

An Evaluation Report of the Wishing Well Music in Healthcare Programme at The Royal Alexandra Children's Hospital in 2016



RHYTHMIX

Overview

The **Rhythmix - Wishing Well Music in Healthcare** programme has been bringing live music making interventions to the Royal Alexandra Children's Hospital in Brighton since 2013. "The Alex" is the only acute children's hospital for the South East outside of London.

Funding from **BBC Children in Need** enabled us to visit the hospital twice a week throughout 2016, reaching 182 children and families on the high dependency, medical and surgical wards. We use music making to relieve the isolation, frustration and anxiety that children and families can experience in hospital. For some this involved a new cultural experience. For others, a chance to sing familiar songs with their families, helping them to feel safe and secure.

Music in Healthcare

Our Musicians in Healthcare are trained specifically to work in acute hospital settings. We work closely with healthcare staff at The Alex to ensure that we work in an informed, safe way that creates the best possible interaction for each child. We move around the wards, gently singing and playing acoustic instruments like cellos and ukuleles that transform the hospital "soundscape". We approach children's bedsides with great sensitivity to "offer" music to them. Each bedside interaction lasts from 5 to 30 minutes. Our Musicians are incredibly responsive to individual need and move from soothing songs to help with relaxation to fully participatory sessions of familiar or improvised music in which we put instruments and iPads into children's hands so that they can forget their health conditions and explore, create, communicate and have fun with those around them.

As well as being disadvantaged by the illness itself, these children are:

- spending long periods in an unfamiliar, frightening environment which creates stress.
- isolated and missing out on "normal" childhood experiences like school, trips to the park, meeting different people and things that help us to learn about the world and our place in it. Babies born in hospital lack opportunities to bond with primary caregivers and risk developing life long attachment disorders.
- some of the children are known to social services. Even when well enough to be out of hospital, these children are disadvantaged by disability, mental health or by growing up in the Care system.

Evaluation Methods

1. We worked with Evaluation Consultant, Dr Anneli Haake to devise an **Observation Framework** which was used by Programme Director, Jo White and a group of 3rd year students from Brighton and Sussex Medical School to observe interactions over a 2 month period.

RHYTHMIX

2. We sent out a **survey** to staff on the high dependency, medical and surgical wards. Response rates were lower than we would have liked (27 responses in all) but the responses were overwhelmingly positive and gave us further insight into the widespread support our work now has at the hospital.
3. Our Musicians gather **feedback** from participating children, families and healthcare staff throughout the programme. This feedback, as well as case studies and reflections from the session notes are submitted to the organisation every 10 weeks. It is important to note that we target **non-verbal and pre-verbal** children in hospital as the environment can be particularly challenging for them so reading subtle, non verbal feedback is a crucial part of our work. The Musicians submit their evaluation reports to the Project Manager every 10 weeks throughout the funded period. These include reflections on their interactions, feedback from families and staff and short case studies.

Programme Outcomes

The Wishing Well programme is located in acute healthcare; factors affecting the children are extreme and unpredictable so we focus on “in the moment” outcomes and signs of improved wellbeing.

Outcome 1: Children and young people have reduced anxiety as a result of taking part in music interactions.

In response to our survey, 100% of healthcare staff agreed that “live music interactions help to reduce anxiety on the ward”. Many cited examples like this one from a nurse on the medical ward:

“The Musicians helped a child keep calm enough to accept an uncomfortable procedure. A potentially stressful situation was diverted thanks to their presence”.

Critical Care Practitioner, Janet Lee told us that reducing children’s anxiety is a priority for staff at The Alex and that our music programme helps them do this.

“We want you here every day. You are part of our team now and we want you to be more involved in how we help children feel safe. We have a moral duty to enrich the lives of the children we look after and you help us do that.”

Children are anxious not just because they feel unwell but because hospital wards look and smell completely alien. The “soundscape” of a hospital is devoid of familiar sounds like laughter

RHYTHMIX

and rain. It is stark and full of beeping machines, hurried footsteps and anxious voices. Familiar routines are lost and parental stress rubs off onto the children.

A total of 54 musical interactions were observed by Medical Students and the Programme Director.

87% of children showed clear signs of reduced anxiety as a result of making music. They demonstrated this by smiling, laughing, being curious, playful and creative. Many showed signs of relaxation after being surrounded by gentle soothing sounds:

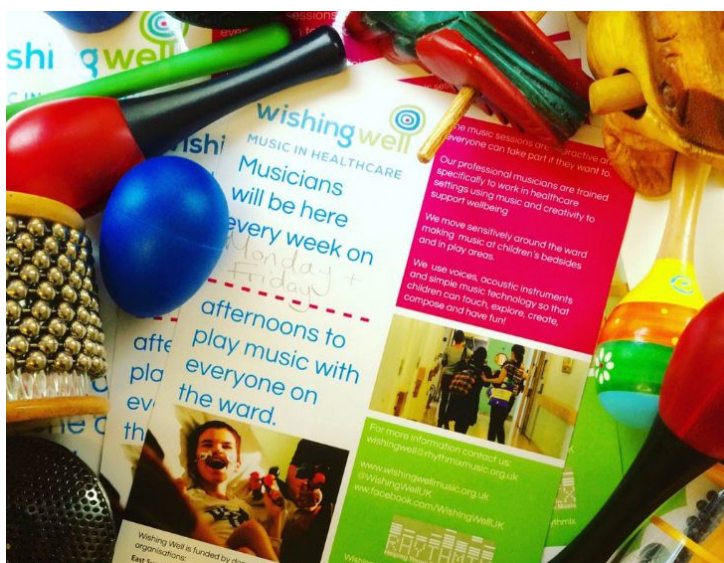
Babies made eye contact, moved their arms and legs with the music and vocalised.

Toddlers explored instruments, played musical games and took the musical lead.

Children asked questions, explored, improvised or sang familiar music. Many children we meet have profound disabilities. Their signs of engagement are subtle but deeply significant for that individual.

13% did not show signs of reduced anxiety.

Some families are too upset to engage with us. Occasionally there is a fear of being put on the spot or judged. We cannot always find the right music for that person. In this passive environment where children have no control, we absolutely respect their right to refuse an interaction.



We have a wealth of positive feedback from parents. One example of many was posted on to our Facebook page recently:

"Whilst Sonnie was in The Alex last week for 3 days we had the pleasure of meeting these wonderful musicians. They played beautiful music for him during a worrying time for us all. What an amazing group you are.... to share your music talent to bring some joy and calm in an otherwise stressful time. Thank you thank you thank you."

RHYTHMIX

Outcome 2: Increased positive relationships between child, parent and healthcare staff

In response to our survey, 96% of healthcare staff agreed that “live music interactions help to maintain family bonds on the ward”. Examples of this were given from like this one from a nurse on the Critical Care Ward

“Watching a family and child come together over a musical intervention. The child changed from sad to happy and from defiant to cooperative”

Having a child in hospital is frightening. Parents can feel disempowered as they are no longer able to meet all of their child’s needs. There is very little that a family can do together as activity focuses on clinical care, not the holding together of the family unit. This concerns staff at The Alex who see the negative impact of parental stress on the child’s well being.

If babies do not bond successfully with their primary caregiver in their first 6 months, they are at risk of developing attachment disorders which will affect their mental health for the rest of their lives. Nurturing this bond in hospital can be difficult for parents who are exhausted and stuck in an alien environment. Feedback shows that our music programme has helped to support the process. One mother of a baby born in and spending his first year in hospital said “Music helps me feel like I can have a normal experience of motherhood. I am not a confident singer but have started joining in with Old Macdonald”

A medical student who has been observing our work at The Alex remarked:

“When we go into a room, quite often the family seem disconnected. Parents might be on phones, children are often watching TV but as soon as we start playing music, the family come together. They physically move closer and start to connect more. Parents start to encourage the child and respond to whatever he or she is doing. Laughter breaks out and sometimes tears. The family is drawn together by music”

RHYTHMIX

During observations we saw that **61% of children had a definite increase in interaction with their families as a result of music making**. They showed this by an increase in eye contact, loving touch or by making music together.

20% of interactions were classed as N/A because no parent was in the room at the time.

19% of interactions did not result in improved family relations. In some cases this is because there was already communication, cuddling, or comforting before the Musicians arrived. In other cases the parent remained outside of the interaction, distracted or visibly unconfident/unwilling to join in.

Staff are not joining in with music making in the way we had hoped they would yet the survey shows how much our works helps them to see the child, not just the patient. Nurse, Janet Lee told us:

“During one interaction, nearly all the staff on the ward crowded into the bay to watch. They saw D. as they had not seen him before”

Outcome 3: Children and young people increase their self-expression through music making

In response to our survey, 100% of healthcare staff agreed that “Live music interactions help children on the ward to express themselves”.

Music gives children tools through which they can express joy or frustration. They can choose what and how they play which helps them feel in control. They can tell us, through words or responses what they like and dislike which reveals an important part of who they are.

Hospital is a passive environment where everything happens to a child. They lose any sense of control or agency. Reading research about this has been key in helping us to understand how we can use music to help children have a better experience in hospital.

Many children on the Critical Care ward have Tracheostomies and literally have no voice. We use our hands and arms all the time in communication but medical students observing our work noticed that many children cannot even do this as they have drips/monitors or dressing impeding movement.

Children in hospital long term miss out on engaging with arts and other learning activities which encourage self expression through communication of opinion, creativity or story telling.

RHYTHMIX

During our observations we saw that 59% of children expressed themselves. They did this by playing instruments with intention and creativity, by expressing preferences, taking the lead in musical games and improvisations and by being a (sometimes bossy!) musical conductor. There is a sense that the child has connected to an instrument or a song to the point where they lose themselves in it. Musician Zoe Konez reflected:

“We made music with Kim who was physically disabled and unable to speak. She had computer software that she could control with her eyes. She became engrossed in playing her instrument with us, leading the music herself when we faded and gave her space. Her look of concentration broke into a big smile and giggle at the end of each song. I could see the huge benefit on her self esteem.

“One of the medical students commented that “It gave her the chance to express herself in a way she wouldn’t have been able to otherwise”.

We saw that 41% did not express themselves musically. Although this is an important outcome for our work, it may not be the intended outcome of every single interaction. We work often with very young babies in the Critical Care ward who need to be surrounded in very gentle soothing sounds to distract them from ventilators and monitors. We are very careful not to overstimulate very sick and tired babies and instead help send them to sleep.