

## Report – Brooklea Health Centre Creative Writing and Art Groups for Patients, 2010-2011

With the help of finance from a bid under the practice engagement program (original bid enclosed), our practices successfully facilitated therapeutic art and writing groups for patients. The groups ran over 5 months from June to October 2010, and then again November to March, each block consisting of 12 weekly sessions.

The sessions were a success on many levels. We attach in the appendices:

- 1) Audit of consultation rates and patient mental health referral rates for the period immediately before and after their attendance at a group
- 2) Some patient testimonials relating to the impact of group participation at an individual level
- 3) Prescribing audit information (reduced costs in all four groups)

We are especially pleased to note that a longer term therapeutic creative group has formed directly out of the groups at the health centre. There was a lot of demand from the patients to carry on their creative work after finishing the groups. So we negotiated use of a room at Wicklea Community Centre, next door to Brooklea. We also bid successfully for a Brislington Neighbourhood Partnership grant of 1500 pounds, to pay for this room, materials, and a small admin fee to fund one of the “graduates” from our groups to run and coordinate the new group. So it is patient run, with occasional advice and support from our group coordinators, and continues to thrive, now for over 6 months. A further bid has just been placed to support continuance of this group from the Brislington Neighbourhood Partnership.

Other outputs include patients starting work (x1), starting volunteering (x2), producing artwork for exhibitions including the Heartfelt exhibition at Centrespace Gallery in late 2010 and four members of the Brooklea arts group took part in creating an arts installation as part of a public art exhibition at M Shed 2011. Other patients have taken the opportunity to engage in external courses, workshops and presentations for example, initiatives led by the University of Bristol Public Engagement department - lectures on medical history, philosophy and workshops and seminars held



...a heart, a 'listening ear' and a smile - 'just one smile is enough! - that may be the only smile that patient will get all day!'

in a local art gallery. Small groups of patients also meet informally in a variety of friendship groups that have formed through these arts and poetry sessions.

Further there has been cross over between patient and student voice where medical students in an arts for health course were informed by patient artwork and sentiments regarding what they would like to communicate to future doctors. This work has also been presented at the Association for Medical Humanities conference this summer.

We are aware that on a practice level only a fairly small total number of people are able to take advantage of this type of group. We do feel that the impact on many has been very significant, and that these are individuals who had been stuck and struggling with serious health and life problems, and thus needing and taking up a large amount of medical time.

Overall the practice, the participating patients and the group facilitators consider the groups very worthwhile, and would be keen to run them as a service in future.



## Appendix 1 - Audit - Brooklea Health Centre Creative Writing and Art Groups

Following a successful bid under the Practice Engagement program of Bristol South PBC Consortium, we ran four therapeutic groups for patients at the health centre in 2010 – 2011. This was a further development of a social prescribing initiative which we had been developing. Patients attending either of two local GP practices (Birchwood Practice or Nightingale Valley Practice) were offered an opportunity to participate in one of two weekly groups, one specifically focused on art, the other on creative writing as well as visual art. Each group ran for 12 weeks, with sessions of two hours, and each was coordinated and run by an experienced artist or creative writing teacher. And the cycle was repeated, once in summer and again in the winter. There were an average of 10 participants in each group, with a limit determined by room size. The groups were offered to patients coming in to the GPs with a wide variety of health and social presentations. A large proportion of patients had a diagnosis of anxiety or depression, but others had a wide spectrum of problems and presentations, including chronic pain, bereavement, arthritis, inflammatory bowel disease, multiple sclerosis, epilepsy etc. The main unifying feature, in nearly all the patients, was that they were struggling with and not getting over a physical or psychological illness, and the GPs felt it might be beneficial to explore a totally new way of thinking about the problem and moving on.

As part of the evaluation of health impact of the groups, we did a brief audit of GP consultation rate of participants. We considered that if a patient's health is improving and they are able to manage and cope better with their health problems, there may be a measurable reduction in how often they need to see a GP. We reviewed the medical records to count the number of GP consultations of each participant in the 6 month period before and the 6 month period after their participation in a creative group. We included problem based practice nurse consultations, but not routine check ups. Patients who attended less than half the sessions were excluded from the audit. The figures showed a 23% fall in consultation rate in the months after the groups compared with before (total consultations in 6 months before: 97, total consultations in 6 months after: 74). This is encouraging, and is consistent with our previous audit (see previous bid). The same provisos apply as in our previous audit. Numbers were fairly small, and for this reason unlikely to reach statistical significance. A considerably larger study would be required to demonstrate statistical significance.

As a further part of the evaluation we examined the number of mental health referrals made by the GPs, to either a secondary care mental health team or to the IAPT program (Increasing Access to Psychological Therapies, locally provided through Rightsteps). Mental health referral is a relatively rare event, when considered at the level of individual patients, and not surprisingly the total number of referrals was small. Taking the total for all the participants, there were 4 mental health referrals for patients in the 6 months prior to their attendance in a creative group, and 1 referral in the 6 months following. Of these referrals, all but one were to IAPT.

Taken together, this evaluation evidence does support the contention that participation in a creative group may help patients manage their problems, and thus need less support from health professionals.



## Appendix 2 - Patient testimonials 2010-11

These testimonials are to illustrate and give examples of how engaging with the arts and poetry groups at Brooklea have actually enhanced patient health and coping. They example patients becoming empowered through creative expression and the building of new relationships. They witness to finding new meaning in life, even finding oneself.

Dr Catherine Lamont-Robinson – artist and group facilitator:

*...It has, however, been the observation of increased confidence in individuals which has been so notable. Members are positive, relaxed, interested and bringing in both work done at home or ideas for developing work...It is a sense of increased wellbeing that I note despite the inevitable ups and downs of health issues...*

Permission has been given from all the patients to use these following quotes:

*Due to the sudden death of my husband in 2008 I began to suffer from depression and consequently went to my GP for help in 2009. By this time I was in a very dark and lonely place and even the medication could not lift my spirits. During one of my appointments we were discussing the sort of things I might enjoy and I mentioned that I liked art although I was never very good at it. As a result of this conversation I joined the Art for health group ... From the very first day this gave a new meaning to my life. I have found a new way of expressing myself and my feelings...the bond of friendship within the group is priceless. The whole experience has been a joy that no medication can possibly give ...*

*Coming to the art sessions has helped me with a few problems I have with meeting new people and going to groups, once I am here I can, for a few hours forget all the other problems. I have also managed to overcome some of my worries and I am more likely now to try something else like a new group etc....*

*The turning point for me was the very early poem Gratitude, which was triggered by an early session and resulted (eventually) in a piece for my father. [The]... facilitation and the support of the group was of major importance ...and has ... give[n] me increasing courage to go on attempting to write. The more I let myself have a go and see where the words take me, the more whole I feel as a person. .... I am increasingly finding that the process of working on a piece of writing is so totally absorbing that it is therapeutic in blanking out not-so-nice bits of life (i.e. physical limitations). It is also immensely satisfying to produce a verbal image...*

*it's inspired me to do something I wouldn't have thought of doing - going on a beekeeping course. It came out of my bee picture and the poem*

*I've gained support, friendship, confidence, welcomeness (if that's a word - it is now), acceptance*

*all of us have given a bit of ourselves in a way that doesn't feel like cutting off a bit of you - it almost comes back double*

*... At first I found going out of the house very difficult. Also, meeting new people was a problem. After a few weeks I started to relax and look forward to next week's class... With art you can express your feelings whether it may be very dark or where you want to be in the future. When I painted my first pictures they were very bleak. Now I never know what I am going to paint until I start and even then it may come out different. I still have problems, but the art is helping me through these dark days. I'm still not one hundred percent but I am getting there, I have even suggested that I would not mind mentoring others and helping out.*

*My time at Brooklea clinic art group has enabled me to be just me, to open up my senses and feelings through art in a safe and enjoyable way. I do not always find it easy and many times I have found it very difficult but ...for that short time I feel there could just be a glimmer of light in my dark space.*

*The art group has given me the confidence and freedom to tap into my creative side in a safe way and has given me the feeling that maybe, just maybe, there is something I **can** do, which for myself, is very important.*

*it has given me 'me'*



### Appendix 3 – Prescribing audit information

We reviewed the prescribing costs for patients attending more than 5 out of 12 sessions considering the prescribing costs for 4 months before their arts course and for 4 months afterwards. Only pain relieving and psychiatric medications were considered as change in prescribing of these would be most likely relevant in terms of changes in patient well being. Nicotine replacement was also included (although increased costs could show an increase in motivation to come off medication rather than the reduced costs we might be looking for with the other medications in relation to patient well being).

Medications mainly included antidepressants, antipsychotics, sleeping tablets and analgesics – including paracetamol, anti-inflammatory medications and opiate based pain relieving drugs. Nicotine replacement was taken by two of the patients. A few of the patients attended both autumn and spring courses which may have led to a cumulative effect. The most common pattern seen was that of patients stopping antidepressant medication after or during the courses.

Only small numbers of patients were involved in these courses as mentioned in the previous audit (approximately 10 per group) and a few of the patients either did not attend enough sessions to be included in the calculations or were taking no relevant medications before or after the course. However for all four blocks offered to patients (2x arts for health course and 2x words and art for health courses both delivered in the autumn and the spring) the prescribing costs were reduced after the course compared with before. Presented here are the collective prescribing costs for members of each group 4 months before and after the group sessions took place.

Arts Autumn group:	Before = £87.77	After = £25.99
Arts Spring group:	Before = 78.72	After = £33.09
Words and Art Autumn:	Before = £98.32	After = £51.93
Words and Art Spring:	Before = £173.56	After = £60.20

The limitations of this audit include the small number of patients involved, the limited (but chosen because we thought most relevant) group of medications and the limited number of months that are included (4 months before and after). It would be interesting to consider whether any changes in medications are sustained beyond the four month period. Also it cannot be assumed that reduced prescribing is directly associated with attending the arts and poetry sessions. People may have been referred during a difficult part of their lives which they might have self-managed and found their own ways through possibly reducing or stopping the medication anyway.

In terms of cost-benefit, although the cost of running the courses outweigh the small savings above, if we were to take into account reduced consulting and referral and the potential sustained benefits (as seen in some of the testimonials above or through the patient led Wicklea arts group described on page 1), the balance could swing towards net savings. Also looking beyond the numbers to the qualitative data presented in appendix 2 it is evident that a significant proportion of our patients were deeply impacted and empowered through engaging at Brooklea with arts for health.

We would like to thank our facilitators – Fiona Hamilton and Dr Catherine Lamont-Robinson who have worked with great skill and tenderness with our patients and also our pharmacist for his work collating the raw data of patient medications and costs – Cephas Dzuda.

Dr Jonathan Wood, Dr Louise Younie, September 2011.

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