



# A guide to growing food in health and care settings

Newham version

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## Reason for this toolkit:

Starting a gardening project is daunting and this document can provide a starting place.

This document highlights the benefits to health, the environment and social cohesion of food-growing projects within health and care settings. It should also help convince colleagues and organisations of these benefits. It may also help support funding bids.

We hope it is a catalyst for more city gardens.

It helps take into account adaption plans for the impacts of climate change: improving chances of local food security and helping with flood defences.

This toolkit is designed to encourage these types of projects to measure outcomes (clinical, environmental, and financial) so that they are then more likely to be widely adopted.

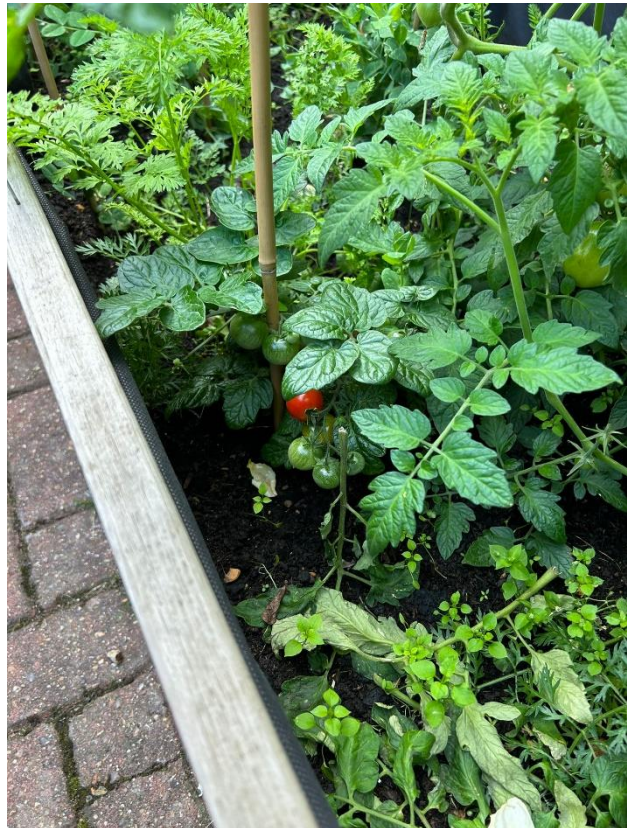
It aligns with the Greener NHS Programme and the NEL Green Plan.

**This toolkit should be considered as inspiration and guidance, the needs of different organisations will vary.**

## Why food growing projects in Newham's NHS spaces?

### Benefit of food growing spaces for health

A recent systematic review showed that nature-based interventions are effective for improving mental health outcomes in adults.<sup>1</sup> More specifically the national project Growing Health by Sustain and Garden Organic produced a literature review on: 'The benefits of gardening and food growing for health and wellbeing'. It too found improved mental health in gardeners via social interaction, community cohesion, reduced stress, and reduced reliance on medication. In addition to the mental health impacts, this review found that gardening can increase physical activity and fitness, contribute to healthy weight management, and increase fruit and vegetable consumption. There were also other benefits reported like alleviating agitation in dementia, improvements in pain recovering from surgery and coping with intensive cancer treatments.<sup>2</sup> Another study in the elderly showed a potential for reduced risk of falls in gardeners over 65 years, likely due to improved proprioception and balance.<sup>3</sup>



## Current population health

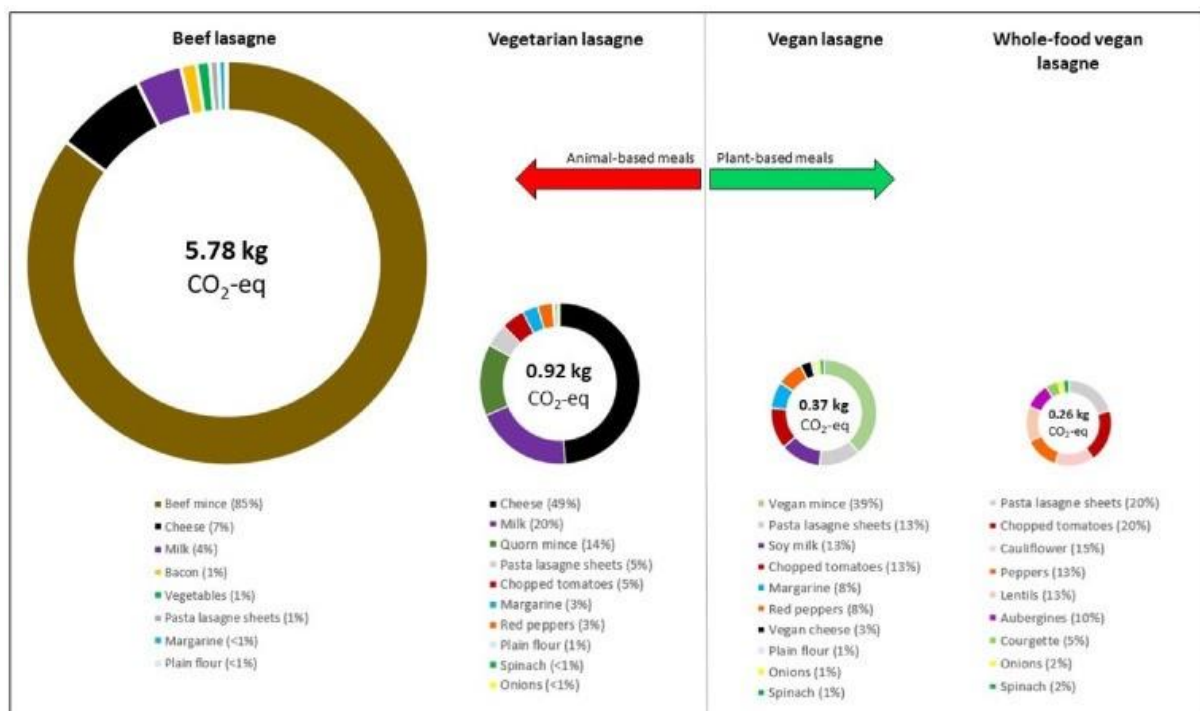
In the UK the current burden of disease lies with preventable illness e.g., diabetes, strokes, heart attacks, high blood pressure and some cancers plus often coexisting high levels of mental health problems. In 2014 a survey of mental wellbeing in England found 1 in 6 people have experienced a common mental health problem in the last one week.<sup>4</sup> A survey of GPs in 2018 estimated 40% of consultations to be mental health related.<sup>5</sup> These numbers have only increased in the last few years.

Newham has 27,500 people living with type 2 diabetes plus 8,000 are considered pre-diabetic and almost 80% of those with diabetes are overweight or obese.<sup>6</sup> The most recent mental health statistics for Newham state that 17.9% of adults self-report anxiety, 8.3% low happiness and 27.4% feel lonely some to all of the time. Depression rates amongst social care users is 58.4%.<sup>7</sup>

## Why diet is crucial

Poor diet has been found to be the behavioural risk factor that impacts the NHS the greatest – that is higher than: smoking, alcohol and physical inactivity. It is estimated that diet-related ill health is estimated to cost the NHS and wider society £5.1 billion per year.<sup>8</sup> Our unhealthy diets are not only making us unwell but also carry a much larger carbon footprint than a healthy diet.

Broadly a sustainable diet is plant-heavy and low in animal sourced food, low in added sugar, low salt, low in saturated fat, reduced refined grains and processing. In the last dietary survey in the UK the average adult vegetable/fruit consumption per day was 3.7 portions.<sup>9</sup>



## Green Social Prescribing

Green social prescribing is a way of redefining some of the environmental determinants of our health. By making connections with nature and people, cultivating green spaces in a community, giving time to look after and notice nature, developing new skills and knowledge and thinking about where our food comes from. This also hopefully leads to consideration of which foods are best both for our health and the planet.

A recent report by Health Care Without Harm, Growing food, growing healthy communities<sup>10</sup>, reports that community gardens provide positive social experiences that improve social cohesion, sense of community, and may also empower people to grow their own food so that they can enjoy fresh, local and nutritious foods. Studies show that reduced access to green space is linked to feelings of loneliness and a perceived shortage of social support. More cohesive neighbourhoods tend to be greener and have better quality green spaces. There is also some evidence that the provision of new green spaces in disadvantaged neighbourhoods can reduce crime. Areas with green spaces are also associated with significantly less income-related health inequality.



*Star Lane Medical Centre, Newham*

## Barriers

What better way to connect with our health and the planet than to grow food. Unfortunately, in very urban communities green space is limited and particularly private gardening spaces and this is especially true in less affluent communities. A report in 2019 by Capital Growth and supported by the Mayor's office explored the barriers to community gardens access via social prescribing. Some of these barriers included limited referrals, low visibility, and a lack of clarity/confidence about what sort of support gardeners would need.<sup>11</sup>

## Opportunities

This toolkit aims to help bring food growing into the grounds of healthcare centres. By having food-growing sites on the grounds of healthcare settings it raises the profile, bringing it to the forefront of both the staff and visitors minds and can act as a platform to prepare volunteers for other community gardening projects. It hopefully also brings green and blue social prescribing more generally into the consciousness of health professionals.

Increasing access to gardens and food growing spaces aligns with what the community wants. A recent survey on the state of local authority allotment services finds almost 87% of the local councils surveyed have experienced a noticeable increase in demand for allotment plots. As of June 2023, There were a total of 111,566 people on a waiting list for one of the 120,000 council plots across the country<sup>12</sup>.

Successful initiatives are already underway in East London. For example, with the support from a Nature Recovery Ranger, Homerton Hospital transformed an outside space into a community garden, including a food growing space, for patient support groups such as a Diabetes group. You can read more [here](#).



**#30DaysWild** NHS 75 The Wildlife Trusts

### Nature recovery ranger

NHS NEL ICB funded one Nature Recover Role at Homerton Hospital from November 2022 to April 2023.

They worked in conjunction with our GLA Greener Resilience Spaces funding bid and made a great impact in addition to the co-production exercises they undertook to feed into the Homerton Green Corridor Masterplan designs.

Time and expertise was deftly applied to create a sensory rest garden, a food growing patch and to set up staff volunteering and nature based interventions for patients.

The garden provided space for patient support groups such as the Diabetes Group to meet in an active and natural space rather than being sedentary in an indoor meeting room.

#GreenerNHS

## NHS care and climate change

The NHS carbon footprint (25 megatonnes of carbon dioxide equivalent) makes up 4-5% of the national UK footprint.<sup>13</sup> For context that is a bit more than Heathrow airport's total emissions, pre-pandemic, including all departure flights.<sup>14</sup> The NHS footprint is via medicines, medical equipment, transport, waste and estates, to name but a few. One consult with a GP (including travel) is estimated to cost 9.9kg of carbon dioxide

equivalent (29 miles in an average petrol car)<sup>15</sup>. The demand and activity of our health service is increasing, you can see this in hospital waiting lists and A&E wait times.<sup>16</sup> Simultaneously we also face a climate and ecological crisis. The NHS is not only contributing to this, but it will in turn increase the demand on the health services e.g. via extreme heat and storms, movement of people, flooding, infectious diseases and food and water shortages.

Major new research from the Health Foundation has found that 9.1 million people in England are projected to be living with major illness by 2040 – 2.5 million more than in 2019<sup>17</sup>.

The Lancet countdown on health and climate states: Climate change is the greatest global health threat facing the world in the 21<sup>st</sup> century, but it is also the greatest opportunity to redefine the social and environmental determinants of health<sup>13</sup>.

Mapping how many gardens we have in NEL Healthcare spaces and how many grey spaces that have potential to be Green is an action in the [ICS Green Plan](#)<sup>18</sup>.

## Set up of garden space

**If you are considering setting up a garden in Newham – whether at a health centre, school, or elsewhere - support is available through Newham Council! If you are considering setting up a garden and want to chat, please contact the Food Team at Newham:**

- [SMARTFood@newham.gov.uk](mailto:SMARTFood@newham.gov.uk)

If you are not based in Newham Council, the information below will likely still be of relevance to you.

### Selecting a space

Often there is not a lot of space to choose from when deciding where to put a garden. You could probably make any space work, but there are a few things to keep in mind to make the journey easier:

- Sun: South facing gardens get the most sun, which helps the plants in our climate. North-facing gardens get the least sun, and can be more challenging to grow in
- Access to water: In the warmer months, the garden will need watering. Can you grow in a space with access to running water?
- Social space: If you want to use the garden to engage with the community, could it be visible from the pick-up area, so you can engage with parents?
- Protected from a busy road: Being by a busy road is stressful, and also bad for the garden. Air pollution from busy roads can contaminate soil and plants, so make sure there is good protection (a thick hedge or a wall) between your garden and busy roads.



- Keep in mind future plans for the practice, you may need to check with the Landlord.
- You can consider the flood and overheating risks for anywhere in London by using this tool: [London Climate Risk Maps \(arcgis.com\)](https://arcgis.com)

*Make sure to engage with your colleagues and anyone else who will support you in running the garden when choosing a space.*

## Designing the space

We have detailed two options for how to design and use the space, raised beds and food forests.

### a) Raised beds

Raised beds are a great option for converting a concrete space to a growing space. We recommend using raised beds for a variety of reasons in healthcare settings.

- Accessibility for all patients of varied age and physical mobility
- Reduced risk of contamination of soil
- They can be moved

You could buy metal raised beds that will last for decades, or you could build some from wood relatively easily from easily accessible materials.

For example, you can build raised beds from wooden pallets or scaffolding boards.

- This [video](#) explains how to build raised beds from wooden pallets

Once the beds are built, you will need to add compost every year to keep growing plants.

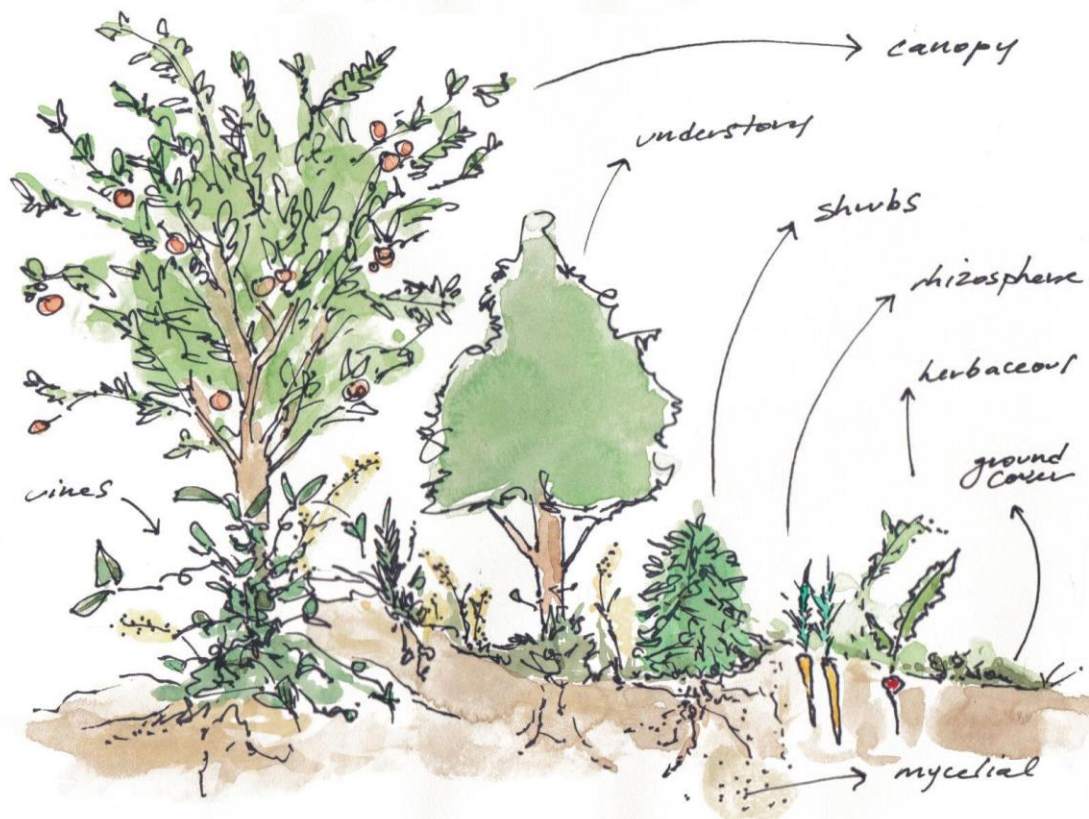
Money Saving Tip: Instead of filling the whole raised bed with soil, a cheaper way is to add a few layers of leaves, twigs, and other organic matter to the bottom of the raised bed. Then add soil on top. While your plants grow in the top layer of soil, the bottom layer will gradually break down and feed the soil. This will also help the raised bed retain moisture.

### b) Food Forest

A food forest is a growing method where you select perennial, food producing plants (trees and bushes) and grow them alongside each other in a way that mimics a forest ecosystem. If planned well, you can fit lots of productive plants together in quite a small space.



# THE FOOD FOREST



Many local growers focus on gardening with annuals - plants that die at the end of each season and need to be replanted each year. Lots of food we love to eat are annuals, but they are often higher maintenance and more time consuming to grow than perennials.

For the first couple of years, trees need care. Particularly watering if it's a hot, dry summer! But as time goes on, a food forest should need less and less maintenance each year, and produce more and more food each year. Once an apple tree is established, it grows an abundance of apples without too much work.

There are some key things to consider when planning for a food forest. Things like:

- The best specie to plant in your area
- What rootstock suits your soil
- How will you care for the trees in the early years
- How to avoid planting species that could cause allergies Lots of schools are thinking about how to connect children with nature.

Planting food trees is the perfect way to combine food growing, connection to nature, biodiversity, climate action, and creating peaceful and beautiful spots in the community. Is there a space in practice that needs a bit of love? If you want to grow a food forest and need some support, we'd love to help. Please contact Patrick Vickers on the Food Strategy team at [patrick.vickers@newham.gov.uk](mailto:patrick.vickers@newham.gov.uk)

# Logistics

## The planting calendar

There are lots of useful resources out there to help you decide what to plant and when. We have gathered a few good ones below. You should use these as guidelines, rather than fixed rules, because local conditions (your microclimate) can vary. If you can, ask a local gardener that has worked for them. For example, is there a community garden near you that you could call?

- The Royal Horticultural Society - Crop Planner ([download link](#))
- Love The Garden - [Veg planting calendar](#)

If you are stuck or unsure, just give it a go! There are no failures in gardening - only lessons.

## Supplies and storage

Seeds - garden centres may offer free seeds to community organisations, so it may be worth calling your local one to ask.

Tools - Spades, garden forks, trowels, watering cans, gloves, and other equipment is necessary for gardening. Tools should be stored in a dry place to help them last longer.

Soil - you may need a soil delivery to start off your garden. Compost can be bought by the tonne, or in smaller bags. When bought by the tonne it is cheaper, but you need a wheelbarrow and a team of active volunteers to move the soil.

- Supplies - Appendix I shows an example resource list for a garden set-up. Each project is different, and this is just an indicative example, but it may help give you some ideas.

## Recruitment

### *Eligible Patients*

According to the UK Census 2020 51% of over 55 year olds enjoy gardening. The 2020-21 England's People and Nature survey<sup>19</sup> reported 94% of adults felt that spending time outdoors is good for physical health and 92% for mental health. As highlighted by the evidence in the introduction gardening and growing food is beneficial to all. As this activity is out in the open, for all to see, if a specific group was targeted then there may be confidentiality issues.

For these reasons we wouldn't recommend targeting a specific cohort of patients but rather offering it to all and to staff. Having said this, a mixed cohort of high practice attenders for a range of reasons may be appropriate. This has been an approach taken by other practices offering gardening-in-health projects.

### *How to engage with people and get your garden used*

*One key thing to remember is there is huge unmet demand for food growing in Newham. There is a very long waiting list for allotments, so any additional food growing space will be well received.*

### *How to approach / recruit patients to gardening programme*

*Promote the gardening space or programme throughout your practice via*

- *A dedicated noticeboard at your site to the garden with news, pictures and details of how to get involved and promoting the benefits of gardening*
- *Posters in clinic rooms and waiting areas*
- *Texts.*

Social prescribers can engage all staff in the programme and recommend the programme to patients. It can then be mentioned at health reviews, GP appointments, medication reviews etc. You can use any patient contact to promote the garden and its benefits.

### **Garden leadership and food growing sessions**

There are many options for Garden Leadership including: staff led, coproduction/patient led or employing a therapeutic gardener

Gardens in healthcare settings will need close supervision. Given practice staff are often working at full capacity, a paid therapeutic gardener is recommended and can include coproduction and staff involvement depending on the group.

### **Case study**

*The Lambeth GP Food Coop is an example of a well established and successful food growing group. They have multiple gardens across Lambeth. They run one three hour session a week at each garden, for patients run by a qualified gardener. The staff at each site then have a rota for the remaining watering/care. (Rough cost of therapeutic gardener - £25/hr).*

Without a paid gardener you may find the following helpful to consider:

- What does the gardening programme look like and involve?
- Toolkits for patients (e.g., instructions, resources) to limit amount of staff time required
- Patient and staff expectations/responsibilities for groups
- Staff requirements (qualifications, time commitments, etc)

## Capacity and demand considerations - management mechanism

There are likely to be two sides to this equation. The first is the number of volunteers who may have health or family issues vying for time but who want to see barriers to participation removed, and secondly there could also be a question of popularity and ensuring that everyone gets a chance to contribute to the success of the garden. Research shows that community gardens build mutual support mechanisms, community and cooperation networks, therefore facilitated co-production may be required. What equipment is needed so that people with physical limitations can join in? Can hearing impaired people follow outside where speech is more difficult to follow - a common issue for older residents. Having a steering group that plans activity throughout the year, with tasks allocated and celebrated will ensure everyone plays a part in the success, and there will be ways to identify people's skills, all vital to its success. Not everyone can dig a vegetable patch but some people may be very adept at organising meetings, or researching the internet ahead of a group meeting.

### Safeguarding and governance suggestions:

- Make the premises liability insurers aware of gardening activity
- Make sure any staff e.g. therapeutic gardeners are DBS checked
- Gardening session always require a member of staff present
- Make participants aware before starting of any garden rules/code of conduct via text/leaflet (See appendix)

## Measurement

Measuring changes before and after your gardening intervention is important for understanding the impact that your project has on your patient group and practice.

To evaluate the full impact of such programmes, the [Sustainability in Quality Improvement \(SusQI\)](#) approach may be of value. SusQI aims to improve healthcare and measure impact in a holistic way, by assessing quality and value through the lens of a ["triple bottom line"](#).

$$\text{Sustainable value} = \frac{\text{Outcomes for patients and populations}}{\text{Environmental + social + financial impacts (the 'triple bottom line')}}$$

In SusQI, the health outcomes of a service are measured against its environmental, social and economic costs and impacts to determine its "sustainable value". SusQI embeds the [CSH principles of sustainable clinical practice](#): prevention, patient empowerment and self-care, lean clinical pathways and low-carbon alternatives. Prevention is the most sustainable form of healthcare we can offer, as it prevents

patients from needing care and additional appointments, testing and interventions in the first place. Garden projects aim to empower patients to improve or prevent illness.

Currently, there is broader evidence linking engagement of green space to health and environmental benefits. However, there is limited information available on how specific green space or garden projects within GP practices impact staff, the GP practice financially, or the environmental impact of care.

Measurement in the short-medium term / individual practices

Below are considerations for how to measure the impact of your gardening/food growing group across the triple bottom line of sustainable value. As there will likely be several considerations for how best to collect and capture this data, data collection plans would ideally be considered and put in place before food growing sessions commence. However, depending on your systems and data captured, you may be able to collect data retrospectively at a later stage.

Creating spaces for biodiversity can be reported as part of the [Green Impact for Health Toolkit](#).

## Clinical measurement and impact

Taking part in food growing and gardening has been shown to increase fruit and vegetable consumption.<sup>1</sup> Encouraging and enabling people to eat more fruit and vegetables is a key step towards the 'planetary health diet' - an optimal diet for the health of people and planet, based on The EAT-Lancet Commission on Food, Planet, Health.<sup>2</sup>

Record the number of people engaged in the garden and time committed. You may also like to record length of time of engagement, or rates of repeat sign ups for programmes of specific lengths.

We recommend speaking with your practice or PCN managers to identify the best ways to capture patient data. You may consider collecting data on the below factors for 6-12 months before engagement with your gardening / food growing service and 6-12 months after.

- Number of appointments
  - With engagement in your group and improved well-being, patients may not require as many GP attendances. Ensure you eliminate appointments for other causes from your review (e.g. an attendance for an ear infection).
- Prescriptions and medication doses
  - Patients with improved well-being may require less medications, or be able to reduce dosage of medications.
  - Weight, blood pressure , HBA1C, cholesterol -

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<sup>1</sup> [Community Gardening Increases Vegetable Intake and Seasonal Eating From Baseline to Harvest: Results from a Mixed Methods Randomized Controlled Trial](#)

<sup>2</sup> [The Planetary Health Diet](#)

- Please note: We are not advocating for additional testing / patient GP contacts in order to measure this, however to capture data from reviews already planned for the patient.
- Wellbeing measurements eg PHQ-9 scores or Warwick-Edinburgh Mental Wellbeing Scales (Register to use: [How to use WEMWBS \(warwick.ac.uk\)](https://www.warwick.ac.uk))
- If you have more time and access to the data, you may consider counting A&E attendances and hospital admissions.
- Dietary changes - this is hard to capture and may be long term - even generational but a quick snapshot measure could be how many pieces of fruit/veg people (think) they are eating a day.
- There may also be rehabilitative approaches to mobility or prevention of deconditioning prior to surgery that will be of benefit to patients..

## Social measurement and impact

There are many ways to evaluate social impacts of food growing and gardening groups on patients, communities and staff. For example:

- Loneliness / connection with others
- Education on fresh foods, diet, benefits of green spaces
- Practical skills development to grow foods
- Sense of accomplishment at new knowledge and skills with ability to share/teach others
- Sense of agency / empowerment.
- Patient activation is a measure of a person's knowledge, skills and confidence to manage their own health and wellbeing, and is a core enabler for supporting self-management and personalising care. You may want to consider the use of patient activation measures<sup>21</sup> however this may require staff training. You can contact [england.patientactivation@nhs.net](mailto:england.patientactivation@nhs.net) for further information.

*We recommend speaking with your social prescribing and/or health and wellbeing coach teams, who may have standard measures they use with patients that are applicable to use in food growing and gardening groups. They will also be able to support you in identifying or developing suitable assessment tools for capturing social impacts of your project.*

## Environmental measurement and impact.

### a) Environmental benefits of gardening spaces

Urban gardens support climate and environmental action in a handful of ways, by having a positive impact on air pollution, noise pollution, heat and contributing to flooding protection. In urban areas, the average tree canopy cover is around 16% but

can be as low as 2%. It is in the NEL Green Plan to map how many gardens we have in NEL Healthcare spaces and how many grey spaces that have potential to be Green.

### *b) Carbon Footprinting*

A carbon footprint is the sum of greenhouse gas (GHG) emissions attributable to a given process. Six different types of gases are commonly included; as each has a different global warming potential, the quantities are expressed in “carbon dioxide equivalents” (CO<sub>2</sub>e).

Urban food gardens can also have a direct impact on emissions. A study aimed to estimate impact of urban agriculture on greenhouse gas emissions. By examining a community garden in Sutton, they found that urban agriculture can reduce greenhouse gas emissions more than other conventional uses of urban green spaces, such as parks.<sup>3</sup>

The impact of a project, such as a gardening and food growing group, on the NHS carbon footprint can be estimated by converting data on services, consultations, hospital admissions, travel and other activities into kilograms of CO<sub>2</sub>e. If your food growing and gardening group leads to a reduction in healthcare activity (e.g. appointments and medications), this will contribute to reducing carbon footprint. You will already be capturing this information to measure your patient health / clinical impact. You may also like to consider patient and staff travel if this will change based on your gardening/food growing group.

Why carbon?

Carbon is used to measure our journey to environmental sustainability, even though lots of activities don't strictly emit carbon dioxide they are measured as carbon equivalents. You can learn more about this in our [dedicated learning page](#) for primary care professionals in north east London (NEL).

The national Greener NHS programme is measuring the NHS's journey to net zero using carbon. You can see what makes up the carbon footprint of NEL and what we are doing to reduce it in the [NEL Integrated Care Service \(ICS\) Green Plan](#).

While some aspects of care will have specific impacts (e.g. medication contributing to water pollution), **all** NHS items and activity produce CO<sub>2</sub>e. Therefore, the impact of projects looking at very different areas of care (e.g. medications vs. single use plastics) can be compared and the areas offering the biggest impact and savings identified.

How to calculate CO<sub>2</sub>e

You do not need to carbon footprint entire services - only the parts of the service that have changed based on your intervention. For further information on how to carbon footprint, and for up to date emission factors, please see the carbon footprinting guide downloadable on the SusQI website, [measuring impact](#).

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<sup>3</sup> [Reducing greenhouse gas emissions with urban agriculture: A Life Cycle Assessment perspective](#)

## Financial impacts

- Reduction in resource use (e.g., GP appointments, medications)
- Sustaining garden, e.g. selling produce.

## Funding and approval - There is money out there!

Each potential funder will be different, so it is important to always review the specific criteria and requirements. Potential organisations to consider approaching may include:

- Individual practice
- Primary Care Network
- Lottery funding (e.g. Awards for all)
- Health/mental health related charity funding
- Community Links
- Local council
- NHC GP federation
- Private healthcare providers
- Community crowdfunding
- The National Academy for Social Prescribing may share opportunities for funding and has further information about Commissioning and Collaboration in their Green Social Prescribing Report.<sup>19</sup>

Before applying for funding, it is useful to be clear about the following points, as advised by [Compost London](#) and Laura Brown, Natural England Regional Health Advisor - London:

- *The evidence base and potential benefits of your project:*
  - The evidence highlighted in the introduction of this toolkit can be extracted to support funding bids.
- *Who will be leading on the application and what's their status (charity, CIC, NHS Trust, etc)?*
  - MDT and/or cross institutional representation may strengthen your application.
- *Who is the project intended to reach?*
  - A wide range of patient groups could be eligible and benefit from food growing groups. Please see the patient recruitment section for a summary of recommendations for patient engagement.
- *How will the project work?*
  - You will require an outline of how your project will run.
  - Some funders also need to see additional information, such as project gantt charts/plans and risk registers



- longevity of the project - keep in mind future plans/redevelopment for the practice
- *What outcomes is your project meant to produce?*
  - We recommend considering measurement of clinical outcomes along with social, environmental and financial outcomes (the triple bottom line). Please see the measurement section for more information.
  - External funders (e.g. Lottery) may also require monitoring and evaluation to include reflections from beneficiaries and/or project leads and clinicians.
- *How much money are you looking for? Consider what you need funding to cover, which may include:*
  - Time from existing staff: to cover planning, creation of the garden, patient recruitment and implementation of patient groups, and data collection for measurement and evaluation of the project.
  - Recruitment of new staff: If your current staff do not have capacity or the appropriate skill set for any aspect of the project you may require funding for training and/or recruitment to new posts] . For example, you may need to hire a horticultural therapist/similar to run sessions.
  - Resources needed for the garden: Table 1 in the appendix is an example of items that may be required with an average cost.

## **Seasonal considerations**

### **Winter engagement**

A key issue for a community gardening project will be to maintain engagement during the winter months when the weather may be less than welcoming and people may feel less inclined to be outdoors, or they may feel concerned about the impact on their health. However, there are still positive physical and mental health benefits year-round associated with this kind of activity and although the growing season may be in low gear there are plenty of things a well-planned group can be doing to maintain interest and enthusiasm for people with all levels of ability.

### **Planning**

One of the most exciting things that a group can be doing during the winter months is planning for those first spring plantings that will bring early rewards. The first seedlings vegetable can be propagated early in the new year on windowsills, examples include tomatoes, peppers, cucumbers and the first potatoes will go into the ground in March ready to be lifted in late June through to August. Who will do the propagating? Who will prepare the ground? Is anyone able and willing to build planters and containers, perhaps recycling or upcycling donated materials for these. You can even use old newspapers to make plant pots for cuttings and potting up ([20+ Winter Gardening Ideas for the Vegetable Garden • Lovely Greens](#))

Some garden projects will have planted winter crops during the autumn that are ready to be harvested in the depths of winter. Things like kales, beetroots and so on. These

make delicious winter stews which can be served to hungry project workers as a reward for their hard work.

Less energetic team members might want to take on the equally important role of pot and tool cleaning. Plant bacteria, viruses and fungi can cause crop loss, and no one wants to see wilting tomato plants or potato blight, both of which can be susceptible to disease from recycled soil and pots. Learning about these diseases has a social purpose as well because we learn about some of the migrations in history driven by these outbreaks, like the Irish potato famine for example.

## **Collaborations**

Winter is an opportunity to engage with other community gardens, learn what they are doing, share their successes and challenges and use that learning to inform your own plans going forward.

### *Taking learning home*

Not everyone has a garden but many of us can grow a few seedlings by our windows in the winter and then, as the weather becomes warmer, find a small space outside our door or on a balcony to put a grow bag or repurpose a container of some kind to grow the plant to maturity so that we have fresh food or something beautiful to look at, and then collect the seeds to start again in the next winter cycle.

### *Learning elsewhere*

Winter is also a time to maintain enthusiasm by visiting formal gardening projects. Many of the big ones, like Kew or the RHS, have community projects and workshops throughout the darker months which extend your knowledge and stoke your enthusiasm. Funding could be sought for group members to access these sessions to perhaps kickstart a project the group might wish to develop themselves.

### *Celebrating*

The winter is also a time to plan how you might celebrate the work of your group during the abundance of the summer. It's very unlikely everything you try to grow will fail so there should be plenty to celebrate. The group might want to spend some of the dark months planning a community event that passes along some of their learning to wider locality, perhaps tie in with other events in the area. You might link in with cooking groups, sustainable living groups, healthy living groups. By giving yourself six months to plan a party you stand a good chance of having a good event that people will come to, and hopefully engage new people in food growing.

Additional conversations beyond gardening in the practice:

- Promoting available cooking demonstrations and local/online courses e.g. [Bags of Taste - Newham](#)
- Further information on health and sustainable eating eg: [Can healthy food save the planet? - EAT \(eatforum.org\)](#)  
[How the humble bean can help the world - BBC Ideas](#)
- Conversations/actions around food waste - [Food Waste Action Week | WRAP](#)

- Taking gardening home eg window boxes, converting grey space.

## Further resources

Use NASP green social prescribing toolkit as a planning resource - [Green Social Prescribing - National Academy for Social Prescribing | NASP \(socialprescribingacademy.org.uk\)](https://socialprescribingacademy.org.uk)

Newham Council have developed the [‘We Are Growing’ toolkit](#). Although this was primarily developed for schools, it contains useful information for anyone who wants to grow more food.

### [Home - NHS Forest](#)

You can apply for or donate trees to help absorb carbon and increase nature on the NHS estate.

## Appendices

### Appendix 1:

Table 1: example resource list and cost for Garden set up. Every project requirement will be different and this is an illustration only.

Item	Description	Cost
Large polycarbonate greenhouse	This investment creates a longer growing season (as plants can be started earlier in the year) and means garden clubs won't be rained off, as there is an indoor space to be. One suitable option costs this amount.	£2,631
Irrigation system installation	Estimate - still waiting for quotes	£2,000
Water harvesting materials	4x 250L	£400
Large raised beds	These metallic raised beds figure is for 20 beds at £234 each	£4,680
Soil	25 large bags of soil to fill all the new raised beds, and top up next year.	£2,675
Wooden shed	Cost from this website	£800
Wheelbarrows	Two large wheelbarrows at £128 each	£256
Large triple compost bay	Cost is for this compost system. Aim is to have a compost system productive enough to not need to buy in soil after the first two growing seasons	£596
Garden tool set	20x garden tool set at £15 each	£300
Garden spades	20 spades at £29 each	£580

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