



DRAFT

Framework for Shared Measurement

**An evaluation guide for
Incubator Farm Projects**

Developed by the National Incubator Farm Training Initiative (NIFTI)
Published by the New Entry Sustainable Farming Project (New Entry)

FARMER SURVEY

To be completed by
Incubator Farm Project Participants

Note for Pilot

If administering in person with farmers, please note areas where there appears to be confusion or additional questions are necessary.

Please explain to your farmers in advance of administering this survey that we are refining the tool and welcome *desperately desire* their feedback on the survey experience!



Connections

Mentors

1. Rate your level of satisfaction with the amount of mentorship and on the ground technical assistance provided by the Incubator Farm staff:

- Very** **Somewhat** **Not At All**

2. Are you connected with a mentor independent of the Incubator Farm?

- Yes** **No**

3. Approximately how many hours of consultation and technical assistance did you receive from your mentor(s) in the previous season? _____

4. In which areas did you receive mentorship?

- | | |
|---|---|
| <input type="radio"/> Business Planning | <input type="radio"/> Crop Production |
| <input type="radio"/> Marketing | <input type="radio"/> Livestock Production |
| <input type="radio"/> Farm Management | <input type="radio"/> Environmental Issues (water, soil, air, wildlife) |
| <input type="radio"/> Financial Planning | <input type="radio"/> Pest Management |
| <input type="radio"/> Equipment Selection and Maintenance | <input type="radio"/> Fertilizer and Pesticide Use |
| <input type="radio"/> Equipment Operation | <input type="radio"/> Other _____ |
| <input type="radio"/> Organic Production | |

5. Rate the overall usefulness of your mentorship experience.

- Very** **Somewhat** **Not At All**

Lenders

6. Have you been in contact with lenders about developing your future farm business?

- Yes** **No**

7. Did this contact result in receipt of approved financing?

- Yes In Process No No, but I plan to apply

Markets

8. Where do you sell your products?

- | | |
|---|---|
| <input type="radio"/> Grocery/food stores
How many accounts? | <input type="radio"/> Emergency Food Assistance
Outlets such as food banks or
pantries [include sales only, not
donations]
How many accounts? |
| <input type="radio"/> Restaurants and Caterers
How many accounts? | <input type="radio"/> Processors
How many processors? |
| <input type="radio"/> Institutional Food Service [Schools,
Colleges and Universities, Hospitals,
Nursing Homes, Government, etc.]
How many accounts? | <input type="radio"/> Distributors
How many distributors? |
| <input type="radio"/> Direct Retail [CSA, Food Box
Program, Farmer's Market, Mobile
Market, Own Retail Site, Online,
etc.]
How many accounts? | <input type="radio"/> Other |

11a. What are your top three most important market outlets?

- 1.
- 2.
- 3.

11b. Why are these market outlets important to you?

1. _____
2. _____
3. _____

12. Do you feel that you have access to adequate market opportunities?

- Yes No

13. What additional market channels are you interested in developing?

Community Partnerships and Support

14. Please select the organizations with which you work in order to develop and/or run your farm business:

- Ag Service Providers
- Land Access and Preservation Organizations
- Foundations and Alternative Financing Partners
- Town Officials
- Licensed Professionals [realtor, lawyer, developer]
- Others

15. Please briefly describe your partnership with the organizations you selected.



Resources

Bank Account

16. Do you have a separate bank account for your farm business?

- Yes No I Don't Know

Financing

17. Do you feel prepared to access the financing necessary to transition your farm business off of the incubator?

- Yes No I Don't Know

18. What additional skills and information will help you obtain the financing necessary to transition your farm business off of the incubator?

Value-added

19. During the previous season, did you produce value-added products?

- Yes I Plan To No

20. Are you connected to a place where you can produce value added products?

- Yes No I Don't Know

21. Rate your level of familiarity with the regulatory requirements for value-added food processing.

- High Medium Low I Don't Know



Farm Documents

Enterprise Budgets

22. Have you created an enterprise budget since enrolling in the Incubator Project?

- Yes No I Don't Know

23. Rate your level of comfort in using an enterprise budget to make product pricing decisions.

- High Medium Low I Don't Do This

Business Plan

24. Which elements of a business plan have you completed?

- Executive Summary
- Business Description
- Production Plan
- Marketing Plan
- Legal Structure & Management Team
- Financial Summary

25. Rate your level of satisfaction with each element of your business plan.

	High	Medium	Low	I Don't Have This
Executive Summary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Business Description	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Production Plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marketing Plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Legal Structure & Management Team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Summary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

26. How often do you review and update your business plan?

Financial Statements

27. Please select the Financial Statements that you currently use:

- Balance Sheet [shows assets, liabilities]
- Income Statement [shows revenues, expenses, gains and losses over a period of time]
- Statement of Cash Flows [shows changes in cash flow over a period of time]

28. Rate your level of ability with each financial statement:

	High	Medium	Low	I Don't Do This	
Balance Sheet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income Statement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Statement of Cash Flows	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. How important are each of the following financial Statements to your farm management?

	High	Medium	Low	I Don't Do This	
Balance Sheet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income Statement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Statement of Cash Flows	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Tax Returns

30. Was your farm business active during the previous season?

- Yes** **No**

31. If yes, did you file business taxes?

- Yes** **No** **I Don't Know**

Land Search

32. How confident are you with your ability to complete the following:

	High	Medium	Low	I Don't Have This	
List of Capital Needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Land Search Plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Farm Lease from a Template	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Skills

33. Rate your level of ability with:

	High	Medium	Low	I Don't Do This
Bookkeeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Systematic Recordkeeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crop Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If you raise livestock (if not leave blank):				
Grazing Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Articulating Land Needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessing Farmland as a Potential Site for Your Farm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

34. How important is each of the following skills to your farm management?

	High	Medium	Low	I Don't Do This
Bookkeeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Systematic Recordkeeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crop Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If you raise livestock (if not leave blank):				
Grazing Planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

35. What additional skills are you interested in developing during your time on the incubator?

36. What additional support would you like to receive from the Incubator Farm Project?

37. What additional support would you like to receive from Community Partners?

Pilot Analysis: Please reflect on your experience completing this survey, and remark on the following categories:

1. Length

2. Clarity

3. Usefulness for reflecting on overall Incubator Training Experience

4. Usefulness for reflecting on specific skills

5. Usefulness for articulating training needs

6. What should be added?

7. What should be removed?

8. Additional Feedback:

INCUBATOR FARM PROJECT REPORT

To be completed by
Incubator Farm Project Staff after collection
and analysis of Farmer Surveys

Note for Pilot

We aim for this tool to collect and report on meaningful core metrics related to farmer success. We hope that reporting on these metrics will be simple and accurate, but promote reflection on program strengths and challenges. This is our best guess; it is by no means set in stone. Please complete this section with a mind for how it can be changed and improved!

Incubator Farm Project Report

Instructions:

Assign the following values to responses:

	Very		Somewhat		Not At All						
	0		0		0						
	5		4		2						
	High		Medium		Low		I Don't Do This				
	0		0		0		0				
	6		5		4		3		2		1

Total the selections, and divide by number of responses. Indicate the number average in the questions below.

The ten questions in **orange** require use of shared metrics for accurate reporting.

Connections

Mentor

1. On average, how satisfied are your farmers with the amount of mentorship and on the ground technical assistance provided by Incubator Farm staff? [Q1]
2. Do you connect farmers to mentorship opportunities independent of the Incubator Farm?
3. On average, how useful were farmers' mentorship experiences? [Q5]

Lender

4. Does your Incubator Farm Project link farmers to lenders?
5. What percentage of your farmers received approved financing in the previous season?

Buyer

6. How many distinct markets do your farmers access?
7. Overall, do your farmers feel that they have access to adequate market opportunities? [Q12]

8. What additional market channels are your farmers interested in developing?

Community Partnerships

9. What community partnerships are most valuable to your farmers?

10. What relationship does your Incubator Farm Project have with these organizations/individuals?

Resources

Bank Account

11. What percentage of your farmers has a separate bank account for their farm business?

Financing

12. What percentage of your farmers feels prepared to access the financing necessary to transition their farm business off of the incubator? [Q17]

Value Added

13. During the past season, what percentage of your farmers produced value-added products?

14. What percentage of your farmers has connections to a place where they can produce value-added products?

15. On average, how familiar are your farmers with the regulatory requirements for value-added food processing? [Q21]

Farm Documents

Enterprise Budgets

16. What percentage of your farmers has created an enterprise budget since enrolling in the Incubator Farm Project?

17. On average, how comfortable are your farmers using an enterprise budget to make pricing decisions? [Q23]

Business Plan

18. On average, what level of ability do your farmers possess with each aspect of a business plan? [Q25]

Executive Summary

Business Description

Production Plan

Marketing Plan

Legal Structure & Management Team

Financial Summary

Financial Statements

19. On average, what level of ability to do your farmers possess with each financial statement? [Q28]

Balance Sheet

Statement of Cash Flows

Income Statement

20. On average, how important are each of the following financial statements to your farmers? [Q29]

Balance Sheet

Income Statement

Statement of Cash Flows

Tax Returns

21. What percentage of your farmers who were farming last season filed business taxes for that season?

Land Search

22. On average, how confident are your farmers with their ability to complete the following? [Q32]

List of Capital Needs

Land Search Plan

Farm Lease from a Template

Skills

23. On average, what level of ability do your farmers possess with the following skills? [Q33]

Bookkeeping

Systematic Recordkeeping

Crop Planning

Grazing Planning [if farmers do not raise livestock, answer N/A]

Articulating Land Needs

Assessing Farmland as a Potential Site for their Farm

24. On average, how important is each of the following skills to your farmers' farm management? [Q34]

Bookkeeping

Systematic Recordkeeping

Crop Planning

Grazing Planning [if farmers do not raise livestock, answer N/A]

25. What additional skills are your farmers interested in developing during your time on the incubator?

26. What additional support would your farmers like to receive from the Incubator Farm Project?

27. What additional support would your farmers like to receive from Community Partners?

Reflection

Do you feel that your farmers will have the connections, resources, documents and skills necessary to identify and secure appropriate land and operate an independent farm business upon graduation from you program?

Based on the information gathered to complete this report, which areas of your program do you feel are particularly strong?

Which areas need improvement?

What are three concrete actions that you can take in the next year to begin to achieve this improvement?

Pilot Analysis: Please reflect on your experience administering this survey, and remark on the following categories:

1. Length

2. Clarity

3. Usefulness for reflecting on overall Incubator Training Experience

4. Usefulness for reflecting on specific skills

5. Usefulness for articulating training needs

6. What should be added?

7. What should be removed?

8. Additional Feedback:
