people share some similar characteristics, they are also all different from each other. The autism spectrum isn't linear from high to low but varies, just as one person might vary from another. Some autistic people are able to live relatively independent lives, but others may face additional challenges, including learning disabilities, which means their support needs are different."*

Autism is neither a learning disability nor a mental health problem, although mental health problems can be more common among people with autism, and it is estimated that one in three adults with a learning disability also have autism. Children with autism are more likely to experience bullying, be excluded from school and have lower levels of educational attainment compared to their peers. Fewer than one in four school leavers with autism stay in further or higher education. Just one in five autistic people are in full or part time employment, the lowest rate of employment of all disabled groups.<sup>4</sup>

Approximately one in 100 people in the UK population are autistic<sup>5</sup>, although this is likely to be an underestimate due to the lack of understanding of autism and early support. Recent research from the University of Cambridge using schools' data showed that 18% of children aged two to 21 in England is autistic.<sup>6</sup> Data from Herefordshire GP practices and schools' data suggest under-diagnoses<sup>7</sup>. Applying

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<sup>3</sup> National figures from [Alzheimer's Society](#). Herefordshire figures from the [Understanding Herefordshire website](#)

<sup>4</sup> [Office for National Statistics, Outcomes for Disabled People in the UK – 2020, February 2021](#)

<sup>5</sup> [NHS Estimating the prevalence of autism spectrum conditions in adults: extending the 2007 adult psychiatric morbidity survey \(published 2012\)](#)

<sup>6</sup> [Roman-Urrestarazu A, van Kessel R, Allison C, Matthews FE, Brayne C, Baron-Cohen S. \(2021\). Association of Race/Ethnicity and Social Disadvantage With Autism Prevalence in 7 Million School Children in England. JAMA Pediatr.](#)

<sup>7</sup> [Herefordshire's Joint Strategic Needs Assessment, 2018](#)

the 1% national rate to Herefordshire's population means a conservative estimate of the number of autistic people living in the county is approximately 1,928.

### 3.5 Learning difficulties and disabilities

'Learning disabilities' (LD) is a poorly defined term. Its meaning differs depending on the context (such as in education or medical settings) and interpretations also vary between different professionals. Overall, it can be considered an umbrella term that covers a range of neurological disorders in learning with varying degrees of severity that lead to varying degrees of impairment in social, intellectual, and practical skills. It is recognised that people with learning disabilities can also have specific health needs. Some can live independently without much support, but others may require 24-hour care and help with performing most daily living tasks.

900 adults are registered as having a learning disability at GP practices in Herefordshire, but modelled estimates suggest that the true number is closer to 3,600 people (2.3 % of the population). Herefordshire Council provides long-term social care support to around 600 adults.

The Covid-19 pandemic particularly affected people with learning disabilities with the death rate nearly 4 times higher nationally than people with no learning disability. This group were also more likely to feel even more isolated from society during the pandemic.

### 3.6 Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) is defined by the NHS as *'highly stressful, and potentially traumatic events or situations that occur during childhood and / or adolescence. They can be a single event or prolonged threats to and breaches of the young person's safety, security, trust or bodily integrity.'*

Adverse experiences could include maltreatment (abuse or neglect), violence or coercion, adjustment (migration, ending relationships), prejudice, household or family adversity (substance misuse, deprivation), inhuman treatment, adult responsibilities (young carer), bereavement and survivorship.

Experiencing ACEs can impact a child's development, their relationships, increase the risk of engaging in health-harming behaviours, and experiencing poorer mental and physical health as adults. Compared with people who have not had adverse childhood experiences, people with ACEs are more likely to:

- Be involved in violence
- Use illicit drugs, binge drink, smoke and have a poor diet
- Be incarcerated
- Have low levels of mental wellbeing and life satisfaction. 1 in 3 diagnosed mental health conditions in adulthood directly relate to ACES.

ACEs can also impact the ability to recognise and manage different emotions, the ability to manage behaviour in school settings and the capacity to make and keep healthy friendships and relationships.

About half of all adults in England have experienced at least one form of adversity in their childhood or adolescence<sup>8</sup>.

### 3.7 Children and young people at risk of exclusion from school

Looked after children, those with education and health care plans, and those with special educational needs and disability are all at risk of exclusion from school. In 2018, there were 300 'looked after' children in the county, continuing a five year upward trend. In state funded schools in Herefordshire 4,750 pupils had an identified Special Education Need and Disability which equated to just under one in five pupils. Almost 800 resident children and young people had Education and Health Care Plans (EHCP) in Herefordshire and the most common primary need is 'learning disabilities'. 40% of pupils with an EHCP have severe or profound and multiple learning disabilities and attend a special school.<sup>9</sup>

### 3.8 Access to services

Herefordshire is very sparsely populated and nearly two thirds of its 116 'lower super output areas' or local areas, are among the 25% most deprived in England in respect to geographical barriers to services - predominantly affecting rural areas. 53 of these lower super output areas are in the most deprived 10% in England. This creates challenges in providing services that are accessible to people with a range of needs.

### 3.9 Loneliness and social isolation

Loneliness is a subjective, negative feeling experienced where there is a discrepancy between the amount and quality of social contacts one has, and the amount and

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<sup>8</sup> Young Minds and NHS, 2014-2016

<sup>9</sup> *Children's Integrated Needs Assessment*, Herefordshire Council's Intelligence Unit, 2019

quality one would like to have. It is related to, but distinct from, social isolation which is an objective state where there is an absence of social contacts and social connectedness<sup>10</sup>. Emerging evidence indicates that loneliness is associated with poor health and well-being outcomes including hypertension, coronary heart disease, stroke, depression, and mortality. Research also suggests that loneliness can increase the risk of premature death by 30%<sup>11</sup>. The 2018 Herefordshire Quality of Life survey found that, 26% of adults felt lonely some of the time, and 8% felt lonely most or all of the time<sup>12</sup>. It also found that 6% of people were in contact with family, friends, or neighbours once a month or less i.e., socially isolated. The national rate of people who reported feeling lonely 'often' or 'always' in 2020 was 5%, similar to pre-lockdown figures. It is estimated that 12,800 people feel lonely most of the time in Herefordshire<sup>13</sup>. Nationally the proportion of disabled people who feel lonely 'often' or always is almost four times that of non-disabled people with the greatest disparity for young adults aged between 16 and 24<sup>14</sup>.

The effects of the Covid pandemic have amplified a situation where some of the most socially isolated people are unable to access the support they need, to help them to re-engage with their communities, and this is having a profound effect on their mental health and wellbeing. Statutory services are under intense pressure working on backlogs and increasing caseloads which has created a fragile situation where people are only just coping and at 'crisis point' before they can access the help they need.

### 3.10 Access to nature and link to well-being

There is a wealth of evidence that spending time in green space or nature benefits both mental and physical wellbeing<sup>15</sup>. In a recent quality of life survey of Herefordshire residents, 60% of respondents spent time outdoors daily and 87% at least once a week. This is much higher than a similar national benchmark in 2017/18

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<sup>10</sup> [Hidden Citizens: how can we identify the most lonely older adults?](#) Campaign to end loneliness, April 2015

<sup>11</sup> Loneliness and Social Isolation as Risk Factors for Mortality: A Meta-Analytic Review', J. Holt-Lunstad, T.B. Smith, M. Baker, T. Harris, D. Stephenson, Perspectives on Psychological Science, Vol. 10, No.2 (March 2015), 227-237

<sup>12</sup> Herefordshire Quality of life survey, 2018, Data Orchard CIC.

<sup>13</sup> Director of public health report, 2020: Impact of Covid 19

<sup>14</sup> [Disability well-being and loneliness, UK; 2019 and Measure of National Well-being dashboard](#); Office for National Statistics

<sup>15</sup> [Mind; Mental Health Foundation, 2021](#), How connecting with nature benefits our mental health.

where only 62% of people in England spent leisure time outdoors at least once a week (Natural England, Monitor of Engagement with the Natural Environment).

If a person has restricted mobility and lives in a residential setting, this can limit their access to outdoors and benefits that this brings to their wellbeing.

### 3.11 Conclusions on need for support

In summary, the extent of need within Herefordshire, for services that HCF provides based on the characteristics of people already attending and benefitting from their support, is as follows.

- 34,000 people with a long-term limiting illness or disability
- 19,300 with mental health problems such as depression. 8,400 in contact with secondary mental health, learning disabilities or autism services.
  - 3,200 estimated to have mild or severe dementia.
  - 3,600 estimated to have learning disabilities. 900 registered and 600 in social care.
  - 2,000 people estimated to be autistic.
- 12,800 adults estimated to feel lonely most of the time.
- 4,750 children with special education needs and/or disability.
- 4,900 children living with a parent with a severe mental health need.
- 2,100 children with a diagnosed mental health problem.
- 800 children have education health care plans. 300 are looked after/previously looked after.

HCF is well-placed to provide a variety of activities to meet these people's needs using a 'green care' approach: nature-based therapy specifically designed for individuals with a defined need. HCF is also sited centrally in the county, in Hereford.

Activities in natural settings which have been shown to have therapeutic properties are often collectively termed nature-based interventions. Furthermore, 'Green Care'<sup>16</sup> is defined as: "*nature-based therapy or treatment interventions - specifically*

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<sup>16</sup> As defined by Bragg, R., Atkins, G. 2016. *A Review of the nature-based intervention for mental health care*. Natural England Commissioned Reports, Number 2014

*designed, structured and facilitated for individuals with a defined need"*. Green Care includes Social and Therapeutic Horticulture, Animal Assisted Therapies, Social/Care Farming, environmental conservation therapy and green exercise therapy. These are targeted therapeutic or treatment interventions and are delivered by trained/qualified practitioners. The national Green Care Coalition was established in 2016 to promote the commissioning and use of Green Care Services, and to advance recognition of its use as an effective option in Health and Social Care.

The experienced staff team ensure activities are accessible, inclusive, and adapted to meet the needs of each individual. They ensure individuals can participate fully in activities of their choice regardless of ability and where every achievement is valued.

The HCF model encourages people to challenge themselves without fear of failure, supporting them to aspire to achieve beyond their own expectations of themselves and in turn being able to give that support to others. This enabling approach is maintained through engaging people in meaningful and enjoyable activity that empowers them to *'believe in the possibility of change and to become the change they wish to see'*.

The natural environment and the non-threatening appeal of animals are used to facilitate approaches that will engage people in activities to support mental and physical wellbeing, create opportunities for learning, develop a sense of self and empower them to become more active and independent in their community.





## 4 Evidence of impact

### 4.1 Vision and impact statement

*'Our vision is to provide innovative caring and supportive life experiences, work opportunities and structured learning programmes for people of all ages and backgrounds who have specific difficulties and who would benefit from the therapeutic effects of working with animals, horticulture and the environment.'*

A primary role for HCF is in helping people to live well and self-manage their health and wellbeing. This is believed to reduce hospital admissions, to enable people to live with their families and in the community for longer, and to reduce the reliance on statutory services, and to crucially fill the gap left by the loss of other community services due to funding cuts. This also includes supporting young people not currently in education or at risk of exclusion, children experiencing mental health issues and those within the Looked After Children service.

The development of a theory of change model at HCF has articulated the following overall impact statement, which provides the context for the evidence presented thereafter: ***People feel valued and self-manage their health and wellbeing***

### 4.2 Activities provided

HCF provides the following activities for attendees:

- crafts
- cookery
- developing life skills
- eco-carpentry (reuse/repurpose)
- green woodworking
- looking after large and small animals (animal assisted interventions, equine assisted learning)
- nature walks
- orchard skills
- organic gardening

The photographs on the following page show the activities by attendees at HCF.



HCF has strong local links within the community and consistently receives referrals from health and social care, the Community Mental Health Teams, and other statutory services. There is consistent demand from schools for visits as part of the curriculum and also provision for children and young people at risk of exclusion. The organisation has developed an Alternative Education Provision with The Brookfield School delivering practical elements of the ASDAN Animal Care Accredited qualifications.

HCF has also provided sessions for children and young people experiencing difficulties with their mental health and requests for this work have increased during the Covid pandemic. A weekly term time placement was provided for a pupil from a local high school who was at risk of exclusion and lived in a 'looked after' setting.

During school holidays 'Family Fun Days' provide a range of inclusive activities for children with special education needs and disabilities (SEND), and their siblings and families. These have proved extremely popular (see feedback in the following sections).

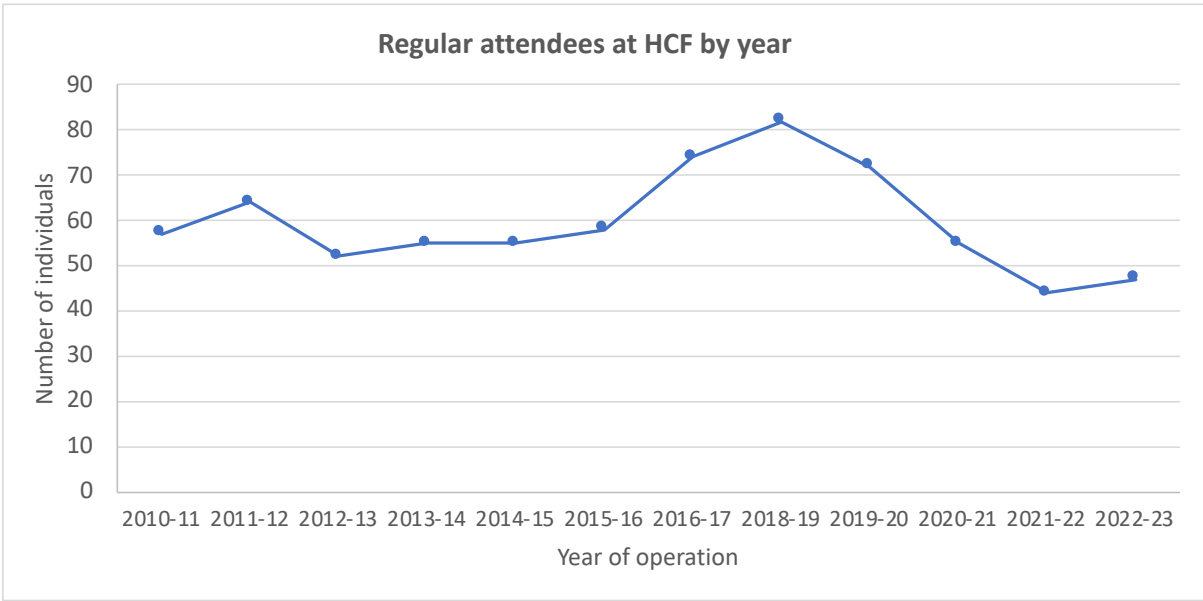
For 10 years, HCF has provided supported participatory activities for people living with Dementia and their carers, as an alternative to indoor based provision. Working on a model devised by the University of Worcester's Association for Dementia Studies to support the set-up of community based 'meeting centres', HCF has developed a new provision in 2022 called 'Friendly Faces – meet a friendly face in a friendly space'. This provides regular (funded) drop-in sessions for people affected by Dementia or other life changing conditions such as Parkinson's disease or stroke and their family carers.

HCF has a long track record of working collaboratively with a wide range of community, voluntary and statutory sector organisations. Its service provision has always been developed in response to local need and its strength lies within the community it serves. In 2022 HCF participated in the Herefordshire and Worcestershire Integrated Care Systems Working Better Together Systems Leadership Programme. This has facilitated closer working with other community led organisations and statutory sector and public services. Within this programme there has been a strong focus on collaboration to develop and enable more cohesive approaches to work effectively together '*on challenges of mutual concern that can*

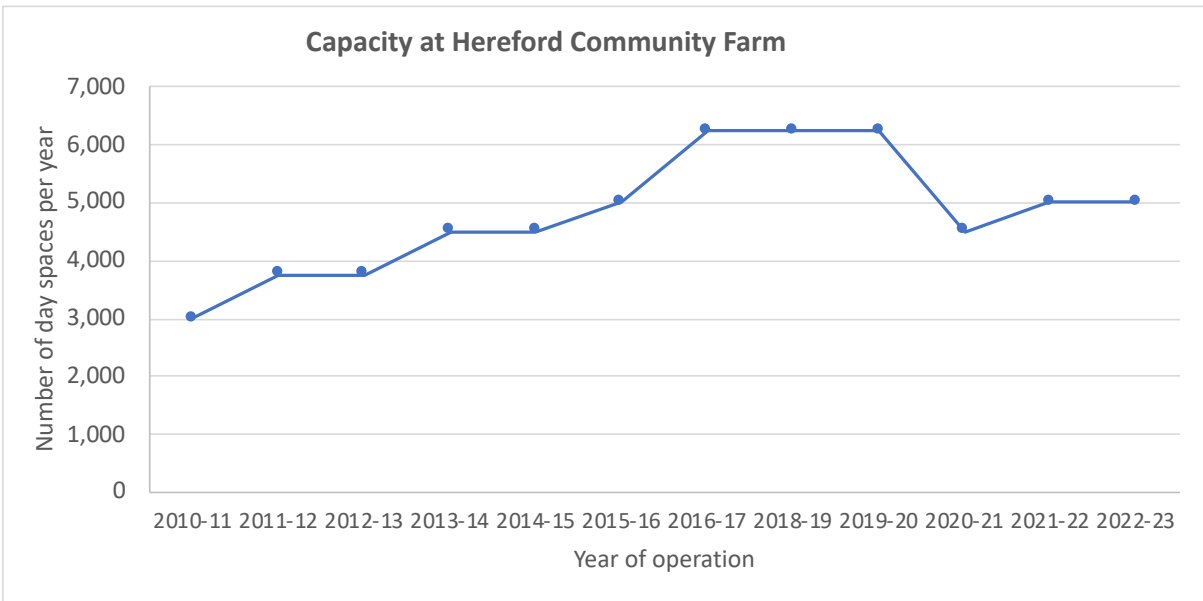
*best be solved by people and organisations working together.* This experience has enabled HCF to link with other Herefordshire organisations that have shared goals where there is potential to work collaboratively, in addressing challenges that could be met in a complementary approach.

### 4.3 Attendance and capacity

Since its inception the number of individuals attending HCF sessions every week has averaged just under 60 people (see the following chart), with higher numbers between 2017-19 and lower numbers in 2012-13 (due to a relocation) and 2020-22 (due to the pandemic). Many individuals have been attending HCF for years, with about a dozen new individuals to the service year. Attendance varies between 1-5 days each week depending on the individual, their diagnosis, and the deliverables in their care plan. The impact of the pandemic meant only off-site and outreach provision between March-June 2020, and a blended service from July of that year as numbers were 'capped' for on-site provision to meet government guidelines. There were no school visits, one off visits or open events during the pandemic. The after effect of the pandemic was that some vulnerable people were reluctant to return to face-to-face provision, so it has taken time for numbers of attendees to recover. Once people returned in person, an increased level of support was needed due to higher levels of need: high levels of anxiety, skills lost during lockdown with the lack of interaction and support, and the wider issues affecting people requiring more signposting to other services. New referrals for 2021 only began in the July of that year, with significant delays in people being assessed which affected decisions on personal budgets. New starters generally now have a higher level of need, and more are attending with dedicated 1 to 1 personal assistant support. This causes logistical issues with a shortage of personal assistants in some cases causing last minute cancellations by attendees, and a higher number of people on site creating challenges for organising activities with enough space to work in. Currently there are 47 day placement attendees and 8 students receiving 1 to 1 support every week. A group of 10 students from Brookfield special educational school also attend weekly (there are two groups of 10 students, attending at different times of the year). A total of 128 individuals attended the open community events in 2022: Friendly Faces (for people with dementia and their carers) and Family Fun day for families with children with special educational needs or disability.



Capacity as measured by day spaces available per year, has also increased, doubling over the past decade as shown by the following chart.



## 4.4 About the attendees and referral routes

### 4.4.1 Home Environment

Half of the current attendees live with a spouse or family member as their primary carer. Just under half live in a residential setting with care or daily living support provided. A quarter of attendees live in a supported environment with Shared Lives carers. Only one attendee lives alone in their own home.

#### 4.4.2 Range of need and circumstances for referral

Attendees are living with a range of diagnosed health conditions or personal circumstances including:

- Acquired brain injury
- Complex and multiple disabilities
- Downs syndrome
- Complex and enduring mental health issues (psychosis, schizoaffective disorder, personality disorder, depression & anxiety, high risk of self harm or suicidal tendencies)
- Challenging behaviour
- Epilepsy
- Dementia
- Diabetes (Type 1 and Type 2)
- Eating disorder
- Autism
- Huntington's disease
- Learning disability
- Obesity
- Parkinson's disease
- Sensory impairment
- Social isolation
- Children and young people at risk of exclusion/suspension
- Looked after or previously looked after children and young people

HCF is unique in providing land based therapeutic activities for people living with dementia and was one of the first organisations nationally to do so. This recognises Herefordshire's higher than national older age profile and the incidence of Dementia in people from a rural background for whom more conventional indoor based services are inappropriate.

An Alternative Education Provision facilitates a supported approach to learning for children who have been excluded or are at risk of exclusion from mainstream

education. This includes a blended approach to more formal learning and attainment. HCF works with Brookfield School in Hereford, a specialist school for children aged 7 to 16 with a diagnosis of social, emotional and/or mental health needs, and associated learning difficulties. HCF work with Brookfield to deliver ASDAN accredited qualifications and group activities; where the focus is on developing life skills, team work and building emotional resilience to 'life's knocks.' One to one sessions provide targeted support for children and young people particularly for those experiencing mental health issues or social anxiety.

*"The need for alternative provisions is paramount for our children and young people to continue to be provided with a secure and safe learning platform, where they feel comfortable, valued and listened to. Having the open space for students to grow in confidence and try new activities; promoting self-esteem and supporting their opportunities to expand knowledge and skills within their personal career interests. Progressing onto work and becoming adults contributing positively to the wider community. Giving opportunities to create new friendships encourage learning and positive engagement."*

Jan Greene, tutor at Brookfield School

HCF is flexible in adapting content and presentation of sessions to meet with the requirements of a school and the specific needs of children and young people to give the best outcomes for the individuals.

#### **4.4.3 Geographic spread**

HCF is based in the outskirts of Hereford. People attend from all over the county, with some further afield. Half the attendees are from north west Hereford and north west Herefordshire. A third of attendees are from south Hereford and south of the City including the Golden Valley and towards Ross-on-Wye. A quarter are from east Hereford and east of the City towards Bromyard and Ledbury. The rest of the attendees live near Kington, Hay-on-Wye, Ledbury, Ross-on-Wye, and Monmouthshire.

#### **4.4.4 Staff and volunteers**

HCF is an equal opportunities employer and actively employs people who are living with a diagnosed health condition that may affect their ability to find employment elsewhere. This includes 3 young people in Supported Employment roles, which have been developed as an accessible route to gaining practical work experience.

There are currently 15 contracted paid employees, 2 sessional staff and a strong volunteer base providing 3,000 + volunteer hours per year (prior to the pandemic). Volunteer time contributions equate to £30,300 per year (based on the Living Wage).

Regular work experience places are provided for young people attending school or college and often related to formal training in animal management or health and social care. Prior to the Covid pandemic HCF regularly provided a six-month paid work placement for visually impaired students and trainees from the Royal National College for the blind and has supported nine trainees through this scheme to date. Work experience places have also been provided for young people from Hartpury College, Whitecross High School, and Holme Lacy College.

#### **4.4.5 Commissioners and referrals**

Commissioned work and referrals are from a range of organisations and services including:

- Alzheimer's Society
- Alternative Educational Provision
- Brookfield School
- Herefordshire Council (Adult Social Care, Community Learning Disability Team)
- Local schools & nursery providers.
- NHS (Mental Health Older Persons Team, Community mental health services including North, West & East recovery, City team & 27A, The Knoll Ross-on-Wye, the Crisis team, Stonebow Unit)
- Shared Lives (Ategi)
- Scope
- Services for Independent Living
- Social Prescribing
- Transitions Team

HCF also has referrals through local recommendations and word of mouth. Some attendees self-refer and may also self-fund their placement if they do not have a personal budget.

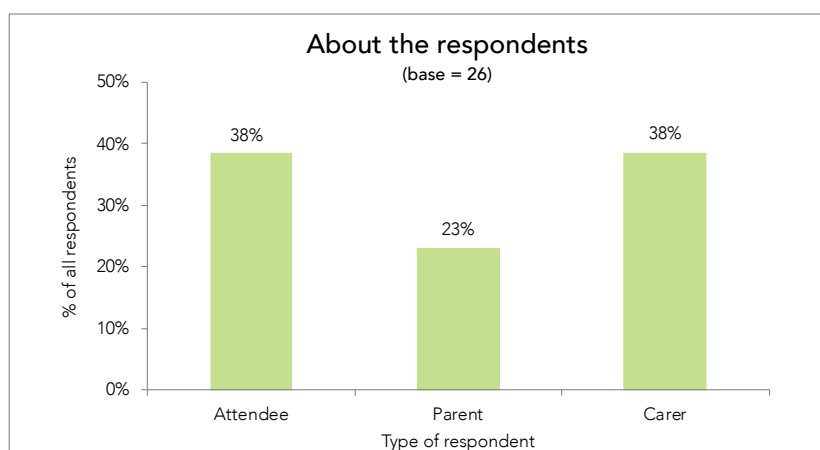


## 4.4 Feedback from attendees

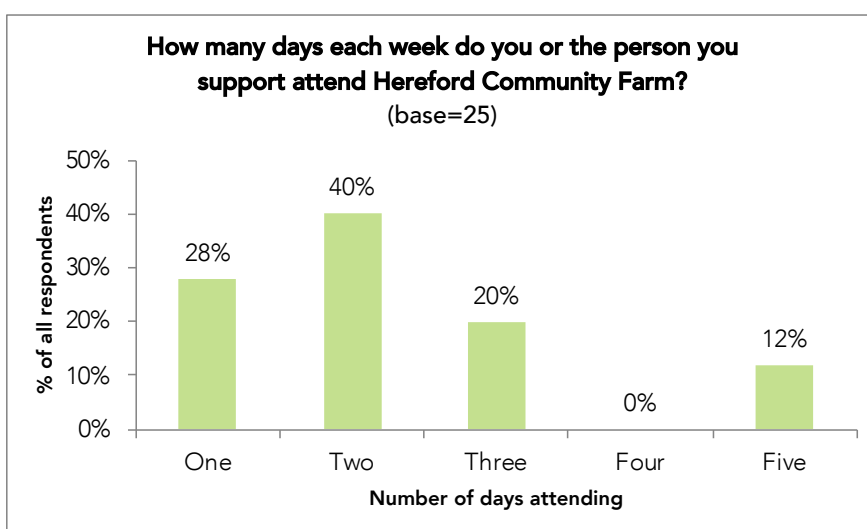
Feedback forms were distributed to all attendees and visitors to HCF in the summer of 2021. A total of 26 forms were completed by attendees and analysed (approximately half of all attendees) and the results are shown in this section.

### 4.4.1 About the respondents

38% of the responses were completed by attendees themselves and the rest by carers and parents on their behalf.



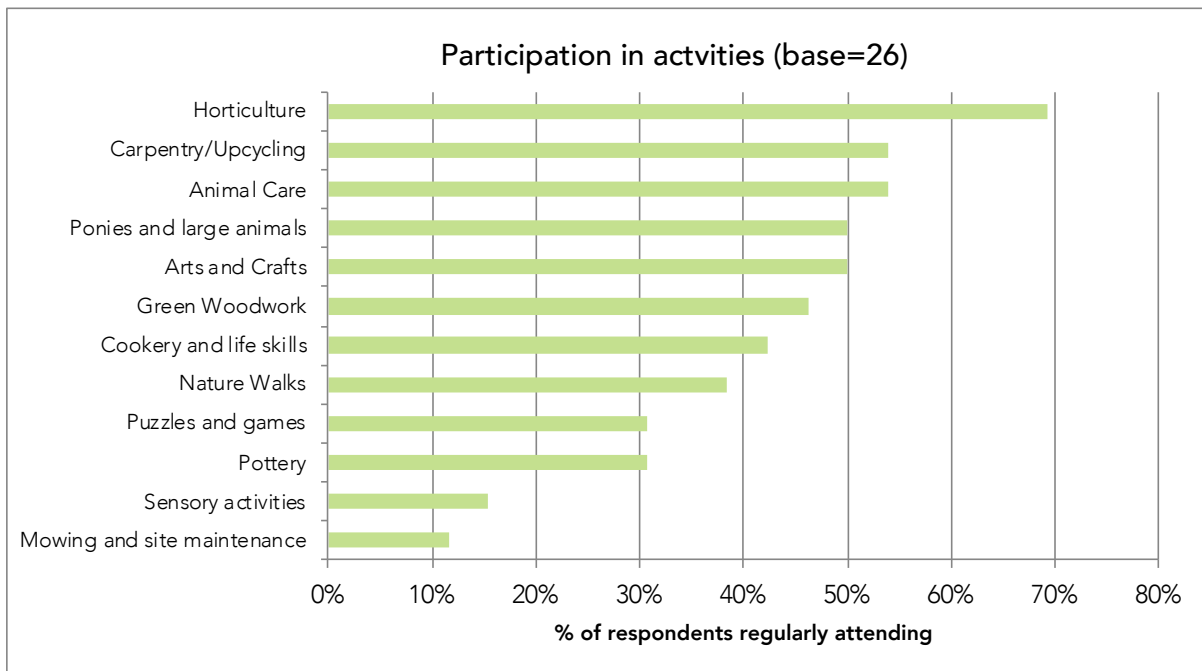
Most people (68% of respondents) said they attended HCF for one or two days a week. Around a third (32%) use it more intensively and attended between three and five days a week.



Feedback about HCF services were all positive. 83% rated services as very good and 17% as good.

#### 4.4.2 About the activities

Horticulture is the most common activity attendees regularly participated in (just under 70% did this). More than half did carpentry/upcycling and animal care. 40 to 50% did activities with larger animals, arts and crafts, green woodwork, cookery, and life skills. 38% participated in nature walks. Just under a third did pottery, puzzles and games. A smaller proportion did sensory activities, mowing and site maintenance as shown in the chart below.



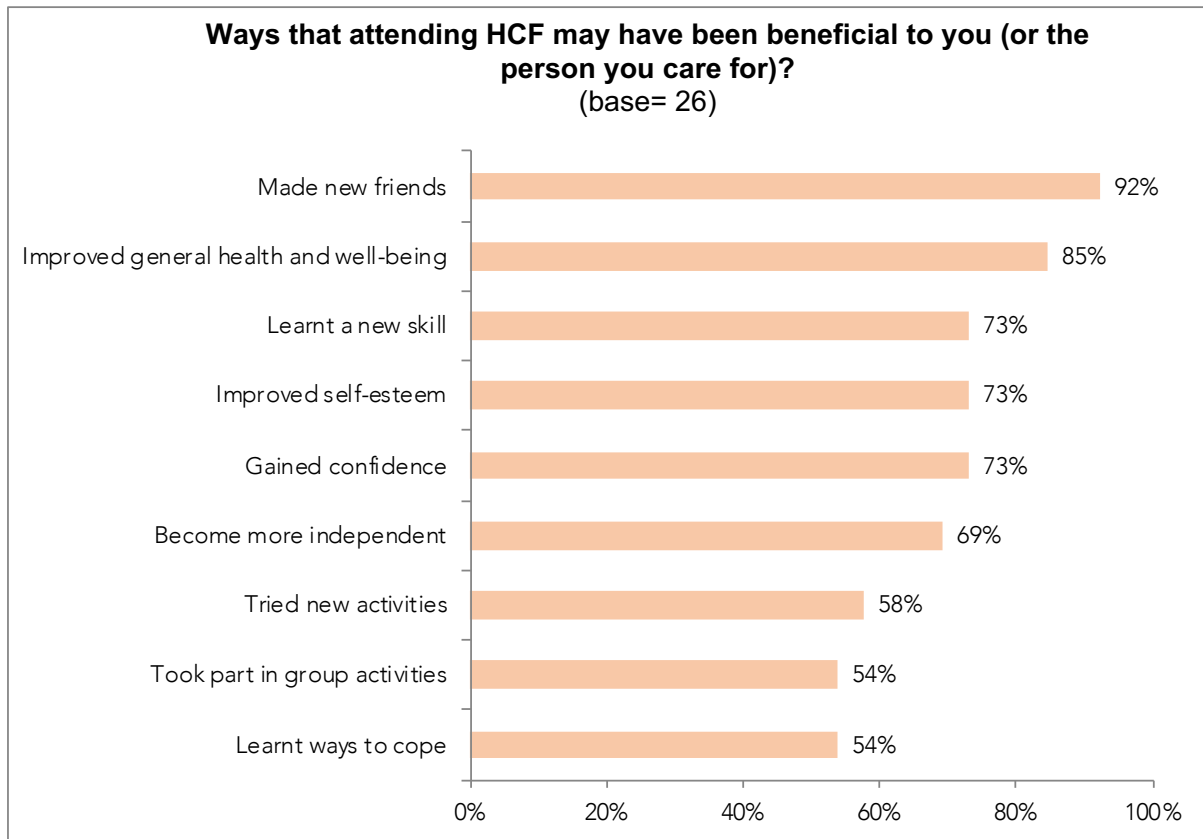
Respondents indicated an interest in trying out many of the activities available at HCF as well as new suggestions such as: help in a dementia group, jewellery making, music sessions, photography, and trips.





### 4.4.3 About the impact

Results showed some key social, health and learning impacts. 92% of attendees made new friends and 85% improved their health and well-being. 73% learnt a new skill; improved self-esteem and/or gained confidence. 69% said they had become more independent. 58% tried new activities and 54% took part in group activities and/or learnt ways to cope.

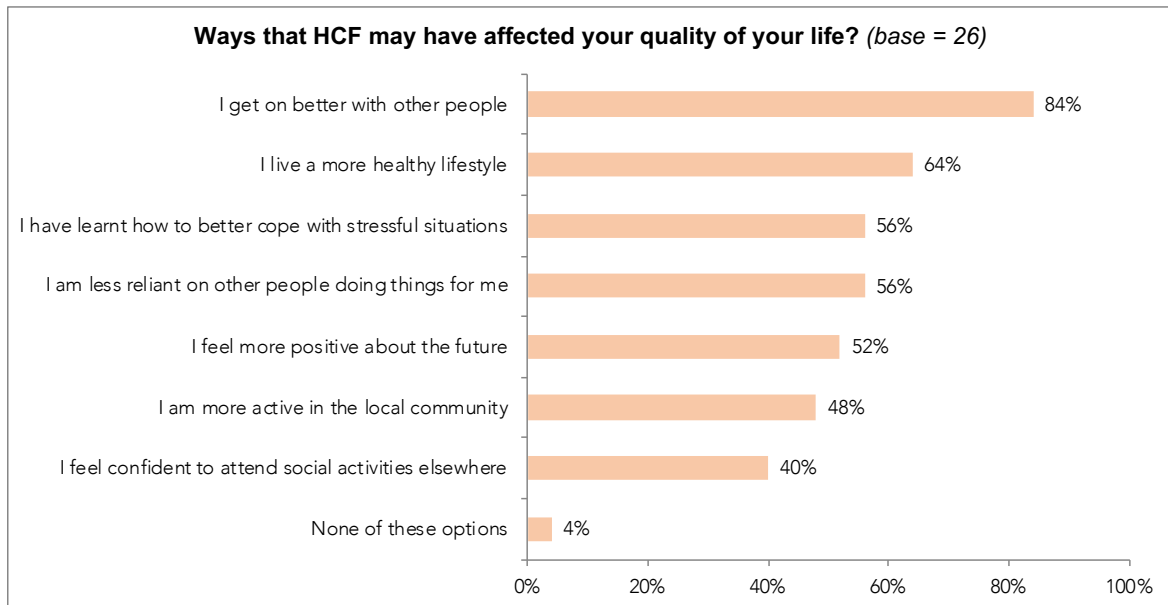


Respondents were invited to put their beneficial experiences of attending HCF in their own words which are shown in the table below:

<b>Experiences in their own words:</b>
<i>I have gained lots by attending Hereford Community Farm. I missed it when it was closed during the shutdown.</i>
<i>Gained confidence and calmed my temper</i>
<i>I have made new friends and I have socialised more</i>
<i>I would like to add that J's confidence and self-esteem have improved beyond our expectations. She is a different person and loves coming to the farm</i>
<i>J. loves his days at HCF. Feels he has a purpose</i>
<i>M. has greatly benefitted from learning new skills and making new friends. Attending HCF makes him very happy. He loves to achieve where he's so well supported and guided to do.</i>
<i>Much more aware of what's happening in the world and very happy in himself</i>



Focusing on quality of life: 84% of attendees get on better with other people because of attending HCF. 64% felt they live a healthier lifestyle. 56% have learnt how to better cope with stressful situations and/or are less reliant on other people doing things for them. 52% felt more positive about the future. 48% said they are more active in the local community and 40% felt confident to attend social activities elsewhere.



Respondents were invited to put their experiences about how HCF had affected their quality of life in their own words - see the table below:

<b>Please add your own experiences here:</b>
<i>I cope better with change and make decisions for myself. I know I can say No if I do not like or enjoy something. Confidence in myself and also understanding others have feelings!</i>
<i>I enjoy being with other people</i>
<i>I have learnt how to use tools correctly and safely</i>
<i>I just look forward to coming to the farm</i>
<i>J. blossomed since attending the farm and has even ventured to try other social activities as a result</i>
<i>L. always looks forward to farm days (loves woodwork!)</i>
<i>M. benefits from the friendships of both staff and clients they are all friends to him and he flourishes as a result</i>
<i>The farm always helps me when I have my very bad times. Thank you all.</i>
<i>Working with new people and making friends</i>

## 4.5 Feedback on the impact of daily activities

Gretel is the lead member of staff for the Friendly Faces sessions but also leads on cookery and life skills and works with some of the people with more complex needs.

*"After spending a year at HCF supporting people through a Care Agency I was offered a full-time role as a Project Worker. This enabled me to lead a wide range of activities for people of all abilities, for example cooking with produce grown at the farm - and utilising the new pizza oven in the garden outdoor kitchen which is immensely popular.*

*Weather permitting, we spend time outdoors amongst nature providing a way of improving quality of life with more opportunities to be active and developing new skills.*

*Our sensory activities and music sessions especially for those with more complex needs can get a little messy and noisy but the benefits are clear to see.*

*I've grown in my role as a Project Worker, I've seen people flourish progressing into more confident happy individuals and developing their social and life skills. None of this would be possible without the hard work and determination of 'management' who are always there helping people, families and carers with advice and support for those who attend."*



Chloe has a background in art and plans and leads on many of the group projects in Arts & Crafts and organises the exhibitions, with the next one already booked at The Courtyard Centre for spring 2023. She also leads the Small Animal Sessions.



*"As a priority I ensure that Arts & Crafts activities are always tactile, sensory and can be done in groups so that everyone can participate. Keeping the craft simple is important so that everyone can contribute in a way that utilises their skill level and they feel involved in the project. It's great seeing how the project comes together in the end result."*





John is one of the founding directors and helps with many of the outdoor activities provided.

*"You could call it a labour of love setting up this project from scratch to where it is now 15 years later and still growing. Running HCF has its challenges but seeing people grow in themselves with improved self-esteem and confidence makes it all worthwhile.*

*My sister Jane attends the farm 5 days each week and loves her cooking, arts and crafts. As a family we are pleased to see that she is so settled and happy here. We have a fantastic team, staff and volunteers not forgetting the wonderful people who attend. Together they all make it a special place."*



## 4.6 Feedback from visits and events

This section summarises feedback provided by people on scheduled visits to HCF.

### 4.6.1 Brookfield school

A group of year 9 pupils from Brookfield school in Hereford visited in the summer of 2021. (Brookfield is a specialist school for children with social, emotional and/or mental health needs and learning difficulties). Feedback from the teachers was that the pupils really engaged with the activities and grew in confidence and understanding, enriching their curriculum. Feedback from the pupils is shown below:

*"I mainly liked seeing the horses, especially Phantom, I liked that I gained his trust which made me feel quite special, also the atmosphere at the farm was really chilled, you are not forced to do anything you don't want to, you can do it on another day."*

*"I've enjoyed going to the farm because of the animals, I was really anxious about animals, but this has helped me overcome my fears."*

*"I like the fact that I am in the fresh air, outdoors, doing other things besides sitting at home on my x-box."*

*"I think that anyone with stress, depression in their life I think would greatly improve their mental health."*

Feedback from an attendee who had 1 to 1 support at HCF, said they'd found it beneficial taking part in group activities, becoming more independent, and trying activities and learning new skills (carpentry/upcycling). This resulted in feeling more positive about the future and hoping to do a qualification in woodwork. The overall rating of the service received was 'very good'.

Nicola is the staff member who leads on schools and young people's provision, and the Family Fundays. Her feedback below describes the outcomes of the activities provided.

*'I love working at the farm supporting people to learn new skills and to become independent. Over the last two years I have been involved with providing activities, learning opportunities and support to groups of school students and individual 1:1 sessions for young people experiencing mental health issues. One of the most rewarding aspects of my work has been witnessing the improvement in the students' confidence, abilities, social skills, and self-esteem. I feel passionate to continue and expand the support that the farm can offer.'*

#### 4.6.2 West Hereford Team Churches

A churches family group visited and said the space, activities and volunteers were all great. It also helped build relationships within the group by working and playing together naturally. Their visit has inspired them to work on a community garden and pew project.

*"The children really enjoyed feeding the animals and making bug hotels and enjoyed exploring the space. "*

*"Really good range of activities for developing different skills and independence. Lots of space to engage or not engage as needed - empowering people. Working with people with a range of needs at the same time. "*

#### 4.6.3 Families with children with disabilities/special needs

Groups of families with children with special educational needs and disabilities visited HCF during the summer in 2022 over 4 events, with the maximum attending at a time being 21 children and 13 adults. 25 feedback forms were completed. All rated the overall event as good/excellent (mostly excellent), all but two said the range of activities available was good/excellent and all but one rated the facilities, and the quality of provision as good/excellent (the one or two rated these as satisfactory). All rated the accessibility, support provided and group size as good/excellent (mostly excellent). 72% had not visited HCF before and 100% would recommend HCF events to others.

Comments about what attendees had particularly enjoyed:

*"Pizza oven, animals, bell tent, friendly faces"*

*"Stroking the animals and firing the water gun"*

*"Fantastic event, relaxed atmosphere, just perfect!"*

*"The involvement of the people who work here and their knowledge."*

*"Range of activities and pace. Really calm and friendly."*

*"Handling cockroaches and chatting about insects and feeding goats."*

*"Talking to parents. The kids loved feeding and patting animals. W. loved the inflatable ball."*

*"We loved feeding the goats and guinea pigs, music and painting."*

*"The staff at the farm were very friendly and we felt very welcome. Thank you."*

*"Lovely friendly, peaceful day."*

*"Support good but not too much"*

Suggested improvements were: providing a longer day with more activities, providing dessert, having toilets closer by and a bigger group size and *"Run them more often. Have something or someone providing musical interaction."*



#### **4.6.4 Visitors from Whitecross High School**

Staff from Whitecross High School in Hereford visited HCF in 2018 to assess the potential for support to pupils with particular needs, and also for work placements. They gave very positive feedback received on the range and accessibility of activities and support provided, and uniqueness. They stated that their visit had changed their perception of disability provision. Staff commented:

*"It's the whole philosophy - I CAN do, which shows that with the right support and encouragement, disabled people really CAN do so much. What a wonderful place! The support available is second to none and is delivered by a team of dedicated people."*

*"The news on TV is dominated by bad news, disasters and things that are wrong in the world. What a joy to see happiness, helpfulness and hope in the community. Keep up the good work."*

#### **4.6.5 Visitors from Norfolk**

Visitors from Norfolk interested in establishing a similar place in their own area, looking for advice and inspiration to inform their planning.

*"Enormous awareness of the vision, imagination and commitment given to creating this friendly, calm, bustling and creative environment. "*

*"The spaces and facilities provided are so varied and dynamic. As a care worker it is very inspiring to see how supported and accessible the kind of facilities can be.*

*Thank you very much for the time you gave us!"*

## 4.7 Contribution to the local and wider community

HCF contributes to the local geographic community in the following ways:

- Uses local businesses and suppliers wherever feasible
- Hosts visits from local schools, nursing homes and other community groups
- Provides volunteering opportunities through HVOSS
- Replanting and bringing old orchards back into productive use and planting native species hedgerows for wildlife (Heritage Lottery Funded Three Counties Traditional Orchards Project).
- Participates in community activities as part of Ledbury Poetry Festival
- Involvement in the Heart of England in Bloom competition and in 2016 were recipients of the judges' Community Achievement Award.
- Exhibitions of artwork in community venues notably at De Koffie Pot exhibition space in 2018 and The Courtyard Centre for the Arts in 2016 with work inspired by local artist Brian Hatton to celebrate his centenary. A further exhibition at the Courtyard is planned for 2023
- Donates excess food grown at the site to the Hereford Foodbank.

HCF are also connected to a wider community of practice, contributing to research and events, some of which is described here:

- Helped established and contributes to a national forum called People and Animals<sup>17</sup> which is about Animal Assisted therapies for mutual wellbeing.

*"Seeing the need for a forum to explore the benefits of the human-animal bond across communities, Julie and I established People and Animals UK to bring professionals and interested parties together to share resources and support ideas. From setting up networking opportunities and workshops,*

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<sup>17</sup> <https://peopleandanimals.org.uk>

*speaking at seminars, webinars, and conferences we chose to put talk into action. It has been an incredible journey to show how collaborative working with like-minded people can support thousands of people across the UK. Now with Wisbech Community Farm learning from the model of Hereford Community Farm we have something special to feed back into the Green Care Community helping groups thrive as they support their own communities from within."*

*Katie Bristow, Director of Operations, People & Animals UK*

- Society for Companion Animal Studies
- Regional Disability Infrastructure Support Service
- National Speech and Language and Occupational Therapy conference
- Social enterprise, social investment
- Integrated Care System, Herefordshire, and Worcestershire

## 5 Impact on individual lives - case studies

### 5.1 Eric's story

Eric was diagnosed as autistic aged 14 and is slightly dyslexic. He attended mainstream primary school, and then went to a special secondary school and completed his A-levels. He experienced bullying in all the schools he attended. He is now 40 and moved to Herefordshire with his parents 12 years ago. In 2017, when he began to attend sessions at HCF, he had a lot of mental health issues arising from hate crime, as well as autism. He attends twice a week and does a range of activities - all except mowing and maintenance. Eric has settled down well, has support from another organisation, and attends two other community farm settings. He has recently moved into his own flat in supported housing where he stays during the week, returning to his parents for weekends. This has been a huge step forward for him and his parents, particularly his mother who can get more sleep as Eric often wakes her in the night.

Eric found that HCF helped him become more independent and more confident. It has improved his health, well-being, self-esteem and helped him learn to cope better. His social skills have improved too as he has met new people and taken part in group activities. Previously he wouldn't say anything or if he did, he wouldn't know how to say it politely. He has a wicked sense of humour, but the staff know not to be offended or take it the wrong way. HCF has given him the confidence to speak up for himself. He has learnt new skills such as woodworking and is very proud of the chairs, stool, and bookcase he has made.

His mother, Valerie had this to say:

*"The staff are so patient with Eric - getting him to do something. He's very sensitive to noise so they've taken that into account and he's better able to cope*



*by leaving the area instead of getting very upset. We needed Eric to become more independent as we get older - to be able to interact somehow in society, to a place where he was welcome, to relax, learn some skills.*

*Eric has become less reliant on others because he's gained so much confidence. Hereford Community Farm has helped him to cope with society. The public understand more now [about autism] and people are kinder. Eric gets on better with other people and has stopped being so selfish. He knows I like candles and he buys me one every now and then when he's out and about with one of his support workers."*





## 5.2 Alan and Sheila's story

Alan was diagnosed with early onset dementia 12 years ago and had to stop working as an engineer. He attends HCF three days a week and has been doing so for 10 years. He does green wood working, and upcycling such as building bird boxes and bug hotels, working independently, and showing others how to do so.

*"I like being occupied as I have an overactive brain. Everyone's very friendly, and we get on very well together. They trust me to do things and I'm still being allowed to do things on my own although I'm not as active as I used to be, but I can still help out. I'm not treated like a service user but as a member of staff."*

Feeling trusted to work independently 'is a big thing' for Alan and feeling valued as part of the team at HCF. He struggled during the Covid pandemic not being able to get to HCF, despite doing some gardening at home but he can't do any decorating anymore due to the deterioration in his condition. He finds it difficult to concentrate so is not writing anymore but is still doing artwork at HCF and is currently working on a painting of their two dogs to give to his wife. He has lost his sister and brother in recent years so besides having Sheila, he can feel very lonely which is why HCF helps as he knows lots of people here. He feels it is really important for Sheila too, to give her a break to focus on her own health and wellbeing without having to worry or care for him.



### 5.3 Ian and Andy's story

Ian enjoys regularly attending HCF a couple of days a week helped by Andy, one of the Personal Assistants who support him 24 hours a day. Ian enjoys upcycling pallet wood and making furniture. He has made a bench (shown below) and has previously made chairs, stools and birdboxes. He likes the variety of activities, so he doesn't get bored. *"It's relaxed here, they support you to do what you want."*

Ian



#### 5.4 Esther and Susie's story

Esther is a GP who started volunteering at HCF in 2018, to support attendees. She took a long break during the pandemic, so has only recently returned to volunteering there in the summer of 2022. Her job is stressful, and she finds helping out a morning a week at HCF a very welcome break from her demanding job. She says:

*"Hereford Community Farm restores my faith in humanity and is life-affirming. It is calm and people can be themselves, they are not on edge or stressed and treat each other with respect. I have also learnt new skills, like how to cook quiche!"*

Esther was working with Susie who attends HCF four days a week. Susie said she is happy when at the farm, as it's fun looking after the animals, cooking and gardening, as shown in these photos:



### 5.5 Josh and Dave's story

Josh is autistic and since he was 18, has been supported by Dave. Josh likes fixing and making things at HCF but poo-picking after the animals is his least favourite activity! He does green woodwork (like the bench pictured in the photo), gardening and makes upcycled furniture. He likes the variety of activities and interacting with people - speaking more now than he did at school where he didn't speak at all. Josh and Dave are often commissioned to make things for family and friends. Dave is a retired police officer and is a Shared Lives carer who provides respite care. Josh stays with Dave and his family to provide consistency of care and respite for Josh's family.



## 5.6 Shane and Fiona's story

Shane attends HCF three days a week and has been coming here for years. He has made many items using green wood working techniques - benches, tables and stools. He likes the staff *"like having a laugh with John who winds me up by calling me Wayne not Shane"*.

Shane lives with Sue and Pete his Shared Lives carer's, Pete says *"Shane is always happy when he comes home and is very pleased to be working at HCF"*.



Fiona usually helps with the small animals but joins the green woodworking sessions one day each week. She has made a variety of items in green wood working from chairs, tables to rolling pins, hayracks, and a gym for the mice. She often says 'I can't do it' but then realises she can after learning how. She has made many friends here and also enjoys looking after the animals (horses, guinea pigs and goats). Fiona's parents said:

*"When Fiona first began attending the farm nearly 13 years ago, she had very little confidence, self-esteem and social skills. It has been an absolute pleasure to watch Fiona develop and blossom over the years. We truly believe this is down to the experiences and opportunities Fiona has been lucky enough to have been given at the farm. The benefits to Fiona and her life are priceless, we as a family will be eternally grateful to John, Julie and all the other support staff for enriching Fiona's life every day."*



Owen is the green woodworking tutor at HCF and has worked here for 8 years. He describes his role to teach woodworking skills to encourage independence and develop confidence and concentration. He provides a practical demonstration and explanation and encourages attendees to make what they'd like which has a practical use, rather than a specific thing. He sees his role as helping attendees to develop a skill to make something that has a use beyond the activity.

*"It's about helping people realise their own potential and that they're capable of doing something which is a very different approach to other day care providers. Most people here are in long-term care. My approach is not too instructional or overbearing so that attendees benefit by knowing they've done it rather than me. And to do a good job rather than a fast job. It gives people a sense of purpose in a relaxed atmosphere. It's satisfying to see someone improve and realise they have made it when it all comes together at the end"*

## 5.7 Sarah's story

Sarah lives with a Shared Lives family which has provided stability and given her confidence. She missed out on education but at HCF she has learnt to do lots of different things, learning new skills, taking responsibility and gaining confidence. She has been attending HCF for 8 years and has become a valued supported worker. She has learnt to do a variety of different things, like building upcycled furniture from pallet wood (using power tools), building a box for the horse equipment and caring for the horses. She recently spotted an animal who wasn't well and alerted Julie so the horse could be treated by a vet.

*"I like being busy and helping others."*

Sarah



*"Over the last few years, I have been supporting Sarah working with the animals and in the garden. During this time, she has blossomed with her confidence and ability. Sarah is always keen to help out with anything that I ask of her and has become an invaluable member of the team."*

Nicola, HCF supervisor



## 6 Prevention and savings

There is rising demand for primary and social care in the UK and in Herefordshire, which has an older age profile than England. Coupled with increasing costs and an overwhelmed system, it is increasingly important to support people to maintain or improve their wellbeing, to prevent them ending up in acute and crisis care. As stated in Herefordshire's JSNA<sup>18</sup> 2021, "*many of the risk factors to wellbeing are linked to each other and experiencing some can lead to others – compounding their effects. Not only can early preventative action to address these multiple complex vulnerabilities improve people's lives, but it also has clear cost benefits in terms of changing their trajectory before they require intensive interventions across many services.*"

HCF provides support to individuals with long-term health and disability needs, playing some part in decreasing demand for emergency, primary and social care services provided by the public sector.

Average costs of emergency, primary and social care are given below to provide context for savings realised from helping people improve their wellbeing.

### 6.1 The NHS

Before the pandemic, demand for health care had been rising across all services and sectors from accident and emergency to GP appointments. The Covid-19 pandemic completely changed the activity profile for the NHS. In 2020/21 fewer people attended a major A&E department compared to the previous year. At the same time, hospital patients needed more intensive care. Hospitals cancelled routine procedures to ensure Covid-19 patients could be treated; this meant the backlog of patients waiting for treatment grew. 63% of people with long-term conditions in Herefordshire did not receive treatment because the NHS stopped it (JSNA, 2021). Delayed diagnosis or treatment for long term conditions and cancer now means increased demand of urgent care. For example, A&E attendances in June 2021 were already higher than pre-pandemic levels. The backlog of people waiting for care means some activities, such as routine operations, are likely to be affected for years. Some indicative costs of people requiring NHS services follow.

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<sup>18</sup> Joint Strategic Needs Assessment, public health, Herefordshire Council, 2021



- The cost of an individual going to Accident and Emergency varies from £77 - £359.
- The average cost of a patient being taken to A&E by ambulance was £292. Ambulance callouts that didn't result in a trip to A&E cost an average of £206.
- A recent study estimated that, in 2020, the average 9-minute GP consultation costs £39.23.
- Median cost of a hospital admission and outpatient procedure is £2,000 with average costs of complex and emergency operations around £9,200.

(Source: *The King's Fund*, January 2022; 2022-23 NHS national tariff payment system)

## 6.2 Social care

Half of social care expenditure is on working age adults with the remainder spent on people aged 65+. For older people, most of the spending (65 per cent) is for those who need physical support, while for working-age adults the majority (70 per cent) is for those with learning disabilities.

The rising cost of social care is driven by two main factors: increasing demand for services and increasing costs of providing them. However, demand for social care is not driven exclusively by an ageing population, the prevalence of disability among working-age adults has increased over recent years. The most recent data shows that the prevalence of disability among working-age adults is 19 per cent, up from 15 per cent in 2010/11. The same figure for older adults has remained static at around 44 per cent over the same period.

In 2019/20, the average cost of a local authority-funded care home place for someone aged over 65 was £679 a week. For working-age adults, the cost was £1,317 a week. In 2019/20, local authorities, on average, paid £17.48 an hour to commission externally provided home care services.

(Source: *The King's Fund*, January 2021)

## 6.3 Mental health

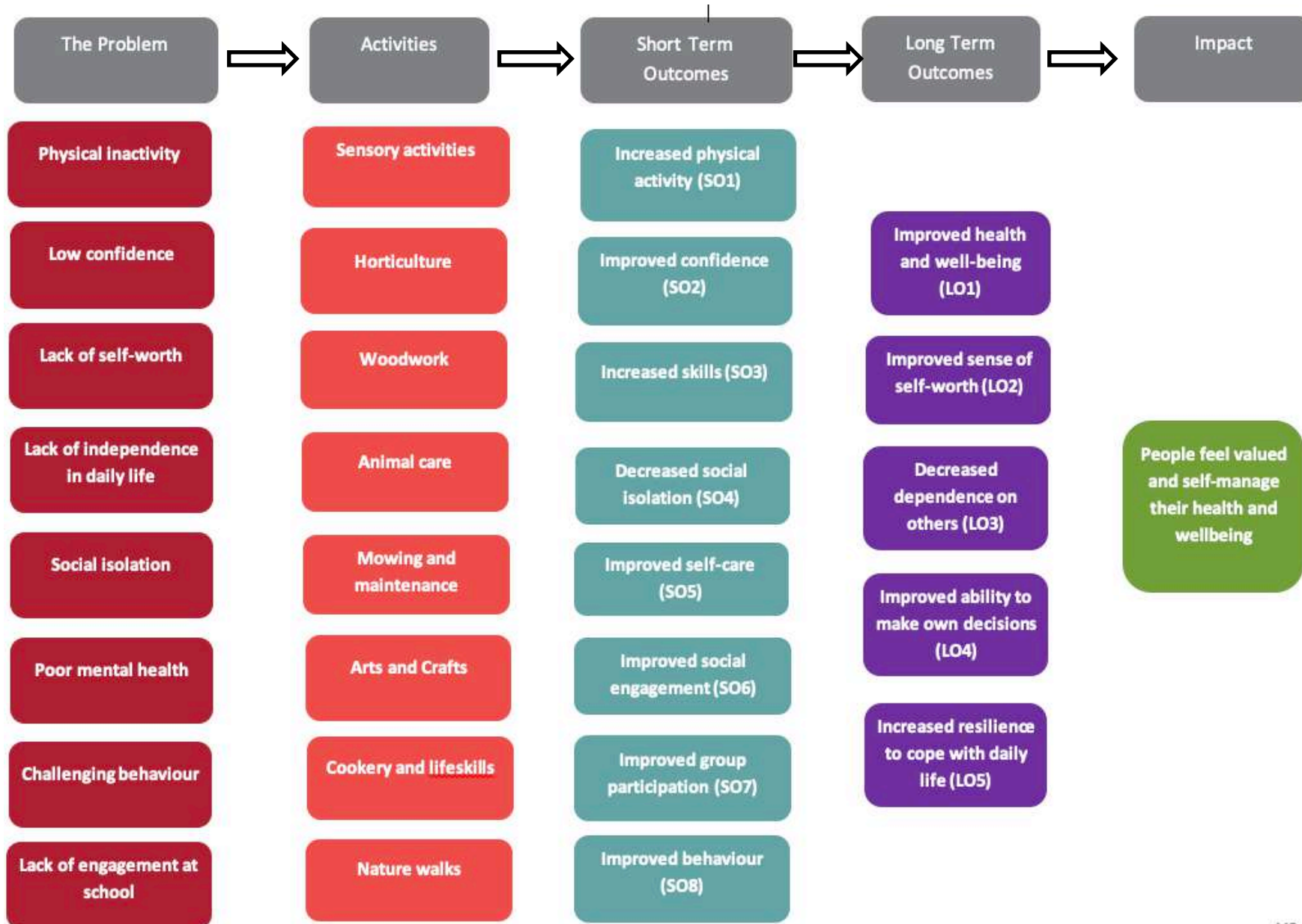
Nationally, Covid-19 increased many of the pre-existing risk factors for mental health, as well as generating anxiety around contracting the virus, raising demand for services.

At the same time, the supply of specialist mental health services has fallen with a sharp drop in adults in contact with mental health services in April 2020 and which is still nowhere near pre-pandemic levels. (*Institute for Fiscal Studies*, Nov 2021)

## 7 Theory of Change and outcome framework

HCF developed a 'theory of change' to help define an impact statement and outcomes. The Theory of Change and outcome framework is shown in a diagram on the following page. This provides a useful framework to focus the collection of data to measure impact in the future.

Data will need to be collected more systematically and on a rolling and regular basis to measure the impact HCF has on individuals attending and their families. This should be done using the questions designed to measure the impact as outlined in the Theory of Change. Carers and parents will need to help or answer on some people's behalf depending on their level of understanding or communication level. Care should be taken to ensure attendees can participate as much as possible in their own assessment, ideally using case studies or short stories about their time and progress at HCF.



## 7.1 Recommended improvements to impact measurement

The following actions are recommended to improve articulation of HCF's impact. Regular and systematic data collection on a rolling basis will help evidence the impact of the support for individuals.

- Engage stakeholders (such as attendees, parents, and carers) to get their feedback on the Theory of Change and articulation of impact, so it is useful and usable to communicate outside the organisation. Some refinements may be required to ensure it makes sense and represents what HCF is doing currently, but also allows for the development of the services and interventions provided in future. The effectiveness of these can be tested against the theory of change.
- Consider whether to include or have a separate Theory of Change for the families of the attendees.
- Agree the evaluation measures required to be collected based on the theory of change and evaluation framework.
- Review the suggested evaluation measures and consider what is feasible to collect in a pragmatic way, with the staff involved in the collection and use of the data.
- Start to collect data as per the suggested evaluation measures by completing a baseline form for each attendee when they start at HCF and follow-up forms to assess the impact on that individual over time.
- Analyse and report on the evidence of impact on an annual basis to staff and stakeholders.

## 8 The Future

The information presented in this report provides evidence of the positive impact Hereford Community Farm 's provision is having on the individuals currently attending. HCF started in response to an unmet need for day activities in an outdoor and natural setting. It has had to move site twice since its inception, and new facilities have had to be built every time. The organisation has demonstrated that it has a financially sustainable business model, with high levels of need for support in Herefordshire, which are expected to increase given the demographic profile of the county. The focus now is on ensuring the long-term future of HCF, consolidating the learning of the Community Farm model, and building capacity to broaden its reach into the Community it serves. It is currently working towards a relocation proposal to a permanent site close to Hereford City to future proof the services provided. The organisation has a strong network of support and established links with other community, voluntary and statutory sector services which it intends to utilise and strengthen as a platform to continue to work collaboratively and without duplication. Sustainability has always been a central driving force alongside strong social, ethical, and environmental objectives for HCF and as it looks to the future the organisation remains forward thinking in approach and at its heart remains the goal of *'Working with the Community and for the Community'*.

