

**Arts Council England: Creative Health & Wellbeing**  
**Response from Orchestras in Healthcare/NPAG group**

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Arts Council England's recently published delivery plan for *Creative Health and Wellbeing* is an important recognition of the value of the extensive work currently jointly undertaken through the organisations listed above, and their partners. This work was first articulated in a holistic way in the [Orchestras in Healthcare](#) report (Sarah Derbyshire, Fiona Harvey, Matthew Swann February 2021).

As outlined in our response below, we urge Arts Council England to bring even greater focus and prominence to that recognition and to take into account the steps that we've already identified are required to move cross-sector work forward at scale and pace.

We welcome the commitments made in the delivery plan, which reflect our recommendations in the *Orchestras in Healthcare (OiH)* report in these important areas:

**OiH report recommends *The creation of better known and more navigable networks for orchestras, health and social care partners to collaborate on shared programmes.***

- ACE's delivery plan highlights a new focus on the NHS as a partner as well as connecting better with its structures e.g. Integrated Care Systems. Initially, this will continue to prioritise social prescribing through partnership with National Academy for Social Prescribing (NASP) and to support networks – including regional networks - and connecting existing practice.
- There is a tacit acknowledgement that NASP has so far had limited relevance for the cultural sector at scale and that a better network for the creative and cultural sector to access and deliver social prescribing is critical.
- The ABO has supported cross-sector networks through conference sessions since 2020 and at the Leeds conference in February 2022 will present a session marking significant developments since the publication of our report.
- The Orchestras in Healthcare/NPAG group has already run one initiative to support cross-sector networking – nationally and regionally - and navigation of each other's systems. The success of this online event demonstrated a real appetite for such myth-busting and networking. The model can easily be replicated within other genres.
- Currently, the administration and cost of this is being absorbed by our organisations (OL, ABO, NPAG) but with focused investment it would become a scaleable venture to develop cross-sector programmes of work, reflecting ACE's stated intention to integrate health and wellbeing focused work as an organisational outcome and move away from a project-based approach. This integrated approach was identified as a priority by delegates attending our OiH/NPAG event, connecting orchestral and hospital arts managers.
- As evidence of this, following our event, new partnerships are developing between key stakeholders in the sector particularly NPAG for Arts, Heritage and Design in Hospitals, NHS England, NHS Charities Together, the National Centre for Creative Health and the Culture, Health and Wellbeing Alliance. These new partnerships seek to normalise and scale up creative health approaches within UK healthcare, and have a key role to play in reducing health inequalities.

**OiH report found that 96% of orchestras work in health/wellbeing settings is self-funded.**

- We therefore support ACE's delivery plan to use research partnerships and data to provide an evidence base that 'increases the likelihood of investment from the health sector'.
- We also welcome the commitment to identify and promote examples of innovation and good practice in the cultural sector to the same end.
- We believe that much of the place-based work that cultural organisations are undertaking, with support from ACE, can provide data and evidence of the impact of such work on individual and community wellbeing, with potential for further links between regional networks and ICSs.
- It will be essential to establish common metrics and data so that cultural organisations are collecting relevant data that's useful both to them and to ACE.

**OiH report found that A growing professionalism in musicians' delivery, supported by specific training offered by their orchestras, is hampered by the lack of a coherent strategy.**

- We support ACE's focus on skills development (potentially working with NHS to develop training resources), supporting best practice through networks, and the wellbeing and health needs of practitioners.
- Feedback from delegates at the OiH/NPAG event signalled greater potential for a creative approach such as joint or peer to peer training cross sector, towards a Creative Care Workforce.
- Our group is well-placed to collaborate with key organisations in the professional and HE sectors in a way that establishes shared goals.

**The OiH report identified the potential for cultural organisations and orchestras to explore creative responses post-Covid with audiences from all backgrounds, and develop deeper connections to help heal fractured communities.**

- From wider experience since the report's publication, our organisations endorse ACE's clear recognition of the role of music and creative activity to alleviate post-pandemic issues around mental health, loneliness and isolation, with a focus on young people and potential for new work in related settings;
- Working holistically, this can extend naturally to support NHS staff, benefitting their physical, emotional and psychological wellbeing and improving morale and retention.
- It's essential that this work receives cross-sector investment and on a programme basis for sustainable, sustained and consistent work otherwise it could do more harm than good.
- The project partnership between our organisations (OL, ABO, NPAG) is an excellent example of how large scale cross sector work will support the scaling up and levelling up the arts in health offer in the UK and we urge ACE to recognise this replicable model.

The value of engagement in creative activities has been underscored by individual and community experiences of the pandemic, as endorsed by the recent response by the National Centre for Creative Health to the government's consultation on mental health provision. The ingenuity of the cultural sector's response in order to maintain creative activities wherever and however possible, with no additional funding and in the face of extreme financial challenges, was remarkable. This cannot be relied upon to provide sustainable, high quality activity. The frameworks that ACE proposes to put in place are welcome, along with funding, to ensure that this work continues to grow in impact and reach. In doing so we also fulfil so many of ACE's other priorities in terms of access, equality and diversity. We urge ACE to use the Creative Health and Wellbeing document as a positive starting point to connect meaningfully with organisations in the cultural sector, and for us particularly the orchestral sector, without which it will be impossible to achieve the full potential of their ambitions.