

HARP: recommendations

Introduction

HARP - Health, Arts, Research, People - explores how we can generate, grow and learn about impactful creative innovations that support the health and wellbeing of the people of Wales. It is an innovation and research partnership between Arts Council of Wales, Nesta and Cardiff University's 'Y Lab'.

The arts can have a positive impact on our health and wellbeing. However, designing and embedding creative activities for health and wellbeing can be complex and uncertain. HARP sought to learn more about how we can meet these opportunities and challenges, combining **grant funding with network building, coaching and research** for arts and health innovators. We did this with support from Nesta's People Powered Results team, the Wales Arts, Health and Wellbeing Network and the Welsh NHS Confederation.

HARP has had two distinct innovation strands:

- in **HARP Seed** we built three new, small teams of health and arts collaborators to design and test creative activities that met key health system challenges.
- in **HARP Nourish**, we worked with ten existing partnerships longer term to discover how arts activities can be embedded within health places.

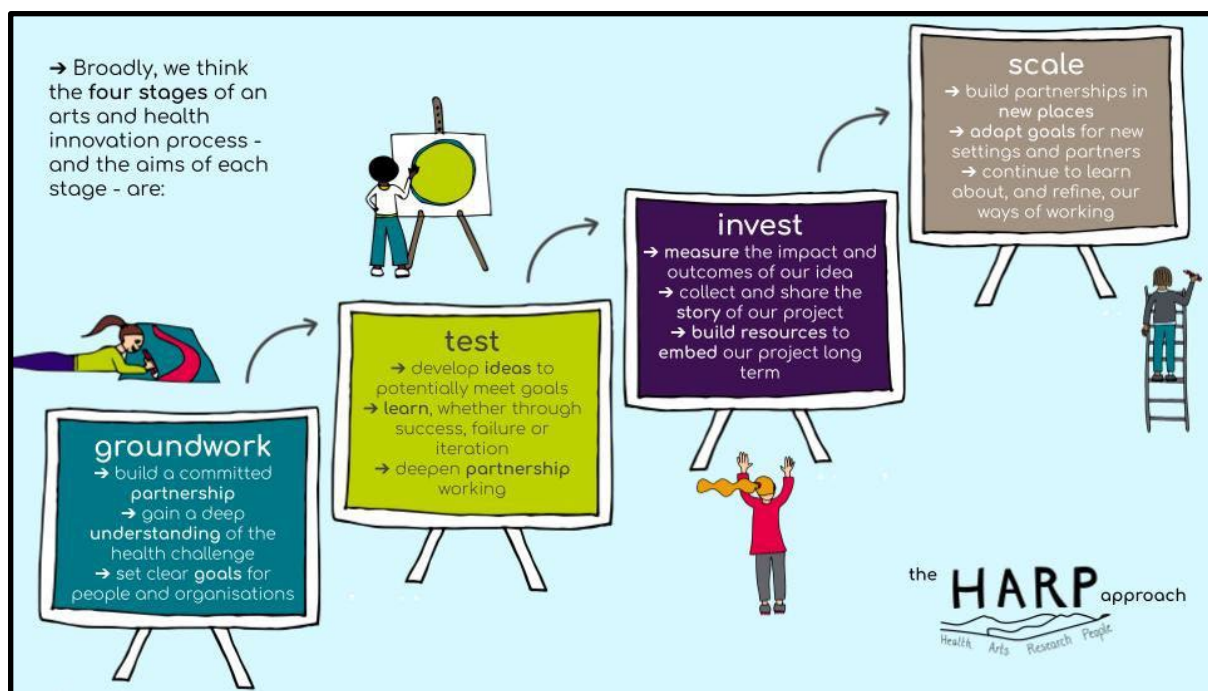
The HARP Approach

We view innovation as a **process of finding new and better solutions to challenges**. Throughout HARP, as well as offering support and funding to the teams we worked with, we set out to consider:

- what might an **innovation process** in 'arts and health' look like?
- how might people and teams **generate, sustain and grow** the best creative ideas to improve health outcomes and experiences?
- what can arts and health collaborators do, together with funders, health and care leaders, academics, policy makers and network facilitators, to **help innovation thrive?**

From our work with the HARP innovation teams, we've distilled what we learned into '**the HARP Approach**', illustrating what a people-powered innovation process can look like for teams and projects that want to use the arts to improve people's health and wellbeing, or to meet health and care challenges, with an ultimate aim of transforming health systems.

The HARP Approach: a framework to support arts and health innovation



The recommendations in this report sit alongside the HARP Approach, suggesting key actions people in these positions can take to support and enable people-powered innovation in arts and health in future:

- ⇒ investors (funders)
- ⇒ health and care leaders
- ⇒ researchers and evaluators
- ⇒ arts and health network facilitators
- ⇒ policy makers

They were **co-created with the 13 arts and health innovation teams** we worked with in HARP, based on practical observations, informed by data collected by the HARP research team and our partners.

Our recommendations should help people working in these positions know how they might support teams working in this area here and now. They are not a complete list of everything people could be doing, nor are they a criticism: we recognise that what we're recommending is ambitious and comes at a difficult time for many of the groups we're talking to. We always advocate being ambitious and thinking about 'ideal world' scenarios, while in reality doing the best you can.

With that in mind these recommendations are intended to inspire, build on and draw from the great work many people in these positions are already doing.

May 2022

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1. Recommendations for an **investor** to support arts & health innovation teams

this is you if: you work for a trust or foundation with an interest in supporting this area, a UK research council, or a **government** funder (e.g. Arts Council of Wales).

key overall recommendation

→ Be strategic: develop investment programmes where **the type of support** you're offering (grants, coaching, non-financial support) sets innovation projects up for long-term success at each stage, from groundwork through to scaling

groundwork

→ offer **development grants alongside coaching** to help innovation teams build strong relationships for long-term health & arts partnerships, knowing this will reap long term benefits by building stronger foundations for complex work

→ intentionally support **diverse collaborations** that involve artists and people with lived experience in the exploration of a health challenge

→ Test out **different ways of working** with grant applicants, e.g. meetings, mixed media applications, 2-stage processes, proportionate given the amount of funding on offer: do not overburden on small organisations and make sure the process is useful to everyone involved, not just your selection process.

test

→ offer (or enable) funding and non-financial support to **R&D partnerships** where ideas can be explored around a health challenge. Be flexible with milestones, timescales and participant numbers so that project teams can test, learn, fail, iterate and succeed in an overarching aim to learn about which ideas will best meet their goals (rather than growing numbers)

→ for partnership projects with health and care organisations, **confirm that enough time, resources and leadership has been committed** by all partners, with senior level sponsorship in place, before agreeing to fund.

→ build **exploratory evaluation costs and coaching** into 'test' stage projects

invest

→ offer larger **2-3 year investments** in projects at this stage so that teams can undertake proper research/evaluation (e.g. academic research-led grants), train more practitioners and build their resources to embed projects long-term and build new relationships for scaling.

→ make sure **core costs** are sufficiently factored into projects at this stage, particularly communications and fundraising, so that teams can build their capacity to generate a portfolio of long-term funding sources.

→ consider **what you are trying to learn** from each funding programme, provide opportunities for funded projects to support each other and generate collective learning (networking, coaching); share what you learn with other funders

scale

→ fund appropriately evidenced projects on a **longer-term basis** so projects can grow in scale and health partners can rely on them

→ **share and amplify the story** of your funded projects, and what you've learned, with other funders, health and care leaders, and policy makers

2. Recommendations for a **health and care leader to support arts & health innovation teams**

this is you if: you have a mid-senior level role within a health or care organisation (a health board, NHS trust, health charity, local authority or other). Your role likely encompasses planning, resourcing and commissioning health/care services.

key overall recommendation

→ Initiate conversations with arts practitioners: **tell them what your biggest strategic priorities are** (e.g. mental health, waiting lists, staff wellbeing) and what **outcomes and evidence** you are aiming for.

groundwork

- enable and suggest opportunities for staff and service managers to work with artists to **explore how creativity can help improve the service you provide to patients and communities**
- establish and sponsor **workforce development projects** that use the arts and creativity to understand staff experiences, and support their wellbeing at work

test

- proactively connect arts and health innovation teams with the right people and teams in your organisations to support the testing and development of ideas
- create and nurture a culture within your organisation where **new, even experimental, approaches and ideas are valued**, and where staff feel they can look outside what's on their job descriptions

invest

- **be clear about the evidence** (outcomes, stories, methods) that would encourage you to refer people to arts projects - and/or support them from your commissioning budgets
- connect arts practitioners and organisations to your organisation's **data, innovation and implementation teams** to support evaluations

scale

- **encourage other leaders** both within and outside your organisation to value the arts, creativity and innovation in their environments, and go beyond just championing this work: make it happen

3. Recommendations for **researchers and evaluators** to support arts & health innovation teams

this is you if: you work for a university or are a freelance researcher, with expertise in researching and/or evaluating arts and health innovation projects

key overall recommendation

→ work alongside project teams, health leaders and participants throughout the innovation process, supporting them to use **appropriate research and evaluation methods** for the stage the innovation is at

groundwork

- **understand organisational issues and cultures** that created the need for this project
- start to **identify potential data collection methods** and discuss possible limitations with project teams
- create and maintain a **profile on the Wales Arts, Health and Wellbeing Network**

test

- develop a **feasible and flexible initial research protocol** that accommodates iteration and is centred on discovering potential research questions for later stages
- account for process as well as impact as the process is likely to evolve and change as new approaches are being tested
- experiment with **locally meaningful and standardised outcome measures** to identify the most suitable data collection tools for your project

invest

- **be clear on your costs, process, expectations and availability** for getting involved in research projects, and what's involved. This includes a plan for who will collect data and write reports
- support projects to **capture quality alongside quantity**, e.g. most significant change, appreciative enquiry

scale

- conduct and share **meta-analysis and reviews of existing evidence** nuanced by type of project, health condition or setting, to help people understand the context of their innovations

- simplify research: **make your reports and outputs accessible** and share your research in the simplest possible terms wherever possible
- bring your research to **policy and health spaces** (e.g. Cross Party Groups) to help influence decision makers

4. Recommendations for a **network facilitator** to support arts & health innovation teams

this is you if: you have a role, perhaps within a network, national centre or alliance, that supports and convenes people working on arts and health projects

key overall recommendation

→ support practitioners and the sector to **make the links to big picture health strategies and priorities**, and advocate for their work

groundwork

- develop schemes that offer **skills and knowledge development** for arts practitioners and organisations who want to work, or already work, in health settings
- provide networking opportunities and events where **health professionals can share their challenges** and meet arts practitioners, people with lived experience and researchers to work with on that challenge

test

- develop **coaching offers** that help innovation partnerships collaborate effectively
- provide **resources, templates and links**, particularly around funding models, evaluation and how project teams can make their work known to key audiences (e.g. policy makers)
- **create spaces for innovators to come together** to reflect on this work, and articulate its value

invest

- offer **practitioner support and supervision** to help the people working in this area to navigate the demands of the work
- **adopt a learning focus:** collect and share your members' data about key topics related to this work (e.g. evidence and evaluation)

scale

- **collect and synthesise evaluations and practical learning points** from a wide range of innovation projects in this space, and share them with academic researchers and funders to help them identify promising new projects and areas

5. Recommendations for a **policy maker** to support arts & health innovation teams

this is you if: you are - or support the work of - an elected official with an interest in furthering work in this area, or an area related to it (e.g. social prescribing). You have some influence over how public funds and resources are allocated.

key overall recommendation

→ **clearly articulate the roles, scopes and priorities of statutory bodies** - health, care, the arts - and identify and fund clear, distinct areas for collaboration between them (e.g. mental health, social prescribing)

groundwork

→ **support and incentivise health and local authority leaders to enable innovation**, and explore how the arts and creativity can contribute to their organisational priorities, especially in these areas

test

→ **ring-fence funding** in statutory health and care bodies and research funders' budgets for **prevention and innovation**

→ give clear guidance to commissioners about the **nature, tone and methods of evaluating success in health and care systems**. What are we aiming for?

invest

→ allow for **longer term budget and planning cycles** for statutory health and care funding, e.g. NHS and local authorities

→ **support and encourage local authorities** to subsidise arts activities for community health and wellbeing

→ **consider how we measure success in statutory bodies**, valuing insights that show progress on the outcomes that matter most to the people involved, as well as quantitative data

scale

→ **normalise access to culture and the arts for all as central to life, health and wellbeing** (as happens with sport, for example)

→ **shape our economy towards wellbeing**, where investment in the arts is made with the aim of enhancing people's wellbeing and preventing illness, which then in turn benefits health and care systems and reduces demand.

