

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

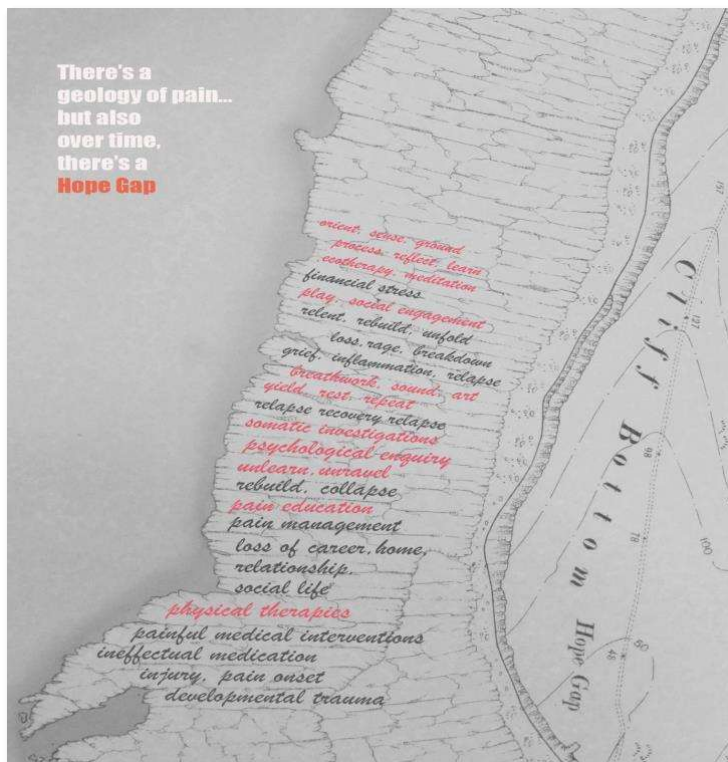
Project: The Hera programme

Organisation: Robin Hood Health Foundation

Region: South East

Designed for: People referred by GPs or self-referring

"I really enjoyed the group, and it was great to have some structured me time each week... In an indirect way we shared our experiences of lockdown, which I found a supportive process. I also learned new skills and became more confident in my abilities using a camera and taking photographs"



Images used by permission of Hera and Deep Time participants, and Suzie Poyntz

Introduction

The Robin Hood Health Foundation delivers the Hera Programme: creative workshops and public-facing arts activities for people with ongoing health concerns and multiple complex needs in NHS primary care.

We transitioned our entire programme of multi-artform creative workshops and professional training online in just over a week. In order to support those not comfortable with the technology, we provided direct remote support to participants with the help of AbilityNet, and additional training to colleagues provided by Diversity & Ability

Funders

Arts Council England, Brighton & Hove City Council and the South Downs National Park. We also employ two Social Prescribing Link Workers who are funded by the NHS.

Partners

We work in partnership with GP practices, The Old Market venue, Creative Future and Diversity & Ability.

Who is it for?

We try to avoid categorising people by their symptoms – though of course shared experience can be a powerful support to people at times. In general, our programme is available to the 30% of our local population who live with long-term physical and/or health challenges, in particular those for whom conventional medicine has little more to offer. About 30% of our cohort self-refer, the rest are referred by clinicians.

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

Both

How many people took/are taking part?

(In 2019 we had 1114 attendances from 235 individuals.)

Where is it happening?

Brighton and Hove.

For how long has it been happening?

We launched a trial at Brighton Health & Wellbeing Centre in 2014, and it has grown in project phases since, so that now anyone living with health barriers in the city can access the programme.

What were/are the main outputs?

We will be taking part in the annual Artists' Open House scheme, with a digital resource to back that up, and in spring 2021 we are planning a socially-distanced, Covid-secure performance and exhibition season at the Old Market: **Fear, Fury and Forgiveness**. There have been four artists' commissions so far this year, from the LightForm Lab activity strand at the Old Market.

What outcomes were/are you aiming for?

- Raise public awareness of the social determinants of health, including for very vulnerable people, across the whole life span
- Change primary care culture: person-centred and values-based - creativity is a basic right, regardless of health status, and a healthy life includes creativity
- Create a new resource for clinical and social care colleagues
- Build links and referral pathways using community and creativity
- Enable people to better manage their own health & wellbeing, to support each other, and to access wider creative resources
- Support improved arts & health practice – training, clinical supervision, professional opportunities, networking
- Build social connections, skills and confidence for individuals
- Reduce use of GP appointments for non-medical concerns (nationally around 1 in 4 appointments)

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

The magic of Microsoft Teams, supported by training. We also created a new web resource: www.sites.google.com/readysaltedcode.com/deeptime

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

We are providing training and paid work opportunities for professionals facing barriers related to protected characteristics – such professionals bring additional strengths to our work. Where people with given protected characteristics appear under-represented among participants, we co-design new activities to respond to that. Two of our artist team used to be participants, so there is a spectrum of opportunities to engage.



Evaluation & Feedback

We have a formal evaluation plan that looks at a wide range of qualitative and quantitative measures, and take a 360 approach. In addition, we are currently working with Brighton & Sussex Medical School on an evaluative study of participants' experiences on- and offline. We use about 30 different measures including the WEMWBS.

A graphic summary of the last two years is below, and qualitative feedback from participants is overwhelmingly positive. Demand for GP appointments tends to be reduced in the range 27% to 41% where someone attends three or more Hera sessions.



"I am in constant pain, but I was determined to come. No other GP practice would offer an opportunity like this" | "I moved to Brighton from London to help with my recovery. This project is brilliant"
"It was brilliant and the weeks flew by. It helped me get my love of painting and art back, and helped my mental health" | "I really enjoyed the group, and it was great to have some structured me time each week... In an indirect way we shared our experiences of lockdown, which I found a supportive process. I also learned new skills and became more confident in my abilities using a camera and taking photographs" | "I'm gonna miss you so much. Honestly, you don't know what a gift you gave just by doing these little classes. I never thought I'd dance again!"

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).

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

We expected challenges, which there were, but the overwhelming impression is of colleagues pulling out all the stops to make this work, and of patients surprising themselves in learning new things and finding new ways to take part.

The biggest hurdle, not surprisingly, was engaging clinicians in primary care, and reaching out to those shielding who were the most isolated – some people have really been suffering a great deal. In some ways the experience of Covid has demonstrated quite emphatically to NHS colleagues the value of what we do; it made us more visible.

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

Numbers are on target, but we are reaching them in different ways, so for example not limiting ourselves just to GP referrals but working with new partners such as Voices in Exile, a refugee organisation.

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

We're very good at Teams now! We have also reinforced the self-care message very strongly.

What would you say has made this project possible?

Both of our main funders gave clear, strong and early signals that our support would remain in place – this gave us confidence to plan. Also, colleagues willing to put all hands on deck to get this done. It brought out the best in people.

What would have made it easier?

Free hardware and software for vulnerable patients on a low income.

Further information

www.brightonhealthandwellbeingcentre.co.uk/hera

www.sites.google.com/readysaltedcode.com/deeptime

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