

Musicians in Residence at Leighton Hospital 2024



arts

at Mid Cheshire Hospitals



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Evaluation Report of Musicians in Residence Project

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2025

Executive Summary

A musicians-in-residence project was delivered at Leighton Hospital from September to December 2024. The project aims were to explore the benefits of a music programme on different patient groups and to assess the impact of staff training to support more meaningful use of music in patient care.

Project partner, **Live Music Now**, provided training and support towards a Badge of Excellence Award. Five members of staff completed the programme and achieved the award. Rapport gradually built between musicians and staff during the residency, with staff gaining experience of the possible approaches that could be developed and confidence in contributing to planning and some delivery.

The project focused on four wards: Children's (Ward 17), Chemotherapy Unit (Cancer Centre), Stroke (Ward 6) and Diabetes and Endocrinology (Ward 14). There was evidence that music interventions improved mood and confidence, reduced anxiety, increased movement, improved hospital welcome and provided positive distraction.

Participation in the Badge of Excellence Award was seen to motivate staff and structure and prioritise reflective practice. Due to high acuity Ward 14 were not able to support the project for the full 10 weeks.

Contents

Introduction	5
Children's Ward	8
Stroke Ward	12
Cancer Centre	77
Diabetes Ward	21
Badge of Excellence	23
Conclusions	26
Appendices	27

Introduction

Research shows that music, and live music in particular, can have significant positive impacts on patient experience and wellbeing.

A new partnership was developed with [Live Music Now](#) (LMN) for the project and together we matched two musicians with four participating wards, providing a regular series of live, interactive music sessions adapted for specific cohorts of patients.

Alongside other visiting musicians, trained in healthcare settings, the musicians also performed in staff areas and public spaces throughout Leighton Hospital to raise the profile of the project. Interactive music approaches delivered on wards involved a mixture of personalised music sessions, adapting to the needs of patients, as well as more creative and interactive sessions where appropriate. They also adapted an existing training programme designed for staff working in care settings to pilot with a healthcare context.

About Arts at Mid Cheshire Hospitals

MCH Arts programme supports the wellbeing of staff, patients and visitors through creative environments and activities. Our programme is co-designed with staff and patients and offers creative writing, visual art, dance and music resources, performances and activities that provide engaging and welcoming spaces and experiences for all.



The programme provides online and in-person opportunities for patients and staff across Leighton Hospital in Crewe, Victoria Infirmary in Northwich, and our community-based Central Cheshire Integrated Care Partnership (CCICP). To fulfil the geographical requirements of the external funding for this project, we focused on Leighton Hospital.

About Live Music Now

Live Music Now recruit, train and commission professional musicians to work in community-based education, care and health settings, creating inclusive, measurable social impact through music. Their work provides access to live music for a range of people to enhance quality of life, health and wellbeing for all ages.

Project Aims

- **To evaluate the impact of regular music sessions on staff and patient wellbeing.**
- **To evaluate the impact of training in working with musicians for staff supporting patients.**

Participants

Several wards were directly approached, targeted to provide a range of patient cohorts and contexts. The project was also promoted to all staff across the hospital with an invitation to apply to be part of it. Those wards and areas that expressed an interest were asked to complete an online questionnaire on the challenges they currently faced that they felt could potentially be addressed by a regular programme of live music.

Four areas were selected: Children's Ward, Stroke Ward, Endocrinology and Diabetes Ward and Cancer Centre. Each area involved was asked to nominate a key staff member for the project and at least one member of staff to participate in the Badge of Excellence training. Full participation in the Badge of Excellence programme was optional, and five staff members chose to undertake the full award.

Evaluation Methods

An evaluation framework was created to ensure project aims were measured and data was collected through patient surveys, interviews, reflective journals and Badge of Excellence documentation. A general survey for the project was developed in line with LMN focus on the impact of programmes on patient mood and feelings of anxiety and loneliness. Two volunteers were recruited through the Hospital Volunteering Service to support some of the evaluation gathering with patients.

Delivery

Live Music Now musicians are trained in performing, singing and creative music-making with community-based groups. They tailor activities for particular health, social and wellbeing outcomes.

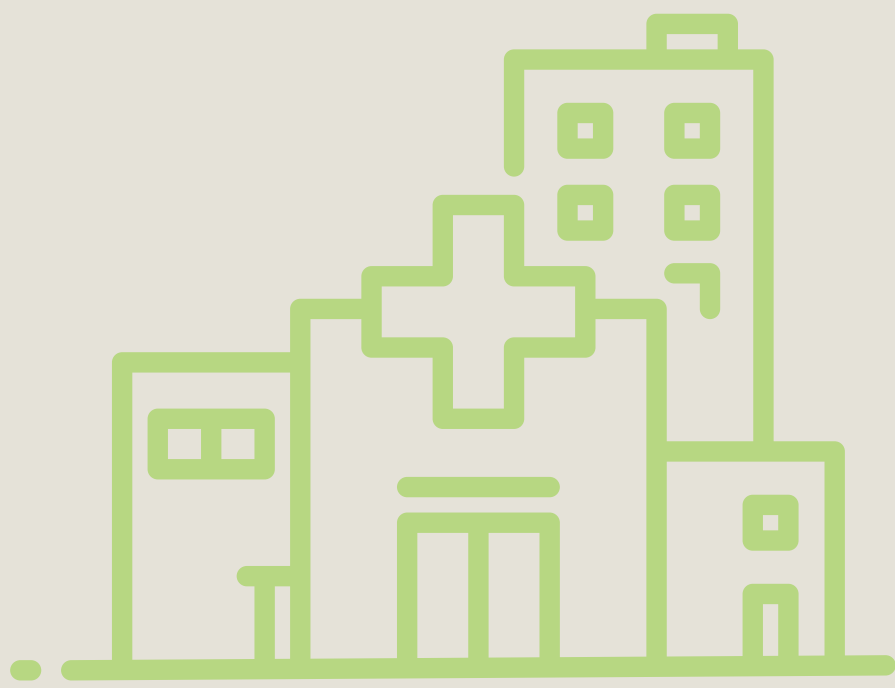
For this project, a combination of different approaches was developed during the course of the project with patients and staff.

Musicians

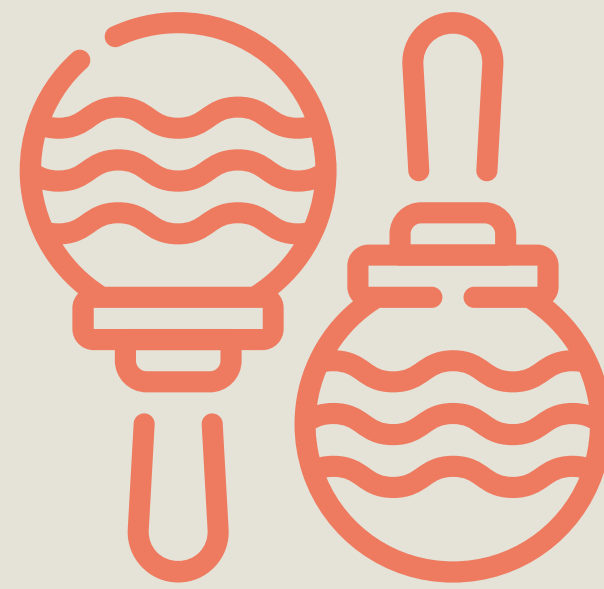
Two musicians, (singer/songwriter and woodwind), devised and delivered interactive sessions for particular patient cohorts and supported staff with their training.

They also performed alongside two other musicians for Creativity and Wellbeing Week in public and staff areas of the hospital (woodwind and harp) and again with one other musician for a Christmas celebration of the project (woodwind).





4 participating wards



42 music sessions and performances delivered



339 patients directly benefited



Approx. 2500 patients staff and visitors benefited from performances in public areas



5 badge of Excellence Awards achieved



13 staff participated and supported

Children's Ward



Ward 17 Children

The Child and Adolescent Unit (CAU) at Leighton Hospital consists of an outpatient ward, (Ward 16) and an inpatient ward (Ward 17). For this project we worked with Ward 17 and primarily the Play Team. The Play Specialists deliver activities for all children to distract during invasive procedures, reduce anxiety and provide a positive experience. The Play Team are closely involved in pre-operative assessment clinics and assist in taking distressed children to theatre for surgery. During the project, three of the Play Specialists worked alongside musician Eleanor Mills to explore how live music could best support their patients and the impact that it had.

All three staff members worked towards, and achieved, their Badge of Excellence in Use of Music in Care and Health.

In their pre-project questionnaire staff felt that the project would benefit patients by, “Entertaining the children and keeping them busy.” They also felt it may “encourage a future passion or help a child to express some pent-up emotions.” For themselves and other staff it was hoped that the project would, “Give some light relief, especially when the ward is difficult, just by providing some joy.”

Delivery

The musician delivered 15 sessions for the ward with some time also spent in the Children’s Outpatients Department. Sessions were a mixture of group work with younger children, delivered in the playroom, and one-to-ones with children at the bedside or study room. In the playroom, children were encouraged to explore instruments provided by Eleanor, sing and play along to songs that she led. They were also offered the opportunity to take part in musical games and activities. Usually, parents were with their children to support and encourage. For older children, one-to-ones focused on discussing music, composing with chimes and garage band and learning songs on chimes and ukulele.

Sometimes interactions required a more sensory approach and Eleanor focused on allowing children to touch and feel the vibrations of the instruments as she was playing or to handle the instruments and shake, tap or strum.

Evaluation

Appropriate approaches to evaluation were discussed with the Play Team and we developed a child-friendly evaluation form for older children and teens and an emoji chart for younger children. The evaluation form was designed to build on familiar concepts of ‘rainbow moments’ and ‘thought clouds’ used in the ward. The team advised on appropriate terms to use regarding specific measuring of wellbeing aligned to the adult survey, in particular, distraction, mood and anxiety.

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My rainbow moment today was

My thoughts about the music today were

What we learnt

The following themes emerged from the analysis of the data: Teamwork, improved mood and increased confidence.

Teamwork

Staff confidence grew in working with the musician and delivering activities as the project progressed. As a growing understanding of the impact that the music was having on patients and what the possibilities could be, staff became more proactive in organising the logistics of the day. They were increasingly confident identifying children who they felt might benefit and talking to clinical staff and parents to brief them and bring them on board.

Both the musician and play specialists referred to teamwork, learning from each other and understanding the practice of the other. There was evidence of dynamically adapting their own practice through collaboration. For example, one staff member described how, “We do a lot of colouring but wouldn’t have thought of adding chime bars and putting those two things together.”

The play specialists all commented on the specific skillset of the musician in establishing a rapport with the patients. The musician’s experience and ability to both ‘slot in’ and ‘read patients’ cues’ impressed and reassured staff. This was partly due to time taken to chat about music and what the patient liked and was interested in. For one member of staff this became a strategy that she employed herself, “It’s a way of getting a talking point with those teenagers, it’s a bit of common ground.” The music sessions provided an opportunity for staff to develop individual rapport with older patients.

“We do a lot of colouring but wouldn’t have thought of adding chime bars and putting those two things together.”



Personalisation of sessions was an important factor for patients and staff. Staff noticed how this helped to build relationships between the musician and patients but also was important in raising self-esteem.

One play specialist described this from a young person’s perspective as, “They’ve noticed me and they know what I like.” The musician took time to prepare for return visits to patients, learning songs that they had suggested and writing down chords so that they could play together.

Sessions often ended with a performance from the musician and patient, celebrating what they had achieved together.



**“That was the first time
I’ve seen him smile since
we’ve been here.”**

Improved patient mood

The music activity provided a positive distraction for the children, breaking up the day and relieving boredom. One play specialist described how, “It’s a way to get them excited about something in their day. It can get very boring in hospital.” For the older patients the musician and staff commented on how it became something that they looked forward to, a highlight of the week that broke up the routine. Older children, often slightly reluctant to participate at first, regularly spent up to an hour and a half in a session. One parent commented on how her child hadn’t wanted to get out of bed all day but then spent over an hour enjoying the music session. In relation to her experience of working with children in hospitals, the musician commented on how music, “Can take you out of this current place into a creative and different mindset which is really important.”

Music activity provided an opportunity for children to connect with each other either, through group songs in the playroom or in bays with two children together. The musician described one interaction with four and five year-old patients, “[They] were very excitable and engaged. They played instruments and danced together and requested songs.” Staff and parents reported positive impact on babies and younger children. The parent of one very young patient was moved to tears following a session, saying that, “That was the first time I’ve seen him smile since we’ve been here.” The play team and musician both acknowledged the importance of the programme for parent wellbeing also.

Increased confidence and self-esteem.

For all patients, but especially children, the hospital environment can deprive them of independent choice and autonomy. Having the chance to do something as simple as choose whether or not to participate, choose an instrument or choose a song was seen to be important to the older children. One patient with an eating disorder became more confident in saying what she wanted to do during the sessions which the play specialists felt was a significant step for her.

Parents reported to staff that their teenagers were not only a lot happier for the rest of the day, but more confident when doctors were doing their rounds. One patient on her evaluation form said how special and seen she had felt. Her mother commented how she never usually spoke about herself in this way.

Increased confidence was particularly evident with young people the musician worked with on a number of consecutive weeks. These patients were older, and several were in hospital with eating disorders. Some of these patients initially were reluctant to take part but over several weeks became more engaged and gained in confidence. The musician reported that, “One teenager had made a song by the end of five weeks and someone else had learnt their favourite song on the ukulele.” Another patient asked her mum to bring in her own flute from home so that she could play with the musician the following week. Although she had enjoyed playing previously, her mum said that she hadn’t played for some time and that this was a positive step.

Children were encouraged to experiment with instruments and play with chords and composition. They developed creative skills and demonstrated pride and a sense of achievement at the end of the sessions. One Play Specialist said, “It’s something they can take away as a positive that they got from hospital...You never know what that could hold for them outside of hospital.” Several patients recorded themselves on their own or parent phones to share with siblings or other friends and family, connecting them with home.

Stroke Ward



Ward 6, Stroke and Rehabilitation

Ward 6 is a rehabilitation ward that focuses on promoting independence and quality of life after stroke. This is gained through active participation in a multidisciplinary approach of daily rehabilitation and a high-quality standard of care. The staff on the ward provide specialist treatment, help identify and address specific rehabilitation goals, support, provide information and advice aiming to achieve a safe and supportive discharge from hospital.

We worked with the Occupational Health team, primarily two Therapy Assistants who were keen to build the weekly visits from the musician into therapy groups they were already running. Therapy Assistants assist and support the implementation of a patient rehab programme set by Occupational Therapists and Physiotherapists.

They work closely with all members of the multidisciplinary team to ensure the best rehabilitation method and meet all realistic goals of the patient and family with an aim to promote independence. We worked closely with two Therapy Assistants throughout the project. Both worked towards, and achieved, their Badge of Excellence in Use of Music in Care and Health.

In their pre-project questionnaire staff said that they had a challenge with patient engagement with activities. They felt that the project may help improve mood for stroke patients and provide insight for staff into how group engagement supports this.

Delivery

The musician delivered 10 sessions for the ward. The focus was on the therapy group programmed for that afternoon each week, but Esme also worked with the Therapy Assistants at the bedside of patients who wanted to participate but were unable to join the group. Group sessions were designed to encourage engagement with other patients, the musician and the music itself.

Some percussion instruments and ukuleles were offered to patients as an option. Sessions began with some gentle music as patients were brought into the room followed by the musician playing and leading some singing. The musician and Therapy Assistants facilitated discussions around people's music interests and a group 'repertoire' developed as the project went on. Patients were given the option to join and were taken back to their beds if they wanted to leave at any point.

Evaluation

The general questionnaire designed for adult patients taking part in the programme was used and Therapy Assistants agreed to complete these when they could with patients who were able. Therapy assistants also adapted the monitoring forms that are usually used for their own group sessions to assess patients and shared anonymised data from these.

What we learnt

The following themes emerged from analysis of the data: Increased engagement and connection; improved mood and outcomes; staff development.

Increased engagement and connection

Patients' engagement and participation developed during sessions and over the duration of the project. The therapists and musician created a safe and supportive environment where patients, as well as staff, encouraged each other. The musician, commenting on one patient's first interaction with the group, described how, "We chatted at the beginning, and she said she used to sing in choir, but she said she would only listen today. However, despite her reluctance at the beginning, as the session went on, she was singing along and [patient] sitting next to her told her she had a lovely voice." On another occasion she noted, "It was nice to notice that J and G were interacting with one other after the session – talking about the music and instruments."

The musician spoke about a "community feel," during the sessions and one Therapist commented on how, "It brings them together with camaraderie, it gives them a sense of wellbeing and it makes them feel as though they have something to look forward to." On another occasion the musician commented on how, "We had just six patients in the session today but regardless the energy level was really high with everyone joining in."

The musician and therapists planned each session to gradually build participation: "We start with gentle music and a chat - once people get to know you a little bit, they let their guard down and they're able to relax into the music session."

Personal connection to particular songs was important with this patient group, not only in terms of developing engagement but also in terms of their therapy. The musician spoke of how important it was, "to play songs that they know, it triggers memories ... staff have commented on how amazing it was that someone was singing along to those lyrics."

"It brings them together with camaraderie, it gives them a sense of wellbeing and it makes them feel as though they have something to look forward to."

Patients suggested songs for the next week's sessions and inputted other ideas such as printed lyric sheets to support participation which did help some patients to sing-along.

Some sessions were delivered at bedsides. For the Therapists, this was important in opening up access to the music but also in encouraging more engagement: "We're able to apply this individually as well for patients at the bedside, it helps those people who are acutely unwell, unable to attend a group, to focus and motivate and come to that group setting, so they feel part of something then."

Connecting with others as part of the group sessions was important for therapy and helped to address feelings of loneliness. The musician commented on how, "Patients might seem a bit lonely, they might be in a room on their own. You see their spirit lifted from spending time with people and just feeling less lonely." Singing helped to foster a sense of community not just in the group but in the ward generally. The musician recorded how on one visit, "We sang Happy Birthday to a patient who was turning 94 today. His family was there and we all sang together."

Improved mood

Improvement in mood was reported consistently throughout the project. One Therapist described how, “We’ve seen patients come in acutely unwell, unresponsive to sound or stimulus of movement but when we’ve brought them into the therapy group, their presentation has changed, their cognition has become more alert, you can see the expression on their face change.”

The musician spoke about, “one patient who said how she had been having a bad day but she felt so uplifted by singing.” Another patient in session two had been quite emotional. She played guitar (like the musician) but was worried that she would not be able to any longer following the stroke. This patient wasn’t well enough to join the group the following week, but the musician visited her at the bedside providing an important boost. She described how, “I played Big Yellow Taxi which she requested last week. She was smiling and singing along. A nurse spoke to me afterwards and said that she felt emotional seeing [patient] respond like that.”

Many of the patients were on the ward for long periods of time. It was useful to talk to staff who had got to know them and could recognise significant moments that occurred during the sessions. The musician described that, “We noticed [patient] today was singing along to “You’ve got me singing the Blues”. This was a big deal for him and the Therapy Assistants mentioned that he also remembered the music sessions and was looking forward to coming.”

On some occasions the musician could provide support at very particular moments: “I saw [patient] who was emotional as he told us that he was missing his son’s graduation today. He said he wanted something upbeat to keep his mind off things. I played him two songs and we chatted a bit. He was so grateful and shook my hand as I left.”

Stroke patients often experience emotional changes. The musician quickly recognised this and commented on how, “The patients seemed to like the more upbeat songs such as Living on a Prayer or Tainted Love and a few were tapping their feet or mouthing words along.”

Several patients that the musician worked with were non-verbal and eye contact became an important indicator for engagement. The musician described how, “[Patient] was particularly enjoying singing along to songs like Jolene, Suspicious Minds and Yellow Submarine. He was also really making eye contact with me as he sang.” Another patient at bedside with wife and son:

“He had his eyes looking down through most of it but at the end looked up and made direct eye contact. His son was emotional at this moment and we reflected together afterwards on how touching music can be.”



Staff ownership and development.

Staff identified an extra dimension to therapy with the addition of music to the group sessions. One therapist described how,

“I love the rehabilitation side with patients, getting to know them, getting to understand them, giving them those input therapy treatments but with the music- it’s brought another dynamic to it.”

The same Therapy Assistant described engagement with music as an important element of therapy: “Just as much as the physical rehabilitation such as the walking practise, the upper limb movement, the personal care, washing and dressing, this musical stimulus is just as important I feel, and I’ve noticed a difference in patients who have engaged with this through this period.”

Talking about and engaging with music provided a new approach for the therapists to understand and build relationships with patients and engage them in group sessions. One Therapy Assistant commented on how, “I’ve learnt lots of things during the project; how to engage more patients during therapy with music.” Another spoke of how the music sessions, “Helped me understand the feelings of the patients.”

Therapists saw some significant physical impact on patients through the music interventions. One staff member said, “The results you can get from the patients sometimes is unbelievable, it’s wonderful.” They described how,

“Using percussion instruments to explore tempo and beat sounds simplistic in itself but if we can follow that pattern and structure, we can get a foot tapping, we can get a head nodding, we can get a smile. That’s all cognition and engagement. And while they’re doing that, they’re firing neurons through the brain, they’re forming those new patterns again that they need following a stroke.”

One of the aims of the project was to provide experience and training for staff in hosting and working with musicians. Throughout the project an increased understanding of each other’s practice was seen from both the musician and Therapists. Both were keen to provide high quality delivery and develop a collaborative way of working that enabled them to fulfil their side of the project to a high standard.

On playing at three bedsides for session two the musician described how,

“This part of the session felt rushed to me. I fed this back to the therapy assistants at the end and said how it is quality over quantity. We discussed this in the debrief and set out a new schedule for next week which should hopefully help this.”

Later on in project she commented: “I noticed that therapy assistants were more relaxed today and not trying to squeeze too much in which feels like a really good step forward.”

The musician really valued the input and support of staff in how to best work with patients, for example on one occasion describing how, “We were planning to do another small group session in a different bay but unfortunately there were some patients asleep or unwell so instead we decided to visit individuals.”

Cancer Centre



Chemotherapy outpatients, Cancer Centre

The Cancer Unit at Leighton Hospital provides chemotherapy services for patients in the local area. The unit sees 20-30 patients /day. Staff hoped that the project would provide holistic, psychological and emotional benefits to patients while they are having treatment and would benefit staff by providing a calm atmosphere. We developed the project with the Matron for Cancer Care and other senior members of the nursing team. A member of the support team joined the training session on behalf of the Centre but felt that the Badge of Excellence would be difficult to accommodate within their role and did not pursue.

Delivery

The musician delivered 10 sessions at the Cancer Centre. Each session was split between the waiting area and the chemotherapy treatment room. Music was played to distract and calm patients in the waiting area. In the chemotherapy treatment room the musician approached patients and if they wanted her to play for them she sat with them and chatted about their musical interests and played some songs. On several occasions patients would request songs and the musician would learn to play them at their next appointment

Evaluation

We had the support of volunteers to gather survey responses for these sessions for 5 weeks. One volunteer was very confident and experienced in talking to patients and used the questionnaire as a basis for conversation which elicited some rich data. See Appendix 1 for detailed summary of questionnaires .



What we learnt

The following themes emerged from analysis: Welcome and distraction, improved mood, and reduced anxiety.

Welcome and distraction

Patients commented on how the music made the waiting area more welcoming and how it was a unexpected but pleasant surprise. One volunteer said, “I’ve spoken to people who it was their first time and having the music here has made it so much better than they were expecting it to be.” The receptionist at the centre felt that, “There’s such a lovely vibe in the building when she’s singing.”

For other returning patents the music provided something different to look forward to and focus on for their next visit. A member of staff described how, “It’s obviously given them something to think about at home as well because they’ve come back in with requests for next time. It’s good that they’re able to take that away with them, not thinking ‘I’ve got to remember all these tablets’, it’s ‘what song am I going to request when I go back next.’”

Regularity of sessions was an important factor. The musician came on the same day every week and noticed a difference one week when she had to come on a different day: “All the patients said that they were open and happy for me to play any music but made no requests. This is interestingly quite different to the Wednesday patients I have met who have been more vocal with their music tastes. Perhaps this was because they were seeing me regularly so felt more comfortable to request?”

Improved mood

Talking about the music appeared to have nearly as much impact on patients as the music itself. One volunteer noticed how, “A few people have commented that it just gives you something else to talk about, not always focusing on illness. It takes you back to songs that you loved in the past, songs that take you back to happy memories.” Interactions between the musician and patients in the treatment room were made more meaningful through conversation.

The musician reflecting on one session described how, “I sat with P, I asked him if he wanted to choose a song, and I showed him my list- he picked Tainted Love ...I played this to him and then we had a chat about life, his plans after treatment and my music.” Patients often engaged with each other; the musician noted how in one session the music, “Sparked a bit of a conversation between three men at the end of the room about their music tastes. I got some requests for Beatles, Bob Dylan and Fleetwood Mac.”

The musician was keen to adapt and respond to patient tastes and requests, aware of how important these personal connections are, even if they were not her normal repertoire. One patient described how, “I noticed a couple of weeks ago she played this track for a guy, it was a heavy metal song but she’d changed it so she could sing it and it was brilliant. And then she came over to me played Ed Sheeran.”

“Having the music here has made it so much better than they were expecting it to be.”

Reduced anxiety

Staff were impressed and reassured by the musician's sensitive approach. It was important that we worked with a musician who could read the room and adapt to the needs of patients and manage any conflicting requests or tastes. Staff reflection and support was valuable, reassuring the musician that she could shift the mood of the music if she felt it appropriate. The musician spoke about how in one session,

“One woman was very emotional - I gave her space as this felt like the right thing. I was aware that the environment and the music may have been overwhelming for her and at one point the nurse took her out to another room.”

On another occasion she described how:

“There were four men who enjoyed chatting to me whom I've met before. P was very vocal and was singing along to many of the songs he also said a few times how soothing I was. He also requested a song, Always look on the Bright Side of Life. I felt that this song's lyrics might not be appropriate for everyone, so I went and sat next to this and played it to him gently and he was singing along. He was really happy about this.”

Finding this balance was a definite part of the musician's skillset and experience in working in similar settings. On another occasion she talked about how, “There was lots of energy and people singing along today however I was aware of the dynamics of the space with new and emotional people.”

Music was often described as providing a distraction. The musician commented on one interaction: “I played Ed Sheeran Thinking out Loud to J who had requested it last time I saw her. She was very grateful, and she talked about how she has had a hard week, but this took her mind off things.” Patients often talked about how it was soothing, relaxing, and calming. For example, one patient commented on how, “When you're having chemo when you actually go in you have nobody and it relaxed me.”

A staff member spoke about how, “It gives patients something to focus on. They're not having to think about their treatment, not having to think about where they are-they're just enjoying some live music”.

The receptionist noticed how, for patients, it was, “Hugely relaxing when they have to go for treatment or there's a delay in the clinic it makes the time go so much quicker.” And the musician reflected, “I noticed at one point S looked to be asleep, but his finger was tapping to the beat. I think the music really relaxed him.” Many patients in conversation with the volunteers commented on how the specially chosen live music was “better than the radio”.

Having the musician in the unit also improved the wellbeing of staff. Some commented on how it relaxed them and improved their mood, “It's actually quite nice for the staff as well...you know that the patients are OK because they're listening to the music...it's actually quite relaxing for us as well-we're seeing that all the patients are calm and settled.”

“They're not having to think about their treatment, not having to think about where they are - they're just enjoying some live music”.

Diabetes Ward



Ward 14, Diabetes and Endocrinology

There are up to 32 patients on the Diabetes and Endocrinology ward at any one time. Challenges outlined by staff in the pre-project questionnaire were to provide meaningful activity for patients with poor mental health, dementia and learning disabilities.

Staff felt that the project would help improve holistic care of patients and would improve staff wellbeing and the general working atmosphere of the ward. We worked primarily with two Healthcare Assistants (HCAs) and one Sister. One HCA attended the training session and was keen to work towards the Badge of Excellence but was unable to due to shifts and staff shortages.

Delivery

The musician delivered four sessions on both the bays and day room. Due to understaffing and high acuity on the ward, the support available to plan and reflect with the musician was very limited. Sessions started extremely late and were poorly attended. This meant that time with the musician was not being maximised.

Due to this, a shared decision was made to stop delivery on Ward 14 and re-allocate the slots for additional sessions on the Children's ward in order to benefit more patients.

Evaluation

No patient evaluation forms were gathered from this ward due the challenges outlined above, however some insights were gained from musician and Arts Manager notes.

What we learnt

When staff had been able to set up in the day room and move patients in there who wanted to participate, the sessions worked very well. Patients connected with each other, moved and physically responded to the music, sang along and had conversations about music and memories.

Sessions worked better in day rooms, where patients involved had chosen to take part. When sessions were located on bays, some patients were disturbed or unhappy to have the music in such close proximity. This made it challenging for them and for the musician



Badge of Excellence Training



Badge of Excellence Training

For this project, Live Music Now (LMN) adapted an existing training programme for staff in care homes, for a hospital setting. LMN provided a 2-hour formal training session for staff delivered by a LMN trainer. It was stipulated that at least member of staff from each ward take part.

This training included a formal presentation on other settings and a recently produced toolkit for musicians. As well as this, staff who decided to continue towards the Badge of Excellence Award undertook regular planning and reflection meetings with the musicians and planned and delivered part of one of the sessions. Evidence packs were completed by the participating staff and musicians as part of weekly reflective reviews.

Five staff members undertook the full Badge of Excellence award. LMN evaluation of the training was built into the participant evidence packs. By the end of the training all five felt highly confident about leading musical activities for patients.

Three members of staff found the formal training extremely helpful and two found it quite helpful. All five found the observations of music sessions extremely helpful.

Some staff felt that the Badge of Excellence gave them more credibility with others: “[It] gives us a bit more ownership and backing when presenting to the ward and people take a bit more notice.”

The Badge of Excellence format relied on reflective practice which developed throughout the project:

“We’ve been given the opportunity to run sessions ourselves and observe Eleanor and take notes and we always dedicate some time at the end of sessions to speak about what worked and what didn’t and then apply it each week.”



It was hoped that the project would develop staff confidence and ability to build musical activity into their care for patients.

Participating staff are keen to bring in more external musicians with one play specialist commenting that, “its’ really helped us feel comfortable with it.”

In a follow up survey staff who had undertaken the BOE reported that they were using music more confidently and in different ways with patients since the project. Play Specialists described using music as a conversation starter with older patients and using instruments to help build friendships with younger children on the ward. One Therapy Assistant described how he is now creating playlists with patients and using percussion instruments to follow a beat.

One musician commented on how it was great to have staff involved in this way, “It means that when we leave and we’re not coming here every week, the music can continue. Even if it’s a little bit different, even if it’s just to talk about music or to listen to music on speaker.”

The training session provided a valuable opportunity for staff and musicians to come together and discuss issues that affected them all including some challenges and ethical considerations, developing peer support.

For the musicians and hospital staff, learning more about each other’s areas of work and practice was important, not only in terms of developing practical solutions for the project, but also to expand their understanding and insight into another field to support future cross sectoral work.

One musician said, “I’ve gained a lot of experience, I haven’t worked on a project before where you are working with the staff so closely, it’s been a lovely thing to do, it’s been so nice to build that relationship with them and it’s helped me to look at the work that I do differently as well through their eyes.”

One Play Specialist commented: “It’s not something I’ve done very much before, I took my lead from them, but now I think we’ve got the confidence to facilitate it and when a musician comes in we know what works for the ward and can be the ones to initiate it more.”

“I haven’t worked on a project before where you are working with the staff so closely.”

Conclusions and Key Learning

The musicians in residence project sought to improve patient wellbeing through music and explore the impact of building in a training programme for staff.

We learnt that all patient cohorts involved reported improved mood, more connection with others, reduced anxiety and a positive distraction from the hospital environment and treatment.

Factors that contributed to the success of the project were:

- Appropriateness of the music and the skillset and experience of the musician for specific patient groups and settings.
- Participation in the Badge of Excellence Award, which encouraged reflection and more dedicated time from staff to develop and support. The award was also a great motivator for staff who all felt a sense of achievement at the end of the project.
- Having key staff involved who had flexibility and some autonomy within their roles.
- Openness from staff and musicians to learn and develop an understanding of each other's roles and practice.
- Regular, repeat sessions where patients who were involved in the project on several occasions could develop confidence and rapport with the musician.
- Volunteers with the right experience and skills to support evaluation gathering.

Challenges and barriers to consider for future projects are:

- There are huge competing demands on staff time and each day is different. The criteria for Badge of Excellence were demanding and some flexibility going forward could make it more accessible to a wider range of staff.
- Regular planning and reflection is essential to build the development of the project and maximise its impact for patients. The support of senior staff in facilitating this with dedicated staff assigned to projects and shifts arranged to enable them to do so is really helpful.
- Time allocated to evaluation and input into design would improve future projects. Ensuring that key staff are given time to input into pre-delivery planning and evaluation design would ensure more ownership and logistics and approaches that are relevant and realistic.
- There were some common ethical considerations about choice to participate and informed consent. Building this into the initial training session would be beneficial to ensure a consistent approach.

Appendix 1: Summary of Chemotherapy patient survey

43 Questionnaires completed over 5 occasions out of 10 (including Christmas session).

93% said it improved the general atmosphere of the hospital
63 % said it improved the general atmosphere of the hospital a lot
30% said it improved the general atmosphere of the hospital
7% said it didn't make any difference

89% said it improved their mood
55% said it improved their mood a lot
34% said it improved their mood
5% said it didn't make any difference

Of 25 people who said they had been experiencing anxiety,
92% said it reduced their anxiety
39% said they had a significant reduction
39% said they had a noticeable reduction
14% said they had a little reduction
7% said they had no reduction

Of 11 people who said they had experienced loneliness or isolation,
20% said they had had a significant reduction
27% said they had a noticeable reduction
48% said they had a slight reduction
7% said they had no reduction

Comments

Distraction and waiting/ anxiety

It's hard waiting having music really helps
Running up to the treatment it's really on your mind. Getting here and having the music really helped. You need distractions to get you through.
A lot of waiting around and the music is a good distraction
So good for relatives and friends in the waiting area too who are anxious for their loved one.
Definitely a good distraction during the long waits
You sit worrying while you wait and the music is a good distraction
Takes your mind off it changed my mood
I've been waking up the past 4 nights worrying about coming but it's been so good I'm not worried about coming next time

Improved mood

You get a big boost from it
Music always makes you feel better
Lifted the spirits
Cheered me up
Music is a great healer- if you are feeling down it picks you up
It really helps to make a relaxing atmosphere and lifts your mood
It's difficult coming here for treatment but I do like hearing the music which does help.

Relaxing/ calm /soothing

The music is relaxing

Really relaxing

Very relaxing

Very relaxing

Relaxing

Very calming

Very soothing

It was soothing

So soothing

Very comforting

Such a lovely soothing voice-it can't help but make you feel better

Tunes you know and very the voice very sweet and relaxing. Just what a lot of people need, not just in the Macmillan but at other clinics

The staff and waiting area are very friendly and welcoming and the music adds to it.

Made it feel relaxed and informal

Talking

Makes people talk to each other as people usually keep to themselves

Seems to encourage people to talk

10/10 I drifted off and felt calm whilst listening. It gives you something positive to talk about, the music rather than the cancer.

New/unexpected

A new experience to hear a performing artist in the hospital. An excellent idea, most enjoyable

Wasn't expecting to have music – it's great!

Its my first visit and I wasn't expecting to have such a positive experience

-it's been great

Type of music and quality of performance

Love listening to Esme

Esme has the voice of an angel

A lovely idea and beautiful voice and musician. It was soothing and helped me take my mind off my worries.

Plays really well

Very pleasant to listen to

Very enjoyable

Beautiful

Choice of music was perfect, very reflective lovely voice too

Love the music. Esme sounds lovely and is very good.

Plays known songs in a quiet calm way, loud music wouldn't work

Better than radio

It's such a nice touch and much more personal than having the radio playing

Much better than the radio

Better than radio

Lovely to see someone singing rather than just listening to the music on the radio

Background

Not intrusive, very pleasant

It's nice having the music bubbling away in the background, it's not too loud, it's very pleasant

When Esme stops singing it doesn't seem right-much nicer when she starts singing again

Future

Enjoyed listening to the music

I don't mind having the music in the background – (scored didn't make any difference)

Hoping to hear at next session

I think there should be more of this music

I hope it continues

Love this please carry on – more of this music please

I've heard Esme singing a few times and it is always a better experience when she's here singing



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