

ARTS COUNCIL COMMISSION

**To research, devise and implement a training
course for artists wishing to work in healthcare
settings**

REPORT ON THE RESEARCH PHASE

May 2007

CONSORTIUM

Institute of Art, Design and Technology, Dun Laoghaire

Create

The Adelaide and Meath Hospital, Incorporating the National Children's Hospital,

Dublin

REPORT AUTHOR

Hilary Moss, Arts Officer, The Adelaide and Meath Hospital

WORKING GROUP FOR RESEARCH PHASE

Deirdre Healy, Create and Hilary Moss, The Adelaide and Meath Hospital

STEERING GROUP

Professor Des O'Neill, The Adelaide and Meath Hospital (Chair)

Ms Sarah Tuck, Create

Mr Sean Larkin, Institute of Art and Design, Dun Laoghaire

Ms Sheila Gorman, The Arts Council

EXECUTIVE SUMMARY

- A consortium involving The Adelaide and Meath Hospital, Incorporating the National Children's Hospital (AMNCH), Create and Institute of Art Design and Technology, Dun Laoghaire (IADT) were commissioned by the Arts Council to research, develop and implement a course which is mutually beneficial for both artists and healthcare organisations.
- This report sets out the methodology, findings and conclusions of the research and development phase of this project, with recommendations of a full course content at HETAC certificate level and delivery outline.
- The methods used were a literature review, survey of best practice (national and international) and an extensive consultation exercise with national and international arts and health organisations, third level training institutions, artists, artists' organisations, healthcare providers and clinical staff in healthcare settings.
- A final draft of the course content was created and is included in full in the report (Section 5), including recommended course content, schedule and length of course
- The literature review highlighted a number of key international organisations that are running arts and health courses most notably CAHRE in the University of Florida. However, there are very few pre-existing examples of arts and health training courses and extremely sparse existing literature in this area.
- Significant literature was found in the world of art therapy and developers of this course can draw useful material from the work done by the art therapy profession.
- Five international examples of best practice in training in arts and health were chosen. These are by no means an exhaustive list, but were felt to represent good practice in terms of training artists to work in healthcare settings. Details of each of these organizations are set out in the report.
- National examples of good practice, in terms of *training artists to work in healthcare settings*, also arose from the consultation process. Six national examples of good practice are given in the report.
- In the absence of any current courses in Ireland in arts and health, a review of relevant and useful courses was researched for artists currently wishing to work in healthcare settings. A directory of current relevant courses in Ireland is set out

in the report, in the hope that this would be a useful resource for artists interested in working in healthcare settings.

- The extensive consultation process revealed the following key themes, which form the basis of proposed course content: Ethics, Hospital and health care settings environment, Patient/client centred care, Self awareness and motivation, Value of arts and health/best practice, Therapy, Placements and mentors, Overview of nature of disease, Facilitation/group work skills, Nature of collaborative practice, Research, Language and communication, Project planning and development, Arts and health overview, Standards of Practice.
- A number of health professionals were also consulted. These included two nurses and nurse managers, a doctor, a hospital director, two health service managers, two occupational therapists and a Senior Health Promotions Officer, HSE.
- In conclusion, it is noted that there is currently a gap in the arts sector with regard to training artists to work in healthcare settings. There is a need for artists to be trained to work in healthcare settings and a need for the health sector to formalize a currently ad hoc approach to employing artists in healthcare settings. There are a number of best practice models of arts and health practice from which we can learn but relatively scant literature in this area.
- The arts therapies are relatively well developed experts in the area of using the arts in healthcare and whilst there are different aims and intentions to this work, it is important that any establishment of arts and health training is cognoscente of the contribution and expertise of arts therapists in the healthcare arena. A culture of mutual learning is recommended between the arts therapies and the arts and health specialists.
- Above all, the research process highlighted the vulnerability of patients and clients of health services and the need for artists to be flexible and adapt their practice to meet patient needs. The need for an evidence based approach to any arts intervention in health care settings and a rigorous, research based approach is vital to ensure high standards of practice. The development of national standards for arts and health practice would also serve to ensure consistent and equal of provision of arts practice for patients and artists working in health settings across the country.

- Full consultation with all stake holders, both from the worlds of the arts and the health service was undertaken. This research phase was led by a consortium of three highly qualified organisations, whose partners represent an ideal mix of expertise in the areas of arts programming, arts and health management, innovative training, collaborative arts practice and academic research and course development. Together with all the stakeholders consulted, we have aimed to create and implement a course which is mutually beneficial for both artists and healthcare organisations.

Hilary Moss

Arts Officer, The Adelaide and Meath Hospital

Tallaght

Dublin 24

Tel: 01 414 2076

CONTENTS	PAGE
1. Introduction and rationale for the course	6
2. Methodology	8
3. Findings	9
3.1 Literature review	9
3.2 International best practice examples of training artists in healthcare settings:	15
3.3 National best practice examples of training artists in healthcare settings:	23
3.4 Directory of current courses in Ireland relevant to artists wishing to work in healthcare settings	28
3.5 Consultation exercise - key findings	30
3.6 Healthcare focus groups - key findings	33
4. Conclusions and Recommendations arising from research	34
5. Final draft of course	36
5.1. Proposed course outline, including recommended course content, schedule and length of course	36
5.2. Recommended tutors	41
5.3. Evaluation methods	42
5.4. Learning styles	43
Appendix One	45
Organisations and individuals who participated in the consultation process to develop this course	
Appendix Two	47
A note on Arts in Health and Arts Therapies	

SECTION 1 INTRODUCTION AND RATIONALE FOR THE COURSE

Given the increased attention paid to the development of arts in healthcare setting, the need for a formalized training framework to enable artists¹ to work comfortably and safely in healthcare settings has become more pressing. In a welcome development, the Arts Council decided to fund the research and development of a course to provide training for artists wishing to work in the healthcare sector² so as to enable a professional and mutually beneficial framework for artists and healthcare workers. *The Arts Council are committed to creating conditions in which artists of all disciplines can make work of the highest standard. The Arts Council have identified the need to support artists wishing to develop their practice in health care settings³.*

A consortium involving The Adelaide and Meath Hospital, Incorporating the National Children's Hospital (AMNCH), Create and Institute of Art Design and Technology, Dun Laoghaire (IADT) were commissioned by the Arts Council to create and implement a course which is mutually beneficial for both artists and healthcare organisations. The commission involved working together to research, develop and implement a course at HETAC certificate level in the first instance. These partners represent an ideal mix of expertise in the areas of arts programming, arts and health management, innovative training, collaborative arts practice, academic research and course development.

The ability of people to express themselves artistically and to experience aesthetic qualities in their environment is central to their health and well-being. The use of the arts in health settings has been shown to benefit service users, visitors and staff and enable them to establish a mutually enriching partnership with those who work in the arts⁴.

The consortium and the Arts Council agreed that the development of an arts and health training course must include the following features:

- The course must be of a high professional level, and to have a consistency and

¹ For the purpose of this report, the term 'artist' is used to include artists of all art forms.

² For the purpose of this report, the term 'healthcare sector' or 'healthcare setting' is used to include all aspects of healthcare, from acute hospital to community care, from voluntary sector to residential care, in other words, any setting where a health service is provided.

³ The Arts Council, Partnership for the Arts in Practice 2006 - 2008

⁴ The Picture of Health, A Framework for the Practice of Arts in Health Settings, Eastern Regional Arts Committee, 2004.

standard which enables validation and accreditation to HETAC standards.

- The course, while emphatically not a course in art therapy or music therapy, needs to recognize and facilitate good working relationships between those working in Arts in Health and Arts Therapists.
- The brief was best served by dividing the task into two separate phases, with the research and development taking place as phase one, and the implementation of the course and its evaluation as phase two.

This report sets out the methodology, findings and conclusions of the research phase of this project, with detailed recommendations for a full course content and delivery outline.

SECTION 2 METHODOLOGY

The research phase, led by Ms Hilary Moss, ran from January to May 2007. The research phase took the follow steps:

- A **draft course outline** was created and approved by the steering group, to form the basis of consultation exercise
- An extensive **consultation process** was undertaken with national and international arts and health organisations, third level training institutions, artists, artists' organisations, healthcare providers and clinical staff in healthcare settings
- **Literature review**
- Review of **courses in arts and health** already in existence, nationally and internationally
- Review of **previous and existing work in Ireland** in the development of arts and health training
- Review of **national and international best practice examples** of training for artists wishing to work in healthcare settings
- Preliminary research regarding **HETAC requirements**
- **Final draft of course outline**, including recommended schedule, length of course, content and tutors
- **Steering committee review** and approval of final draft of course outline and schedule of delivery

SECTION 3 FINDINGS

3.1 LITERATURE REVIEW

A literature review was carried out in February 2007. This was to determine literature that exists about arts and health training courses around the world and to identify best practice examples of current training in existence.

Four methods of reviewing literature were used:

- (i) An OVID review⁵
- (ii) Google and Google scholar internet searches
- (iii) The Society for the Arts, USA health care library⁶.
- (iv) Relevant literature supplied by experts in the field who were involved in the consultation process

The **search terms** used for all of these searches were:

- *Art and health training*
- *Arts and health training*
- *Training artists in health care*
- And combined searches using the words *artists, education, training and healthcare*
- *Arts and health courses*
- *Arts and health courses*

Extremely few references were discovered using the above search terms. For example, in the OVID search *art and health training* brought up only twenty five references, only four of which were relevant to arts and health. *Training artists in health care* recovered zero relevant references. When the combined search was used (using the terms *artists,*

⁵ OVID is a collection of biomedical databases and full text journals, providing extensive coverage of the literature relating to all aspects of health care and the social sciences. It is commonly used in medical and allied health research. The journals searched in the OVID system are the British Medical Journal of Clinical Evidence, the Washington Manual of Surgery, Your Journal at OVID, the Allied and Complementary Medicine Web Data Base (AMDB), Cinahl (which is the cumulative index to nursing and allied health literature), the HMIC (the Health Management Information Consortium), OVID Medline and Psychinfo. These are all leading journals which can be searched through the OVID major database.

⁶ The Society for the Arts in Healthcare is the national organisation that represents arts in health in the United States of America. It has a very useful library accessible by members

education, training and health care) nine references were recovered, but none were directly relevant. (Some of these articles listed under these search terms were, for example, about using physiotherapy to help artists in rehabilitation following work related injury or treating piano students with repetitive strain injury). **There are, in conclusion, very few references in medical literature related to developing training courses for artists wishing to work in healthcare settings and in the healthcare field this is a relatively under researched area of work.**

The Google and Google Scholar searches brought similar results, again using the same search terms above. Most of the useful sites that were found, however, recovered **excellent examples of arts in health in practice** (for example, *Vital Arts* and *Performing Medicine* in the UK). However, very few were actually running *training courses* for artists who want to work in health care settings, which was the primary search for this study. This seems to confirm the current situation in Ireland, where there is currently **much high quality practice but a lack of formal training for artists working in arts and health settings**. This appears to be quite a common issue internationally.

However three international institutions came up commonly on the search. The first was the **Society for the Arts in Health Care** which is the US national organisation for arts in health care (www.thesah.org). Their website for members holds an extensive library of relevant literature. The second organisation was the **Centre for Arts and Health Research (CAHRE) at the University of Florida and the Shands Hospital (www.arts.ufl.edu/CAHRE/)**. The third organisation highlighted frequently in the search was **Performing Medicine**, a theatre based company in the UK which carries out training and education programmes for medical students.

The review also focused on **previous and existing work in Ireland in the development of arts and health training**. A large part of this knowledge came from the extensive consultation process undertaken (see Section 3.4) but in addition the following documents were reviewed: The Arts Council, Partnership for the Arts in Practice 2006 – 2008, Arts Council Arts and Health Handbook 2003, The Picture of Health, A Framework for the Practice of Arts in Health Settings, Eastern Regional Arts Committee, 2004, Arts and Health Conference Proceedings and How to workshops.

Following the literature review and the internet searches the following organisations were identified as key international best practice organisations in training in arts and health. These were:

1. CAHRE
2. Performing Medicine
3. Manchester Metropolitan University
4. Centre for Arts and Humanities in Health and Medicine, Durham, UK (CAHHM)

Due to the very sparse amount of literature on any of these topics and the limited range of articles, the researcher then added the following search terms:

- *Art therapy training*
- *Art therapy courses*

These search terms recovered forty six references under the OVID search, many of which were relevant to designing a course for artists working in health care setting. In the Google search, three references appeared relating to art therapy publications, which were again extremely relevant to setting up training using art in health care. For example an editorial by Wadeson⁷ addressed the issue of professionalism and ethics for art therapists working in healthcare settings. This would seem to be an issue directly relevant for arts and health practitioners. An article by Seiden et al⁸ describes art therapy training within a school of professional art. The article describes an art therapy training course in which students are taught human development, art and studio art skills, and discusses how to integrate such a course into a traditional school of art. This is relevant in terms of developing arts and health training within an existing art college and the current proposed course design.

An article by Teesdale⁹ looks at the role of placements in art therapy training and addresses issues such as the constancy of placements, supervision and adequate facilitates for training

⁷ Wadeson, H. *Guest editorial- to be or not to be licensed: is that the question?* Art Therapy: Journal of the American Art Therapy Association. 2004; 21(4): 182-3

⁸ Seiden, D et al. *Graduate art therapy training within a school of professional art* Arts in Psychotherapy. 1989; 16 (1): 21 - 27

⁹ Teasdale, C. *The role of the clinical placement in art therapy training: Toward consolidating our professional identity* Arts in Psychotherapy 1993; 20 (3): 205 – 212.

in healthcare settings for art therapists. This would again seem closely relevant to the needs of students on art and health training courses.

In the Google and Google Scholar searches three relevant art therapy books were discovered. These were:

- Waller, D., *Art Therapy, its use in training and treatment*, Routledge 1993
- Rubin J.A., *Approaches to art therapy, theory and technique*, Psychology Press, 2001
- Rubin J.A., *Art Therapy: An Introduction*, Psychology Press, 1999.

All three books are available at books.google.com and these were useful in terms of their chapters on different aspects of both training art therapists and using art in different health care situations¹⁰.

Art therapy: An Introduction by J.A. Rubin broke down the key issues for artists working in healthcare into the following chapters, all of which could be relevant to an art and health course content (Comments in italics are added by researcher):

- Mapping the territory - personal styles, cultural perspectives and societal issues
- Portraits and vignettes (i.e. examples of practice)
- What is art therapy? (*For our course: What is art and health?*)
- History of the movement
- The basics - the art part, the health part, the necessary conditions, the framework, doing art therapy (*For our course: doing art and health*)
- Why art therapy? (*For our course: Why art and health?*)
- Individual and group work
- Assessment
- Techniques (e.g. media, warm ups, exercises)
- People we serve
- Places we work
- Accountability - planning, standards, evaluation, research ethics
- Finding out more
- Resources

¹⁰ The author notes that there are many text in existence on art therapy and art therapy training and cited texts are only relevant examples of the numerous works surveyed.

Diane Waller's book *Group Interactive Art Therapy: Its Use in Training and Treatment* lists the following area of learning, again directly relevant to art and health training:

- Groups
- Practical matters - materials and rooms
- Using themes or projects
- Short and long term groups
- The unwilling participant
- Development processes in a group
- Life processes in small group environments
- Images of the group
- Power and domination in groups
- Catharsis

In conclusion, the literature review has **highlighted a number of key international organisations that are running arts and health courses** most notably CAHRE in the University of Florida. However, **there are very few pre-existing examples of arts and health training courses and extremely sparse existing literature in this area.**

As a result of the literature review, **it must be noted that a large amount of work has been done in the world of art therapy that we are revisiting as we develop arts and health training and we can draw from the work done by the art therapy profession and use it to inform us.** For example, much of our course content overlaps with course content in art therapy training. **A healthy relationship between arts and health development and arts therapies should therefore to be encouraged and developed.**

It would seem that, given the extreme lack of pre-existing literature and examples of arts and health training internationally, a useful anchor for building our own course would be both **best practice examples of arts and health practice and examples of pre-existing art therapy courses.** For example the American Association of Art Therapy has, on the web, a detailed code of ethics which could be used as a starting point for our

course. While art therapists cover themes such as psychotherapy and psychodynamic techniques, there are many common areas for art therapy and art and health practice, such as facilitating groups, flexible use of the art form to meet the needs of the patients, ethics, patient confidentiality and privacy when making art in a hospital setting. These issues overlap between art therapy and art and health practice and are covered in the existing art therapy courses to date. **There may be much useful material to be gained from pre-existing courses in arts therapies in this country, whilst still acknowledging the important differences in aims and approaches between arts and health practitioners and arts therapists.**

The two key conclusions from the literature review and internet searches are:

1. **Key international examples of best practice** were identified in terms of training artists to work in healthcare settings and further research was undertaken by contacting them as part of the consultation phase.
2. There is **relatively sparse literature on arts in health internationally** and very few pre-existing courses exist in this area. However, the wealth of knowledge and experience in terms of training artists to become art therapists must be acknowledged as we build our own arts and health course.

3.2 INTERNATIONAL BEST PRACTICE EXAMPLES

Five international examples of best practice in training arts and health practitioners were chosen. These are by no means an exhaustive list, but were felt to represent good practice in terms of training artists to work in healthcare settings. These are:

1. CAHRE
2. Performing Medicine
3. Manchester Metropolitan University
4. Centre for Arts and Humanities in Health and Medicine, Durham, UK (CAHHM)
5. Arts Care, Northern Ireland
6. ArtFull - Scotland

CENTRE FOR THE ARTS IN HEALTHCARE, UNIVERSITY OF FLORIDA (CAHRE)

The Centre for the Arts in Healthcare (CAHRE) was formally established by the Florida Board of Regents at the University of Florida in 1999. The Centre grew from the groundbreaking clinical work of the Shands Arts in Medicine program, and serves as the academic, research and community outreach component of the partner programs. The Centre was proposed and became operational in 1996, following the establishment of the nation's first university level coursework in the arts in healthcare by CAHRE's co-directors at UF in 1995.

Housed in the College of Fine Arts, the Centre's mission is three-fold, encompassing education and training in the use of the arts to enhance the healing process, research of the arts and healing, and cultural outreach to promote art and creativity as catalysts for healthy lifestyles and to bring the arts to underserved populations. CAHRE provides a framework for interdisciplinary collaboration among University of Florida faculty and students, healthcare providers, clinical artists, and the local and global communities. Through its programming and curriculum, the Centre serves as a national and international model for arts in healthcare research, education and programming.

It is believed, from researching this area that CAHRE currently provide the most up to date education and training in the field and serve as a model for arts in healthcare education, training and continuing education worldwide. It is recommended by the **Society for the Arts in Health Care** as a leader in terms of research and training.

Courses offered at CAHRE

- Introduction to the Arts in Medicine, College of Fine Arts
- Dance in Medicine, College of Fine Arts, School of Theatre & Dance
- Writing and Healing: Process and Practice, Honours Program
- Music and Health, Honours Program
- Spirituality and Creativity in Healthcare, College of Nursing
- Dance Clinical Practice, CFA School of Theatre and Dance
- Reflective Writing, College of Medicine (for 1st & 2nd year med students only)
- 4th Year Medical Student Elective in Holistic Health and Art, College of Medicine
Independent Studies in Theatre, Music & Dance, College of Fine Arts

The Arts in Healthcare Summer Intensive

The Arts in Healthcare Summer Intensive explores the role of the arts in healthcare fields and settings through arts workshops, clinical practice in implementing the arts in a hospital setting, and lectures in historical, philosophical and practical aspects of the arts in healthcare. The course provides the student with the following:

- An historical perspective of the relationship between the arts and healing
- A philosophical understanding of the relationship between the arts and healing
- Introductory training and experience in the visual arts, movement/dance, music, writing, and theatre processes
- Information and instruction for implementing, administrating and funding arts in healthcare programming as well as hospital performance production, research and caring for the caregiver programming
- An understanding of and experience with his/her own creative process
- Training, mentoring, and experience in facilitating the arts and creative process with hospital patients
- An overview of existing career options and programs which integrate the arts into healthcare

Assignments: There are two written requirements for the course. The first is an Artist-in-Residence Proposal: A 750-1,000 word paper articulating students' ideas and visions about how they would implement the arts into a healthcare setting as an artist-in-

residence. The second is 'Daily Journaling' whereby students purchase a journal and write (or collage or draw, etc.) the equivalent of 2 pages per day. This is a form of personal expression to journal and process experiences and thoughts.

Required Reading for courses at CAHRE:

1. Oscar and the Pink Lady by Eric-Emmanuel Schmitt (published with Monsieur Ibrahim, Other Press; available at the UF bookstore or at SI registration)
2. Artists-In-Residence: The Creative Center's Approach to Arts in Healthcare by Geraldine Herbert, Jane Waggoner Deschner and Robin Glazer.

Recommended Texts:

Creative Healing by Michael Samuels and Mary Rockwood Lane

Illness and the Art of Creative Self Expression by Dr John Graham-Pole

Contact details:

Centre for the Arts in Healthcare, University of Florida (CAHRE)

PO Box 100141, Gainesville, FL 32611

Phone: (352)265-0768

e-mail: cahre@arts.ufl.edu

website: www.cahre.ufl.edu/CAHRE/

PERFORMING MEDICINE

Performing Medicine is a programme of courses, workshops and events led by the Clod Ensemble in association with the School of English and Drama and Barts and The London, Queen Mary's School of Medicine and Dentistry, University of London, UK.

Performing Medicine use the arts to provide training to medical students and practising health professionals. They offer artist led, practical based programmes which aim to raise the profile of the benefits arts can bring to medicine and healthcare as well as establishing arts as a key teaching methodology in medical training.

There are three key areas of focus to their training:

1. Practical Skills

Performing Medicine offers courses and workshops which use theatre, movement and photography to help to improve the 'stage presence' and performance of health workers taking into account the way they move, speak, look, interpret and communicate. Participants can learn new skills which help them to meet the demands of their job and become more responsive, inspiring and approachable. Sessions include: Non-Verbal Communication Skills, Power and Status, Voice, Touch, Experiential Anatomy, Ways of Seeing, Presentation Skills, Team Building, Self Defense.

2. Artists Working in Healthcare Settings

This strand of the project raises the profile of the arts in health movement through practical sessions led by artists working in health care settings. Workshops investigate how collaborations between artists and scientists/medics may improve health care in terms of communication, environment, outlook, public engagement, patient care and the advancement of knowledge. Associate artists working in this field include: Deborah Padfield - Perceptions of Pain; Rosetta Life - Arts in Palliative Care; Bobby Baker – How To Live; Susan Francis - Architecture and Design; Vital Arts – Arts in Hospital Settings.

3. Examining Cultural/Ethical Issues Through Arts

These seminar and performance events interrogate cultural/ethical issues relevant to healthcare through art and art projects. Work discussed ranges from old masters such as Caravaggio, Vesalius and Rembrandt, to medical photography, to the pioneering work of Susan Sontag and Jo Spence, to controversial contemporary artists such as Franko.B and Orlan.

Course example 1: The Art of Medicine and Healthcare

The Art of Medicine and Healthcare is an intensive course for **medical students** which examines the uses of arts in medicine and healthcare. The course comprises of a series of practical workshops and tutorials, led by cutting edge contemporary artists. These provide an opportunity to take a step back from clinical studies and look at medicine from a different perspective. Prior knowledge of arts is not required from participants.

At the end of the course participants are asked to imagine their own arts in health project and assess how it could potentially affect medical outcomes or the patient's experience

of healthcare. Past students presentations include a lighting project to reduce stress in waiting rooms, a singing project in a speech therapy unit, a ceiling art project in a back pain unit, and a music project in a stroke clinic.

Course example 2: The Expressive Body - Non Verbal Communication Skills

Doctors deal with other people's bodies all the time but how aware are they of their own? The Expressive Body workshops encourage health practitioners to gain a greater understanding of their bodies and their non-verbal language. Through simple, non-intimidating theatre and movement games and exercises, participants explore how subtle changes in the body can have a huge affect on the doctor-patient relationship and on relationships with colleagues. Participants can also begin to recognise how the stress they carry in their own bodies may have a negative affect on both their work practise and their well-being. The workshop provides physical strategies to cope with the demands of a busy work environment and suggests ways to negotiate the many and various power dynamics that take place within a hospital or health care setting.

Contact details:

The Clod Ensemble
admin@clodensemble.com

MANCHESTER METROPOLITAN UNIVERSITY

The ARTS for HEALTH Centre

This international Centre provides practical help, information and advice to all who are concerned with using art and design as a complementary part of healthcare.

ARTS for HEALTH was founded in 1988 as a department of Manchester Metropolitan University's Faculty of Art and Design. Operating under the guidance of director Peter Senior (MBE) it develops strategically planned art and design programmes, for healthcare environments.

The work of the centre is backed up and consolidated by individual project research and evaluation. Guidance is offered directly through personal contact and via a range of publications. By encouraging networking and partnership ARTS for HEALTH promotes national and international cultural links between artists, and healthcare professionals.

At MMU it is possible to study an MA in Arts and the Environment and to study to PhD level in arts and health

Contact details:

Arts for Health

Manchester Metropolitan University

Elizabeth Gaskell Campus

Shepherd House

Hathersgate Road

Manchester M13 0JA

Phone: + 44 161 247 1091

Email: artsforhealth@mmu.ac.uk

CENTRE FOR ARTS AND HUMANITIES IN HEALTH AND MEDICINE DURHAM (CAHHM)

CAHHM is a research centre based in Durham University's multidisciplinary School for Health. It was established in 2000 by the Vice Chancellor, Sir Kenneth Calman, with initial support from the Nuffield Trust. The Centre's aim is to pursue interdisciplinary research and educational initiatives that will explore and extend the relationship between the humanities, the arts and medical and healthcare practice. CAHHM has developed research activities and interests in three main areas: medical humanities, arts in health and health care environments. The Centre has four members and two associate members of staff all from different backgrounds and work closely with the Departments of English Studies, Philosophy and Anthropology. Nationally, the Centre is the editorial base for the Journal of Medical Humanities, as well as being the secretariat for the Association for Medical Humanities. CAHHM staff have worked closely with the UK Arts Council and the Department of Health and Department of Culture, Media and Sport on the development of policy initiatives in these fields and in workforce development.

Contact details:

Centre for Arts and Humanities in Health and Medicine

Rm 323 Dawson Building

Science Site

South Road
Durham
DH1 3LE
Tel: 0191 3342917
Fax: 0191 3342915
www.dur.ac.uk/cahhm/

ARTS CARE, NORTHERN IRELAND

Arts Care's mission is to promote and co-ordinate the development of arts provision in healthcare settings throughout Northern Ireland for the benefit of patients, clients, residents, staff and visitors.

Arts Care, founded in 1991, engages 19 Artists-in-Residence as well as many project artists, who facilitate and co-ordinate participatory workshops and performances. Believing in the benefits of creativity to well-being, Arts Care makes all forms of art accessible to patients, clients, residents and staff in healthcare settings. In addition to many project artists, Arts Care currently engages 20 Artists-in-Residence, comprising a dancer, a musician, a graphic designer and 17 visual artists, who work in healthcare settings throughout Northern Ireland.

Although Arts Care do not currently run any specific training courses for the artists in health care settings, every artist employed by them undertakes a comprehensive interview and must have a degree level qualification in the appropriate art form. Experience in participative workshops with a variety of groups in a variety of venues and other relevant experience is required. All artists working for Arts Care must have references are police-checked for working with vulnerable adults and children. Artists receive an induction from the hospital about specific groups and hospital protocol before they start work and a member of hospital staff will always be present when they are working. New artists will shadow more experienced artists already employed by Arts Care before taking on their own work.

Contact details:

Arts Care
25 Adelaide Street, Belfast, BT2 8FH
Tel: 02890535639

Email: artscare@cinni.org

ARTFULL – SCOTLAND

ArtFull is a national initiative developed with aim of articulating, developing and promoting the arts and the role they play in improving the mental health and well-being of people in Scotland. The project is notable in that the Scottish Arts Council have developed a full strategy and action plan which recognizes the role played by the arts and creative activity in improving and promoting mental health and well-being. There are four key aims:

- To promote increased access and participation in arts activity amongst those experiencing or at risk of experiencing mental illness
- To develop increased mainstream and inter-agency partnership commitment for arts and mental health projects
- To support and develop quality artistic practice in the field of arts and mental health work
- To develop a research/evidence base that helps demonstrate and promote the benefits of the arts in relation to mental health and well-being.

The Scottish Arts Council was considered an example of best practice in the development of a thorough strategy. It is recommended to contact them for further information and expertise regarding training programmes for artists in this area.

Contact details:

Scottish Arts Council

12 Manor Place, Edinburgh, Scotland EH3 7DD

Tel: 0044 131 226 6051

Email: artfull@scottisharts.org.uk

3.3 BEST PRACTICE EXAMPLES, NATIONAL

National examples of good practice, in terms of *training artists to work in healthcare settings*, arose from the consultation process. Six national examples of good practice were chosen. These are **by no means an exhaustive list**, but were felt to represent good practice in terms of *training artists to work in healthcare settings* following our consultation process. These are:

1. Age and Opportunity
2. Music Network
3. University of Limerick
4. Crawford College, Cork
5. The Adelaide and Meath Hospital Artists' Placement Scheme
6. Waterford Institute of Technology and Waterford Healing Arts Trust

AGE & OPPORTUNITY - ARTS IN CARE PROGRAMME

The Age & Opportunity Arts in Care programme involves a series of carefully-structured workshops. Workshops involve both staff and residents, or staff and attendees of Day Care Centres. The course is offered in two modules, both of which offer optional FETAC accreditation for participants.

In its first phase from 2000 to 2004, 37 staff and volunteers drawn from all residential care settings for older people in the (then) Midland Health Board completed the first module of the course and 13 of them went on to complete a more advanced second module. Age & Opportunity also delivered "Refresher Days" to course participants and "Awareness Days" in the care settings, aimed at promoting the ethos of the course amongst the staff generally.

A recent phase of the project commenced in 2004, when a new first module course was delivered in Dublin, based mainly at the Irish Museum of Modern Art (IMMA). During Winter/Spring 2006/2007, this module was delivered for the third time, based at IMMA. Course participants have been drawn again from the midland area but also from the four HSE areas in Dublin.

Among the usual components of the course are sensory exercises to encourage empathy with clients, development of process art and drama skills, and participants undertaking projects in their own care centres. Participants also received hands-on experience of working with older people at a local care centre. Members of St Michael's Parish Active Retirement group, who have been active participants in the Museum's ongoing programme for older people, made a presentation to the course participants.

MUSIC NETWORK

"Continuing Professional Development" (CPD) is a programme for professional musicians working in participatory settings (such as in schools, healthcare and other community contexts), which Music Network has been developing since 2000. Originally established as a training/support mechanism for musicians employed within our own healthcare, education and audience development programmes, it consists of scheduled training weekends complemented by mentoring meetings.

The CPD Programme offers an 8-month long programme (September to May) of structured support and networking opportunities. In 2006, this programme catered for up to 25 professional musicians. The programme enables professional musicians working, or wishing to work with groups of students (in schools), clients (in healthcare contexts) or members of a community, to engage in a process of group music making, collaborating to create the group's own musical compositions, using a range of tuned and untuned percussion instruments, and their voices, bolstered by the musicians' own instruments.

Training weekends take place three times during the 8-month period, co-ordinated by a key trainer, with invited guest trainers from both Ireland and overseas also involved. These weekends allow participating musicians to network and share experiences, and to avail of training in areas such as the following:

- planning and structuring participative music projects
- facilitation skills: engaging with a group
- working effectively with teaching/care staff/group leaders
- improvisation and compositional skills
- repertoire development
- working in a cross art-form approach
- context-specific training (e.g. age awareness training; training in child protection)

issues, etc.)

This training is supported by a mentoring programme, whereby experienced mentors have one-to-one meetings with and/or conduct site-visits to each of the participating CPD musicians, to view their work with a group of students/clients, and offer advice based on their observations and own experiences. Participants wishing to avail of the mentoring programme will be provided with further information during the September session.

UNIVERSITY OF LIMERICK

The Irish World Academy of Music and Dance currently offers an MA in Music Therapy. However, a number of innovative modules have been developed for undergraduate students in Arts and Health related subjects. The 'Arts in Health' module is currently an introductory module for the MA in Music therapy but is proposed to be included in the new curriculum for the graduate medical students at UL. There are two other modules available in the undergraduate syllabus, Music in nursing and healthcare and Music, Dance and Human Behaviour.

CRAWFORD COLLEGE, CORK

The Department of Art Therapy at Crawford College in Cork offers a series of high quality courses to artists wishing to work in healthcare settings. These include the Art and Empowerment Facilitation Training Course, the MA in Art Therapy and an Art Therapy Summer School.

THE ADELAIDE AND MEATH HOSPITAL ARTISTS' PLACEMENT SCHEME

The Adelaide and Meath Hospital Arts Office aims to promote and develop the arts in all forms as a medium of healing and well being. The Arts Office aims to provide a range of high standard arts developments and activities in order to improve the patient, staff and visitor experience of being in hospital.

Artists Placement Scheme

In conjunction with the hospital Volunteer Services Department, the Arts Office currently runs a twenty week work experience and training placement scheme for artists. Artists are recruited with a degree in their art form but are not required to have other experience. Following interview,

artists are invited to an initial meeting where they receive induction to the hospital arts programme, a formal hospital induction process, as well as discussion of potential placements, information on hygiene, health and safety, confidentiality and infection control and receive information packs about the hospital. Reference and Garda forms are completed. Artists work in the hospital for a minimum of two hours per week from then on, and are assigned to a ward or clinic.

The first two weeks of placement are spent shadowing an experienced artist as well as observing sessions and visiting the unit where they will work. Each artist reports to both the Arts Officer and the Clinical Nurse Manager of the unit where they will work.

On week 4 the artists start their own placement and work on wards for four weeks, before receiving their first in-depth training session. A training session typically lasts for 3 hours, with some or all of the following issues covered:

- Introduction to the Arts Programme and Arts in Health
- Confidentiality
- Infection control
- Group Dynamics and Boundaries
- Introduction to specific illnesses or departments e.g. stroke, neurology, oncology, dialysis

Artists then continue their twenty week placement, during which time they meet the Arts Officer or Art Co-ordinator to review how placement is going. Training sessions are held every three months.

WATERFORD INSTITUTE OF TECHNOLOGY and WATERFORD HEALING ARTS TRUST

The Waterford Institute of Technology (WIT) are currently developing an MA in Art and Health. This will be the first such course in Ireland.

The Waterford Healing Arts Trust (WHAT) is Ireland's leading hospital arts programme. Based in Waterford Regional Hospital, Ireland, the Trust explores the role of the arts in the promotion of healing and well being through a multi-disciplinary programme of arts activity. WHAT are advising WIT regarding the development of the MA in Arts and Health. Whilst they do not have a formal training programme for artists, they provide

numerous opportunities for artists working with them to access training opportunities both nationally and internationally.

3.4 DIRECTORY OF CURRENT COURSES IN IRELAND AVAILABLE TO ARTISTS WISHING TO WORK IN HEALTHCARE SETTINGS

In the absence of any current courses in Ireland in arts and health, a review of relevant and useful courses was researched for artists currently wishing to work in healthcare settings. These include courses that current arts and health practitioners have undertaken and recommended, as well as related courses which have been found to be useful and again recommended by those consulted. N.B. Courses that are being planned but are not currently available were not included. This list incorporates all courses discovered during period of research but may not be an exhaustive list.

Arts Therapies

- 1 MA in Art Therapy, Crawford College of Art and Design (2 years full-time, 3 years part-time)
- 2 MA in Dramatherapy, NUI Maynooth (1 year full-time)
- 3 MA in Music Therapy, University of Limerick (2 years full-time)
- 4 Certificate in Art Therapy, Crawford College of Art and Design (part-time)
- 5 Foundation course in Art Therapy, Crawford College of Art and Design (part-time)
- 6 Art Therapy Summer School, Crawford College of Art and Design (part-time)

Community Art

- 1 Higher Diploma in Community Art, National College of Art and Design (1 year part-time)
- 2 Certificate in Community Arts for Community Development, NUI Maynooth
- 3 Art Processes and Creative Activities, Cross Border Centre for Community Development/Dundalk Institute of Technology (11 weeks, ten credits from HETAC BA in Community Development)

Undergraduate modules in arts and health

1. Fine Art Degree, NCAD - Third year Community art placements, CREATE
2. Fine Art Degree, DIT - Community art placements, CREATE
3. Music Degree, NUI Maynooth - Third year elective music therapy module
4. Music in Nursing and Healthcare UL

5. Music, Dance and Human Behaviour, UL
6. Arts in Health, UL

Other relevant courses

- 1 Continuing Professional Development Course for Musicians in Healthcare, Music Network
- 2 Arts and Empowerment Facilitation Training, Crawford College of Art & Design, Cork
- 3 Arts in Care programme, Age and Opportunity
- 4 BTEC Professional Diploma in Specialised Play for Sick Children and Young People, Inchicore College of Further Education, Dublin
- 5 Activity in Care Training (ACT), Age and Opportunity
- 6 West Cork Arts Centre - various courses e.g. Arts and disability training, Older people and the arts training, Children and the arts training, Professional Development for artists

3.5 CONSULTATION PROCESS

An extensive consultation process was undertaken with national and international arts and health organisations, third level training institutions, artists, artists' organisations, healthcare providers and clinical staff in healthcare settings

The aim of the consultation phase was to conduct interviews with national and international experts regarding the development of a course for artists wishing to work in healthcare settings. A draft course outline was created, based on the practical experience of consortium members to date. A large number of national and international arts and health organisations, third level training institutions, artists, artists' organisations, healthcare providers and clinical staff in healthcare settings were consulted (See Appendix One for full list of those consulted). A telephone interview was conducted to seek recommendations on course content as well as course schedule, delivery and evaluation of the training. The questions forming the basis of the interviews were as follows:

1. COURSE CONTENT What are the most important elements to be included in a course for artists working in healthcare settings? What issues should training artists be exploring and reflecting on prior to working in a healthcare setting?

N.B. We anticipate the course content to be structured around the broad headings: Overview of Arts in Health, The Health Service, Best Practice – Arts In Health, Ethics, Practicalities and Art Processes, Experiential sessions.

2. PREVIOUS EXPERIENCE What training do you currently offer artists wishing to work in healthcare settings? What is most important for artists to know before they enter a healthcare setting?

3. COURSE DELIVERY AND SCHEDULING How do you think this course would be best delivered (e.g. how many days, over what time span). What is your view of placements and mentoring as part of the course?

4. GENERAL ISSUES Any other issues we need to consider regarding training artists to work in healthcare settings.

5. MENTORS AND PLACEMENTS Views on these areas, what length or type of support do you think would be useful for artists in training?

6. EXISTING COURSES What courses do you know of that artists who want to work in healthcare currently undertake?

7. POLICY DEVELOPMENT Recommendations and needs for Arts Council arts and health policy development

The consultation process was extensive and extremely interesting. The amount of data collected from the consultation is too extensive to be included here, but the researchers identified a number of **key themes** which emerged during the consultation. A separate document is to be produced based on the recommendations for Arts Council policy (Question 7 of consultation). The key themes which emerged from consultation are:

Ethics

Hospital and health care settings environment

Patient/client centred care

Self awareness and motivation

Value of arts and health/best practice

Therapy – the importance of self awareness work to be undertaken by students

Placements and mentors

Overview of nature of disease

Facilitation/group work skills

Nature of collaborative practice

Research

Language and communication

Project planning and development

Arts and health overview

Standards of practice

Further details of content and elaboration on each topic are detailed in Section 5, where the full proposed course is presented.

A small number of examples of comments follow from the consultation:

- *Diversity has to be recognised... What are the needs of the client? Need to understand client rather than imposing own programme on them.*
- *Hospitals have a language and methodology and a way of communicating – artists need to know and use that language*
- *Understand the various stakeholders within hospitals, patients are only small component – visitors, staff and management*
- *Important to look for flexible ways of working with a institution while keeping focus on your own development as an artist*
- *Introduction to hospital policy and medical staff*
- *Awareness of illnesses and diagnoses – treatment and drugs and how patients may be feeling*
- *Challenge of convincing health professionals of value of work.*
- *Emotional maturity is critical, knowing when to stop, when to refer a patient to medical or nursing staff, knowing professional boundaries*
- *Research –important to be informed about target group – expectations, potential limitations etc.*
- *Research and explore projects and practices nationally and internationally*
- *Need awareness of different ways of working, different roles and best practice - so much going on internationally*
- *Arts practices – broaden awareness of health settings and new art forms*
- *Sensitivity of area – communication skills and working with vulnerable people*
- *Multicultural society – the array of different attitudes, behaviours and stakeholders has to be factored in to the course.*
- *Need to learn from visiting artists already working in health care settings and field trips to examples of best practice*
- *Hands on work placement experience is crucial as is learning about written documentation and evaluating our work*
- *Shadowing experienced arts and health practitioners is crucial*

3.6 HEALTHCARE FOCUS GROUPS

A number of health professionals were consulted. These included two nurses and nurse managers, a doctor, a hospital director, two health service managers, two occupational therapists and a Senior Health Promotions Officer, HSE.

Key themes arising from the consultation include:

- **How the health system works** and the **role of different professionals**.
Understanding the clinical team and how it works.
- The **importance and individuality of the patient** and understanding that the medical needs of the **patient comes first**. How to relate to people, to work in different situations, to deal with people who are ill and vulnerable.
- **Communication skills** within healthcare settings.
- **Confidentiality and ethics**
- **Professional conduct** within a healthcare organisation – project planning, dress codes, boundaries etc. The need to be professional and work as a member of the team.
- **Awareness of the health service resources** and barriers to getting funding.
- **Realistic expectations** of patients and staff.
- Importance of **input from staff from the health service** – staff could talk to the artists about the environment, for example occupational therapists or nurse managers.
- **Hospital and health facility policies** e.g. health and safety, security, dress codes acting as a professional, patient privacy and confidentiality.
- Artists working in a healthcare setting need to have a very clear idea of their **role and the aims of their work** and also clear reporting relationships within a health care setting.
- **Personal and Professional development**. Self awareness of artists and suitability and motivation about why they want to work in healthcare.
- **Common diagnoses** and awareness of health and illness and how people cope with illness.
- **Facilitation skills** and awareness of **group dynamics**
- **Placement hosts** must be committed to arts and health and the support of students

SECTION 4 CONCLUSIONS AND RECOMMENDATIONS

The research, which included literature reviews, examining best practice examples both nationally and internationally and an extensive consultation process, has revealed the following conclusions regarding a course for artists wishing to work in healthcare settings:

There is currently a gap in the arts sector with regard to training artists to work in healthcare settings. There is a need for artists to be trained to work in healthcare settings and a need for the health sector to formalize a currently ad hoc approach to employing artists in healthcare settings. There are a number of best practice models of arts and health practice from which we can learn but relatively scant literature in this area.

The arts therapies are relatively well developed experts in the area of using the arts in healthcare and whilst there are different aims and intentions to this work, it is important that any establishment of arts and health training is cognoscente of the contribution and expertise of arts therapists in the healthcare arena. A culture of mutual learning is recommended between the arts therapies and the arts and health specialists.

Above all, the research process highlighted the vulnerability of patients and clients of health services and the need for artists to be flexible and adapt their practice to meet patient needs. The need for an evidence based approach to any arts intervention in health care settings and a rigorous, research based approach is vital to ensure high standards of practice. The development of standards of arts and health practice would also serve to ensure consistent and equality of provision of arts practice for patients and artists working in health settings across the country. Core themes were identified that are crucial for any course we now create. These themes for course content are: Ethics, Hospital and health care settings environment, Patient/client centred care, Self awareness and motivation, Value of arts and health/best practice, Therapy, Overview of nature of disease, Facilitation/group work skills, Nature of collaborative practice, Research skills, Language and communication skills, Project planning and development skills and an overview of Arts and health. Placements and mentors were identified as crucial to this course.

Full consultation with all stake holders, both from the worlds of the arts and the health service was undertaken. This research phase was led by a consortium of three highly qualified organisations, whose partners represent an ideal mix of expertise in the areas of arts programming, arts and health management, innovative training, collaborative arts practice and academic research and course development. Together with all the stakeholders consulted, we have aimed to create and implement a course which is mutually beneficial for both artists and healthcare organisations.

SECTION 5 FINAL DRAFT OF COURSE

5.1 Proposed course outline, including recommended course content, schedule and length of course

Following the consultation, literature review and study of best practice, the following course outline has been devised. The aim is develop a course at HETAC Post Graduate Certificate level in the first instance. Full details of course content, length of course, schedule and placement recommendations follow.

AIMS OF COURSE

- To provide a thorough introduction to the role of the arts in healthcare, both theoretical and practical
- To equip students with best practice models for working in arts and health
- To provide students with a thorough grounding in arts in health practice
- To fully prepare artists to work in healthcare settings as arts and health practitioners
- To run a course to a high professional level, with a consistency and standard which enables validation and accreditation to HETAC standards

COURSE OBJECTIVES

The course will provide the student with the following:

- An overview of the relationship between the arts and health
- An overview of current best practice, both nationally and internationally, including research in arts and health
- An overview of the Irish health service
- Introduction to common illnesses and diagnoses, treatments and effects of treatment
- A thorough grounding in professional practice as an arts and health practitioner, to include implementing, administrating and evaluating arts in healthcare programmes as well as an awareness of current research and funding opportunities.
- Development of self awareness and understanding of group dynamics, boundaries, and issues of confidentiality

- Experiential learning regarding the use of the art form flexibly with patients
- Training, mentoring, and experience in facilitating the arts and creative process in health care settings
- An overview of existing career options and programs which integrate the arts into healthcare

COURSE CONTENT

1. ARTS AND HEALTH OVERVIEW To include:

- Arts and health practice
- Arts Therapies
- Arts and the Environment
- The role of Arts in Society
- Introduction to medical humanities
- What is arts and health?
- Models of art practice in health care settings e.g. teaching, therapy, community art, art and health
- History of arts in healthcare
- Research in arts and health

2. VALUE OF ARTS AND HEALTH AND BEST PRACTICE

An overview of current best practice regarding the arts in health, both nationally and internationally, including research in arts and health

- Case studies and examples of best practice in arts and health
- International experts, guest speakers, field trips to visit arts and health national centres
- The benefits of arts in health - social, psychological, physical and spiritual aspects

3. HOSPITAL AND HEALTH CARE SETTINGS ENVIRONMENT

- An introduction to the health service structure, policy, culture and organization (national and local)
- Hospital rules and regulations and issues particular to the health service: e.g. ethics, health and safety, infection control, confidentiality

- Professional conduct within health service settings
- Roles and responsibilities of health care staff
- Understanding the importance of hygiene and its implications
- Understanding the priorities of health care staff

4. FACILITATION/GROUP WORK SKILLS, ETHICS, SELF AWARENESS, MOTIVATION AND THERAPY

An introduction to group dynamics, boundaries and issues of self awareness and confidentiality

- Group dynamics, types of groups
- Professional boundaries and self awareness
- Confidentiality
- Equality awareness
- Intercultural competency
- Understanding your own motivation and drives
- Issues of care including child protection
- Principles of conduct
- Limitations of arts and health projects
- Experiential workshops using your own art form in a new and creative way
- Experience of a new art form. What does it feel like to be offered an opportunity to be creative without any prior experience of that art form?
- Art therapy experiential exercise

5. PATIENT/CLIENT CENTRED CARE

- What is patient-centred care?
- The needs, expectations and limitations of patients
- Importance of confidentiality
- Input by patients on their perspective of health, healthcare and the role of the arts

6. OVERVIEW OF NATURE OF DISEASE

Introduction to common illnesses and diagnoses. Effects of illness, what is health? What is illness? Physical, emotional, spiritual and mental aspects of health. A brief overview and introduction to health issues in the following populations:

- Older age
- Children
- Mental health
- Learning disabilities
- Physical disabilities
- Addiction

7. LANGUAGE AND COMMUNICATION

- Presentations and workshops by members of health service staff, experienced arts and health practitioners and health service managers on the importance of language and communication from both arts and health perspectives
- Communication and relationships with health care workers, patients, families and other ancillary hospital staff

8. PROJECT PLANNING AND DEVELOPMENT

A thorough grounding in professional practice as an arts and health practitioner, to include implementing, administrating and evaluating arts and health programmes:

- Developing a proposal, planning an arts project, aims and objectives
- Getting started – techniques and approaches
- Negotiating contracts - Examples of residencies, sessional and long term contracts
- Documentation and evaluation
- Funding applications
- Report writing and presentation skills
- Project management
- Appropriate use of photography
- Role of celebration

9. NATURE OF COLLABORATIVE PRACTICE

- Collaborative process and patient-centred care
- An understanding of and experience of the artist's own creative process.
- Experiential learning regarding the use of the art form flexibly with patients
- Facilitating the arts and creative process with hospital patients

10. RESEARCH

- Arts and Health Libraries, national and international
- Literature reviews, research techniques
- Methodologies of evaluation and research
- Presentation of examples of arts and health research

11. STANDARDS OF PRACTICE

- What are good standards of practice?
- Professionalism and best practice

TARGET STUDENTS

Artists of any art form who wish to work in healthcare settings

Artists who hold an undergraduate degree in one of the arts or have equivalent relevant experience in the field.

LENGTH OF COURSE¹¹

Part time over 20 weeks.

40 hours of lectures (20 weeks x 2 hours) either at weekend or mid-week

40 hours of placement experience (2 x 10 weeks).

PLACEMENTS AND MENTORS

Placement 1: Shadow existing arts and health practitioner

Placement 2: Student develops own work with patients

Following completion of course artists would be expected to have a mentor to guide them in their work. Placements would be approved by course directors and would agree to support and guide the students.

ASSIGNMENTS Two written assignments

- A review of the observation placement. Description of the work observed, with aims, objectives, evaluation and descriptive case vignettes
- Theoretical review of relevant literature in one specific area of choice related to arts and health practice

¹¹ The requirements of HETAC accreditation may well determine the length of both the course and placements

5.2 RECOMMENDED TUTORS

This list of recommended tutors is *by no means exhaustive* but emerged from consultation and discussion. Many of the recommended tutors may be best placed to give expert guest lectures on specific topics outlined in the course content¹².

Ms Deirdre Healy, Create

Ms Hilary Moss MBA in Health Service Management, Arts Officer at the Adelaide and Meath Hospital and Music Therapist

Ms Mary Grehan, MA, Arts Officer Waterford Healing Arts Trust

Ms Helene Hugel – Puppeteer and Arts and Health Specialist

Mr Denis Roche MA

Ms Catherine McCabe

Ms Catriona Brady, Art therapist, Mental Health

Ms Lorna Hastings, Director, Arts Care

Ms Edel Nolan, MA

Martin Fahy, Lecturer, NUI Maynooth

Prof Desmond O'Neill, Associate Professor of Medical Gerontology, *or recommended Doctor*

Ms Aisling Walsh, Occupational Therapist, Mental Health Services, AMNCH *or recommended Occupational Therapist*

Ms Teresa Quinn, Clinical Nurse Manager, AMNCH, *or recommended Nurse Manager.*

Ms Suzie Cahn, Art Therapist, Director of Irish Association of Creative Arts Therapists.

Ms Gillian Field, Artist, Art Co-ordinator, AMNCH

Dr Jane Edwards, Director of Music Therapy, World Music Centre, Limerick

Ms Elaine Agnew, Music Facilitator

Ms Jenny Elliott, Dancer, Arts Care, Research

Ms Elaine Burke, Arts and Health Manager, UK

Mr Dara Carroll, Arts and Environment Manager, Mater and Children's Hospital Development

Ms Sheila Gorman, Arts Council

Mr Peter Senior, MMU

¹² This list is our recommended tutors, but we advise that all tutors are selected using equal opportunities selection processes.

3.3 EVALUATION METHODS

Evaluation of the course will be carried out in a number of ways, using both formal and informal methods. Evaluation of the course content and delivery will be planned from the earliest preparation of the course and will be built into every stage of the course.

Evaluation will take place primarily with three groups – the course participants, the placement hosts and the tutors.

As this is a new course, the evaluation will play a key role in informing the course co-ordinator and the consortium as to improvements that can be made for future development of the programme. Evaluation supports a learning environment and can translate 'mistakes' into opportunities for improvement and learning.

Methods used may include interviews with participants, placement hosts and tutors, focus group feedback, questionnaires, project and placement documentation, interviews and observation.

The course co-ordinator will be responsible for agreeing evaluation methods. The resources available to the consortium for development of this course will play a large part in determining the extent and depth of any evaluation process undertaken.

5.4 LEARNING STYLES

The consortium considered, in developing this course, the ways in which artists learn and the need for a broad range of teaching methods and styles for this particular type of course.

The consortium is comprised of leaders in third level academic institutions with extensive experience of teaching both artists and healthcare professionals. The consortium is aware of the different learning styles of artists and healthcare professionals, as well as differences in learning within different art form specialties.

The team advocate that artists would learn by observation, reflection and discussion of their practice (both within the healthcare setting and within student feedback sessions) as well through discussion between artists and healthcare professionals.

The group also recognizes the limitations of time for healthcare professionals to engage in this learning process, but recommend that healthcare workers would give lectures and workshops as part of the course, support, discuss and reflect on the artists placements and possibly also participate as students on the course. It is also suggested that at least one course tutor should have significant experience of both art and healthcare professions.

Student placements in healthcare facilities are of paramount importance for this course. Reflective discussion, preparation, planning and recording of placement experience is crucial to artists learning about art and health practice. The standard of placements is therefore of high importance. Supervision, peer evaluation and observation are also key components to learning for artists.

For more information on any aspect of this report, please contact:

Hilary Moss

Arts Officer

The Adelaide and Meath Hospital, Incorporating the National Children's Hospital

Dublin 24

May 2007

APPENDIX ONE

ORGANISATIONS AND INDIVIDUALS WHO PARTICIPATED IN THE CONSULTATION PROCESS TO DEVELOP THIS COURSE

Mr. Martin Fahy, Lecturer in Music, NUI Maynooth and Music Therapist, Our Lady's Hospice, Harold's Cross

Ms Angela Bracken, Director, MA Dramatherapy, NUI Maynooth

Ms Mary Grehan, Waterford Healing Arts Trust

Ms Ann O'Connor, HSE Southeast

Ms Sheila Grace, Art Director, St James Hospital

Mr Dara Carroll, Arts Manager, Mater and Children's Hospital Development Office

Ms Margaret Flannery, Arts Officer, c/o Galway Arts Centre

Ms Emma Staunton, Arts Officer, St Luke's Hospital

Ms Aifric Gray, Arts Officer and Art Therapist

Ms Orla Moloney

Mr Paul Maher, Director, Age and Opportunity

Mr Raul Araujo, Arts Co-ordinator, Cross Border Centre, Dundalk

Mr Peter Jordan, Lecturer, Fine Art, Waterford Institute of Technology

Ms Freda Manweiler, Director, Smashing Times Theatre Company

Dr Jane Edwards, Director of Music Therapy, University of Limerick

Mr Ed Kucjaz, Director, Art Therapy Dept, Crawford Institute, Cork

Ms Deidre McCrea, Music Network

Ms Dearbhla Brosnan, The Royal Irish Academy of Music

Mr Philip Napier, NCAD

Ms Suzy Cahn, Executive Director, Irish Association of Creative Arts Therapists

Ms Michelle Howe, The Abbey Theatre

Peter Senior, Director, Arts for Health, Manchester Metropolitan University, UK

Ms Lorna Hastings, Director, Arts Care

Ms Hilary Cromie, Arts Officer, Royal Victoria Hospital, Belfast

Mr Brian Chapman, LIME, Manchester

Ms Elaine Burke, Arts and Health Manager, Hull and East Riding Primary Care Trust, UK

Ms Anne Mullins, Director, Vital Arts

Ms Helene Hugel, Puppeteer and Arts in Health Practitioner

Ms Catriona Hardie, Artist

Ms Gillian Field, Artist
Ms Nicole Rourke, Writer
Ms Aimee O'Neill, Arts Practitioner and Workshop Facilitator
Ms Jenny Elliott, Dancer in Residence, c/o Arts Care
Ms Justine Foster, Co-ordinator, West Cork Arts Centre
Ms Baibre Ni Chaoimh, Calypso Productions
Ms Ann McCarthy, Arts Officer, Mayo County Council
Mr Denis Roche, Artist
Ms Aingela de Burca, Musician
Mr Declan Mulligan, Artist
Mr Nico Brown, Musician
Ms Anne Michelle Phelan, Artist
Ms Jo O'Rourke, Senior Health Promotion Officer, HSE Dublin NE
Ms Carol Roe, Volunteer Services Dept, AMNCH
Ms Deirdre Cahill, Volunteer Services Dept, AMNCH
Ms Teresa Quinn, Clinical Nurse Manager, AMNCH
Ms Hilary Daly, Assistant Director of Nursing, AMNCH
Mr David Willow, Director, AMNCH
Ms Linda Coyle, Speech Therapist and Music Therapist, AMNCH
Ms Aisling Walsh, Occupational Therapist, Mental Health, AMNCH
Ms Eadaoin Ni Chathasaigh, Occupational Therapist, Mental Health, AMNCH

APPENDIX TWO

A NOTE ON ARTS IN HEALTH AND ARTS THERAPIES

The steering group was aware of, and discussed, the many issues related to the work of arts and health practitioners and arts therapists, both here and in many other countries. The literature review and consultation process raised the similarities and differences between training to be an Arts Therapist and the proposed training for Arts and Health Practitioners. In conclusion, the group recommends that the contribution and expertise of Arts Therapists in the healthcare arena is respected whilst developing an Arts and Health Practitioners training course and that a culture of mutual learning is promoted. Recognition is needed by the Arts Council of both Arts and Health Practitioners and Arts Therapists, as both groups are professional artists working in health care settings.

Above all, the research process highlighted the vulnerability of patients and clients of health services and that patients' needs are more important than any one approach to using arts in health care settings.

Arts Therapies integrate the experience of a given art form with the theories and practice of psychology, psychotherapy and psychiatry as a unique form of therapeutic intervention. Arts practices have a focus on artistic processes and artistic outcomes for their own sake.

The distinction between the two is sometimes difficult to make, as many arts therapists are also practicing artists. But it is important, since art, music, drama or dance movement therapists are qualified health professionals equipped to deal with therapeutic work.

We make a clear distinction between arts practice, whose primary goal is the experience of art or the production of art, and arts therapies, whose primary function is therapeutic.

This is a continuing area of discussion in arts and health work and should be clarified in relation to each project.

The Arts Council *Arts and Health Handbook: A Practical Guide*, 2003, page 104.