



Implementing creative health approaches in mental health care

Creative health approaches are proven to offer cost-effective non-clinical interventions that have positive mental health outcomes.

This case study looks at how the charity Creative Minds established a creative health programme that runs across 13 inpatient mental-health wards within South West Yorkshire Partnership NHS Foundation Trust (SWYFT).

About Creative Minds

Creative Minds is a charity hosted by SWYFT that delivers and runs creative health projects to develop individuals' and communities' mental, physical and psychological wellbeing.

A co-production opportunity within mental-health wards

Violence and aggression (V&A) can be an issue on mental-health wards, often due to boredom. Incidents of V&A may lead to restrictive practice interventions (RPI), which have a detrimental impact on patients and staff.

As part of ongoing inpatient experience improvement work, SWYFT commissioned Creative Minds to deliver a one-year project to explore how creative health interventions could help to reduce V&A incidents on a sample of five mental-health wards: a mixed-gender older people ward, a learning disability ward, a female ward, a male ward and a dementia ward.

Commissioning creative health providers

Because of the short-term nature of the funding for the project, the Creative Minds team decided to commission external creative health providers to deliver the interventions rather than recruit permanent members of SWYFT staff.

The team put out an open tender for creative organisations to provide full-time equivalent accredited practitioners to deliver creative health interventions within acute mental health settings.

To ensure freelance providers were not excluded, the tender had two parts. The first involved the management and hosting of the work and the second was the creative health provision.

The Creative Minds team was open to any creative health approach and used its own experience of previous creative health interventions when assessing applications.



The team did detail formal and informal training with shortlisted practitioners, including mandatory induction processes and ward walkarounds. The process led to some practitioners deciding not to proceed with the programme because they felt it wasn't for them. While this was disappointing, it meant the Creative Health team could have more confidence in the readiness of the practitioners who completed the training.

Bringing ward staff on the journey

Ward-based staff were interested in the possibilities of creative health, but concerned about the potential impact on their workload, especially in terms of scheduling and organising practitioner visits. To address this concern, Creative Minds' project coordinator and administration assistant managed practitioner rotas and maintained clear channels of communication with ward-based staff. This ensured transparency without adding to workloads.

The value of the co-production process

Creative practitioners offered a 7-day service, with sessions involving activities including creative writing, painting and drawing. Central to the programme was a co-production process involving both patients and staff. The approach led to outputs including a creative activity book and an ambient music board that would not have happened without patient input and involvement. At the same time, staff provided vital continuity across extended timescales.

How it works in practice

Ward-based staff reported that the interventions led to a positive difference almost immediately. This in turn led to a growth in trust between ward-based staff and the creative health practitioners. At the start of the programme, ward-based staff would encourage creative health practitioners to return another day if there had been an incident on a ward. As the programme evolved, it became clear that the presence of the practitioners was important in restoring a sense of normality after an incident.

Results

Quantitative and qualitative data was gathered over a period of 12 months to assess the programme. The use of creative practices on wards was associated with a 19% reduction in V&A and a 27% reduction in RPI during the 12-month project period. The levels of V&A and RPI remained unchanged on the 12 control wards in the same timescale. Staff and patients report being in favour of creative practices on wards and the practices are associated with improved well-being for staff and patients.



Find out more

Information about Creative Minds can be found at
<https://www.southwestyorkshire.nhs.uk/creative-minds/home/>

A BMJ Open Quality paper about the project described here can be found at
<https://bmjopenquality.bmj.com/content/14/1/e003122>

Where next?

The NCCH has worked in partnership with NHS England to develop a [Creative Health Toolkit >>](#)

NCCH supports health and care sector professionals in organisations and systems to achieve the benefits of creative health approaches for patients and service users.

We publish a monthly newsletter especially created for professionals working across health and care. Please do [subscribe here](#) and/or share with colleagues working across Primary Care, Provider Trusts, ICBs, Public Health, Social Care and across the NHS, so they can access the latest news for creative health!

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