

Case studies: How have culture and creativity been supporting people in health, care and other institutions during the Covid-19 pandemic?

Project: Vocal Beats

Organisation: Royal Brompton & Harefield NHS Foundation Trust; Royal Marsden NHS Foundation Trust

Region: London and the South East

Designed for: Young inpatients and outpatients living with cancer diagnoses or heart and lung diseases

“Something to aim for, lovely sense of community and belonging, amazing song, people and memories”



Introduction

The Vocal Beats programme provides high-quality participatory music-making to young people being treated at two specialist NHS trusts; Royal Brompton & Harefield NHS Foundation Trust and The Royal Marsden NHS Foundation Trust. Outcomes of the programme, measured through rigorous evaluation and research, include increased musical skills and wellbeing for participants, and reduced loneliness. Vocal beats collaboratively builds capacity for the hospital sector and increases the evidence base for music making as a participatory arts in health intervention. It is delivered by rb&hArts, the arts team for Royal Brompton & Harefield NHS Foundation Trust, and the Arts Offer for The Royal Marsden NHS Foundation Trust.

Vocal Beats is a participatory singing and beatboxing programme for hospitalised young people aged 0-25-years at Royal Brompton & Harefield, and The Royal Marsden NHS Foundation Trust. During Covid-19, musicians have been unable to deliver face to face sessions on hospital wards, but instead found innovative ways to continue connecting with patients both in hospital and in the community.

At RBHT Vocal beats has been collaborating with RB&H Trailblazers – the Trust’s youth forum – to deliver online group music activities for 13–25-year olds. This has included a song-writing course in which participants co-wrote and recorded their own song and music video, along with co-curating live streams and a monthly Album Club.

At RMH work has included a music video project through which inpatients request performances of their favourite songs which the musicians then re-create to a high standard in the form of a personalised music video. Musicians are currently running a weekly group workshop, enabling young people to create their own song and music video to showcase for Global Cancer Week. Individual sessions are also being delivered on weekly basis delivering vocal coaching and instrumental lessons via MS Teams.

Funders

Youth Music, Royal Brompton & Harefield Hospitals Charity, The Royal Marsden Cancer Charity.

Partners

This is a partnership between two NHS Foundation Trusts, jointly funded by the charities of those organisations and Youth Music.

Who is it for?

Young inpatients and outpatients living with cancer diagnoses, inpatients and outpatients living with heart and lung diseases.

Are these people you have worked with before, or new participants?

Both

How many people took/are taking part?

30

Where is it happening?

London and remotely across the South East

For how long has it been happening?

This is an ongoing programme

What were/are the main outputs?

Musicians successfully delivered a 6-week Song-Writing Masterclass with patients aged 13-25 years old resulting in the young people co-writing a song and performing in a music video. A co-produced young people's music event was hosted via videoconference and streamed directly into a closed Facebook group with performances, video premieres and a music quiz. This attracted new interest in other members who have since signed up to other activities such as Monthly Zoom Album Club and 121 Zoom Singing Sessions. An embedded research group of 18-25 year olds began planning a public exhibition of their creative practice.

The musicians are currently working with group of young people to co-produce an original song and film to be shown as part of Global Cancer Week.

What outcomes were/are you aiming for?

Feedback has been encouraging with positive indicators of musical skills development, increased confidence and wellbeing and reduced loneliness in lockdown for both inpatients and outpatients shielding in the community.

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We are also encouraging musicians to continue their own self-reflective practice to evaluate their learning and skills development through working digitally including online facilitation and video production.

Have you adapted existing work to make this happen? If so, how?

Vocal Beats has been running at both trusts since September 2019, addressing the lack of musical opportunities for young people whilst receiving treatment for cancer or heart/lung disease. Previously musicians would visit each site twice weekly to deliver music-making activities at the bedside or in communal spaces such as ward playrooms. We have continued to focus provision specifically for in-patients who face long-term stays/multiple admissions and those transitioning to or in adult services, through-out Covid-19 restrictions and beyond.

We have tested different virtual models of engagement during the past 6-months and have managed to successfully establish a meaningful programme of online music engagement through key collaborations with clinical staff, safeguarding leads and infection prevention and control teams.

Our musicians enthusiastically took on remotely engaging with the young people, delivering courses, special events, workshops and 121 sessions online. One example has been a nursery rhymes request album created during lockdown to support paediatric inpatients in the evenings, with a “launch” engaging the children and their families through a Facebook Live stream.

Does your work support people who identify with one or more of the protected characteristics¹?

We have worked with several young people with both physical and mental disabilities and have found ways to continue creating inclusive creative spaces, both in 121 and group settings. Examples include a visually impaired patient who didn't want to be seen on Zoom so instead received music provision both through voice recordings and over the phone. Another participant was recovering from severe mental health issues and so struggled when joining in group activities; the musicians facilitated workshops in pairs and so were able to ensure the participant had focussed additional support whilst still being subtle in front of the other workshop participants.

Evaluation & Feedback

Musicians gather evaluation data in the form of ArtsObs and reflective journals. Participants co-complete musical skills development tools, loneliness scales and take part in focus groups.

Music development scales are supplied by Youth Music. An embedded doctoral study is being carried out in collaboration with the University of Southampton.

One year into the service evaluations, we have collected 282 cross-site research participants with 282 ArtsObs completed. The ArtsObs have so far been the most successful tool used with statistics developed using SPSS software indicating a significant increase in happiness for patients and parents following music interventions. As of yet, whilst analysis of musical development scores have yet to show statistical significance, meaning before and after scores tend to be very similar, the majority of participants agreed that they were pleased by the level of their musical ability.

ArtsObs also provide strong qualitative data of observed improvement in wellbeing:

“Gillian initially said no to singing in front of everyone, but when I tried to sing back the ideas that she had created for homework she decided to do it instead. It felt really positive to have her engaging and participating on this level”

¹ Protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation (Equalities Act 2010).

“Inspiring – it helped me write my own song”

“Something to aim for, lovely sense of community and belonging, amazing song, people and memories”

“Confidence in a group and in being more creative”

What is your own impression of how it has worked? What have been the challenges and successes for you?

The role of Youth Support Coordinator, who has continued working on-site throughout the pandemic at The Royal Marsden, is crucial in facilitating direct access with young adult inpatients. This has enabled sessions to take place via zoom and MS Teams, personally tailored to meet individual need and group projects. As there are strict safeguarding policies in place for digital engagement it has taken longer than expected to get the programme established, but it now recognised and actively supported by senior members of multidisciplinary teams. We are developing a similar model at Royal Brompton Hospital to be supported by paediatric Play staff.

Engagement with outpatients via the Royal Brompton & Harefield NHS Foundation Trust youth forum RB&H Trailblazers has been successful in creating meaningful social and creative experiences for participants. Feedback has indicated development in musical skills and levels of confidence and wellbeing, with reduction of feelings of loneliness and isolation for those who have taken part. Working online has given us an opportunity to accelerate and improve our digital offer, including our YouTube channel Vocal Beats Online, launched November 2019. However, recruitment remains an ongoing issue with numbers of participants much lower than before the pandemic. Promoting the project requires effectively requires time and skill that our teams can struggle to uphold due to capacity.

Are you reaching more people/fewer people/different people?

As of yet, our work has reached more older young people (18–25-year olds) who are able to legally consent to taking part in online sessions and access them from their own devices. Steps are being made to establish online provision for paediatric participants with group sessions due to be delivered via tablets on hospital wards with protective safeguarding and infection control measures in place.

What new skills have you or your colleagues had to develop to deliver this work?

Our core musicians have developed new skills in online facilitation including the curation and delivery of live stream ‘events’; video production; adapting from rolling weekly sessions to a programming events model. Staff across our organisations have deepened their understanding of online safeguarding and inclusion.

What would you say has made this project possible?

We worked closely with infection prevention and control teams to maintain an inpatient programme where possible. We developed risk assessments for remote delivery with safeguarding leads. Musicians used NHS email addresses to liaise with patients, and Trust videoconferencing facilities. Permission from our funders to continue working with our freelance musicians throughout the pandemic has given us opportunities to test out different models of engagement.

What would have made it easier?

At the time of moving services online we were instructed to not contact clinical staff as they exceptionally busy dealing with the influx of covid-19 patients. What has become clear is that in order for inpatient delivery to continue working there must still be members of staff on the ground at the hospital ward to act as a gateway service to hospitalised young people. Now that life has settled for clinical staff, we are able to establish further online programmes and equipment so that provision can continue to be delivered in the wake of further lockdown measures.

Having a member of staff whose practice specialises in social media marketing and engagement would have helped us gain further targeted reach online.

Further information

<https://www.youtube.com/vocalbeatsonline>

<https://www.hra.nhs.uk/planning-and-improving-research/application-summaries/research-summaries/visualbeats/>