The Picture of Health

A framework for the practice of arts in health settings

Eastern Regional Arts Committee
December 2004
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The arts can, and should, be incorporated in a purposeful and methodical manner into health settings, with a view to improving outcomes and general well-being of users and staff.
Foreword

I am pleased to welcome the introduction of this framework for the practice of arts in health settings, which I hope will start a process to enhance and enrich the lives of clients, patients, staff, visitors and artists.

Pilot projects in the eastern region have already shown the practical benefits of arts activities in the lives of patients and clients. These include self development, a new sense of well-being and purpose, increased self esteem, the strength to embark on a drug free process and the confidence to pursue the study of art.

I also believe that the use of arts in health settings can make a significant contribution to peoples’ well-being, particularly at difficult and troubling times, and the framework explores funding opportunities for the acquisition of arts.

There is already a very considerable amount of arts activities in health settings in the region. This framework is an attempt to achieve the ERHA vision of a linked and co-ordinated structure for their future development.

Michael Lyons
Regional Chief Executive
Eastern Regional Health Authority
The use of the arts in health settings has been shown to benefit service users, visitors and staff and to enable them to establish a mutually enriching partnership with those who work in the arts.
The Picture of Health

A framework for the practice of arts in health settings

Summary

Vision

The ability of people to express themselves artistically and to experience aesthetic qualities in their environment is central to their health and well-being.

The use of the arts in health settings has been shown to benefit service users, visitors and staff and enable them to establish a mutually enriching partnership with those who work in the arts.

While there are widespread arts activities in health settings in the eastern region they tend to occur in isolation and remain uncoordinated and unlinked to a large extent. The vision of the ERHA is to create a linked and coordinated structure for arts activity and the development of arts in health settings.

Framework

In November 2003, the Board of the ERHA adopted a report, based on five pilot arts projects, which recommended that it would be advantageous for clients, patients and staff if arts projects were actively encouraged within health and personal social services in the region.

On foot of this, the ERHA decided to develop an Arts Framework. This is aimed at developing Arts in health settings, building on existing projects and have the potential to be carried forward by the new Health Service Executive.
Recommendations

• Each major agency involved in the provision of health and personal social services in the East should adopt an arts policy, which should cover issues such as recruitment of artists, necessary supports, health and safety issues and ownership of projects

• Each major agency should have a designated person with responsibility for developing arts within the agency as part of his/her wider brief

• An Arts Committee should be established in each agency

• Agencies should source resources for the practice of arts

• Emphasis should be on high quality projects and best practice

• Linkages with the Arts Council should be maintained and developed

• Information and Education programmes should be drawn up for health care staff

• Projects should take into account the requirements of artists and also the expectations of participants and staff

• Agencies should encourage interaction with clients and staff of other agencies involved in arts projects

• Projects should be accessible to as many clients as possible

• Ongoing evaluation of the benefit and effectiveness of the practice of arts in the various settings should be carried out

• The new National Health Portal should contain a special section on the practice of arts in health and personal social service settings

• The Per Cent for Arts Scheme should be incorporated in each new development

• Agencies should be encouraged to utilise existing schemes for the acquisition of works of art

The Eastern Regional Arts Committee

This committee first met in June 2004. It included representatives from the Eastern Regional Health Authority, the three Area Health Boards, the service providers in the region, the Arts Council and the Dublin Healthy Cities Project.
The terms of reference:

- To further the recommendations of *The Practice of Arts in Healthcare*
- To develop a framework for the practice of arts in health settings
- To establish a Register of Arts in Healthcare Practitioners and Projects
- To develop awareness-raising programmes
- To develop the Per Cent for Art Scheme and to explore funding opportunities

Committee membership:

<table>
<thead>
<tr>
<th>Name</th>
<th>Representing</th>
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<tr>
<td>Maureen Browne</td>
<td>Eastern Regional Health Authority (Chair)</td>
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<tr>
<td>Monica McGill</td>
<td>Eastern Regional Health Authority</td>
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<tr>
<td>Aileen Mooney</td>
<td>Northern Area Health Board</td>
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<td>Patricia Sheehan</td>
<td>East Coast Area Health Board</td>
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<td>Graham O’Brien</td>
<td>East Coast Area Health Board</td>
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<tr>
<td>John Browner</td>
<td>South Western Area Health Board</td>
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<td>Eastern Health Shared Services</td>
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<tr>
<td>Sheila Gorman</td>
<td>The Arts Council/An Chomhairle Ealaion</td>
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<tr>
<td>Dave Willow</td>
<td>The Dublin Academic Teaching Hospitals</td>
</tr>
<tr>
<td>Julie Nohilly</td>
<td>Children’s University Hospital, Temple Street</td>
</tr>
<tr>
<td>Colette Tarrant</td>
<td>Our Lady's Hospital for Sick Children, Crumlin</td>
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<tr>
<td>Jackie Cogan</td>
<td>Our Lady's Hospital for Sick Children, Crumlin</td>
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<tr>
<td>Dr Mary Deane</td>
<td>The Royal Hospital, Donnybrook</td>
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<td></td>
<td>National Rehabilitation Hospital</td>
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<td>Peamount Hospital</td>
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<td>Leopardstown Park Hospital</td>
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<td></td>
<td>Our Lady's Hospice, Harold’s Cross</td>
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<tr>
<td>Kathy Gilfillan</td>
<td>Dublin Maternity Hospitals</td>
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<tr>
<td>Sean Priestley</td>
<td>Intellectual Disability Services</td>
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<tr>
<td>Ray Bateson</td>
<td>Dublin Healthy Cities Project</td>
</tr>
<tr>
<td>Dara Carroll</td>
<td>Mater and Children's Hospital Development Ltd</td>
</tr>
</tbody>
</table>
Clients from St. Joseph’s Intellectual Disability Service, Portrane, putting on their Christmas show

Health settings should be enhanced through arts projects and events. Where possible, health agencies should utilise funding opportunities to acquire works and promote events.
The Picture of Health

A framework for the practice of arts in healthcare settings

The Eastern Regional Health Authority is the statutory body with responsibility for planning, arranging, monitoring and evaluating health and personal social services for over 1.4 million people living in the eastern region of the country which covers Dublin, Kildare and Wicklow. These services are delivered by 39 statutory and voluntary agencies from which the Authority commissions services.

Vision

The terms “art” or “the arts” includes all forms of creative expression such as visual art, dance, drama/theatre, architecture, music, literature, film, opera, circus etc.

The ability of individuals to express themselves artistically and to experience aesthetic qualities in their environment is central to their health and well-being.

The practice of arts has a very positive impact on the health and well-being of people generally and of service users and staff. Clients who participate in arts experience an improved quality of life.

Art can also contribute to the healing process by softening healthcare environments, making them more welcoming, less austere and intimidating, and illustrating the ethos of the organisation. Art can help to make a health setting a place that can encompass and express compassion, beauty, delight and humour. It can help to support and comfort those who cope with serious illness, crisis, death and bereavement - from visitor to patient to hospital staff.

The use of art in health settings is of benefit to service users and staff and helps to establish a mutually enriching partnership between those who use and work in health settings and those who work in the arts, as well as volunteers in all settings.

While acknowledging the differences between arts projects and arts therapies (this could include play therapy) we recognise that they can, and should be encouraged to complement one another.
Apart from art therapy, there are two main ways of experiencing art in a healthcare setting:

- To enjoy art made by others as a viewer, listener or audience member
- To participate in an arts project, which could encompass clients, visitors and staff

Arts activities in the Eastern Region, while widespread, tend to occur in isolation and remain unlinked and uncoordinated to a large extent. Arts projects are underway in a number of services provided by the Area Health Boards, acute and specialist hospitals, extended care, and rehabilitative facilities. They are also an integral part of services provided for clients with disabilities.

The vision of the ERHA is to create a linked and coordinated structure for arts activity and the development of arts in health settings, ensuring that access is opened up to as many clients, staff and visitors as possible. Integral to this is the recommendation that each ERHA provider agency should support arts activities and establish an Arts Committee to progress this work.

To achieve this vision, wider issues will need to be addressed, such as training, social inclusion, economic realities, guidelines for working with young people and special client groups, mobility issues, availability of information and marketing etc.

To ensure sustainability, it is important to recognise the importance of the academic framework/training for those designing services and to develop a strategic and incremental plan which can enable involvement at different levels.

This Framework takes into account the fact that the healthcare system in Ireland is being restructured to focus more closely on health promotion and disease prevention, with greater emphasis on an holistic approach and a consideration of the whole person.

It is hoped that this Framework may form the basis of a national arts framework for the new Health Service Executive, which takes over the running of health and personal social services for the entire country in 2005.

**Demographics**

The eastern region has the largest and most densely concentrated population in the country. It covers both urban and rural communities, and areas of both wealth and deprivation, each with their differing needs and challenges.

The population of the region is unique due to its large numbers of both younger and older age groups, and the mobility of its people. Seventy per cent of people in the eastern region are under the age of 45. The population is younger than the average population in the European Union. In the EU as a whole, 17% of the population fall into the 0 – 14 year age group compared to 20% in the eastern region of this country. There are 136,329 people over the age of 65, accounting for slightly under 10% of the total population. However, the number of those aged over 85 has increased by 16.5% between 1996 and 2002.
The demographics of the region mean that very significant numbers of people access health and personal social services each year. For example it is estimated that this year there will be up to 2 million attendances at hospitals in the region, while hundreds of thousands of people will access preventative health services, primary care, services for those with disabilities, services for those with mental health problems, addiction services and services for older people.

There is therefore an enormous potential to reach a very large number of people through health and personal social services, and similarly there is a need to develop initiatives and innovations which may enhance their quality of life.

**Background**

The work of this Committee developed from a report on arts projects in health settings in the eastern region - *The Practice of Arts in Healthcare* - published by the ERHA in 2003. This report was drawn up by a Joint Working Group representing the ERHA, the Arts Council and the Area Health Boards and voluntary agencies in the east.

Based on professional evaluation of five pilot arts projects, this group recommended that it would be advantageous for clients, patients and staff if arts projects were actively encouraged within health and personal social services in the region.

*The Practice of Arts in Healthcare - Pilot Projects*

Five pilot arts projects were carried out in centres for older people, drug users, people with physical disabilities, people with intellectual disabilities and a children's care centre. The pilot projects showed that enhancing opportunities for creative activity in health settings assists in bridging the gap between medicine and self care.

The projects demonstrated how the practice of arts has a very positive impact on the health and wellbeing of service users. In some cases the impact was quite remarkable, for what was a relatively brief intervention.

They also resulted in a marked increase in morale and a new awareness among staff of the importance of art and a sense of contribution and achievement among the artists involved.

Professional evaluations of the projects showed that clients who participated experienced feelings of wellbeing and an improved quality of life, and that these benefits continued after the lifetime of the projects. Staff also reported that they found the projects particularly beneficial, allowing them a new interest in and appreciation of the arts.

The pilot projects made a clear case for development of the arts and the extension of such projects to all areas of health and personal social services.
Opportunities should be developed for health and arts professionals to link together to develop ideas. The language of arts in health needs to be clarified as the arts and health sectors may have different understandings of what is involved. Each major agency or group of agencies should commit itself to encouraging staff, clients and volunteers to develop arts projects. Each major agency or group of agencies should establish an Arts Committee.
An Arts Framework

On foot of the report of the five pilot projects, the Board of the Eastern Regional Health Authority agreed that an arts policy should be developed and adopted by health agencies in the region.

A Committee was established in July 2004, representing the ERHA, the three Area Health Boards in the Eastern Region, the 36 main voluntary providers of health care in the east, the Arts Council, Dublin Healthy Cities Project and the Mater and Children’s Hospital Development Group.

It was decided to develop an Arts Framework rather than an Arts Policy, to allow greater scope for the creation of new and exciting types of art. It was felt that a framework would include scope for all elements of the arts which might enhance the experience of people who use the health services and the people who work within the services. It should encourage opportunities for people to communicate with each other in terms of developing the arts.

This Framework would build on existing projects and have the potential to be carried forward by the new Health Service Executive.

Scope of the Framework

The scope of this framework will be to further the recommendations of *The Practice of Arts in Healthcare*, and to develop a framework for the practice of arts in health settings. It is also intended to establish a Register of Arts in Healthcare Practitioners and Projects, to work with agencies and staff to develop awareness raising programmes, to employ the Per Cent for Art Scheme in capital developments and to explore funding opportunities for art projects.

Strategic Objectives

- Enhance well-being for clients, staff and visitors
- Improve the quality of learning and personal development for clients, staff and visitors
- Make the health setting an attractive place in which to live and work
- Provide a responsive and effective service to clients, staff and visitors
- Maximise social inclusion in relation to Arts in Health Programmes
- Maximise sources of finance for Arts in Health Programmes
Principles

The following principles will be at the core of the framework, and are agreed as essential on informing a regional and national process for arts development.

The arts can, and should, be incorporated in a purposeful and methodical manner into health settings, with a view to improving outcomes and general wellbeing of users and staff. Health settings should be enhanced through arts projects and events. Where possible, health agencies should utilise funding opportunities to acquire works and promote events.

Opportunities should be developed for health and arts professionals to link together to develop ideas. The language of arts in health needs to be clarified as the arts and health sectors may have different understandings of what is involved. Each major agency or group of agencies should commit itself to encouraging staff, clients and volunteers to develop arts projects. Each major agency or group of agencies should establish an Arts Committee.

Where possible, arts projects should be evaluated. Work on the development of arts in health settings should be continued with the Arts Council as part of Public Arts Strategy.

Training and support on health and safety and ethical issues should be provided for artists. All opportunities for awareness-raising should be explored.

A register of arts in health settings should be set up and maintained. Potential collaboration of arts practice and health promotion should be explored. The potential for community engagement and linking with health promotion in the public art commissioning process should be explored.

Code of Practice

Each health agency has a duty to protect its vulnerable clients and patients. This means that all artists working with vulnerable groups must obtain Garda clearance where appropriate. National guidelines on welfare and protection oblige all organisations, whether statutory or voluntary, which are involved in the provision of services to children and young people, to produce protection policies tailored to their specific needs. To this end, the Arts Council in collaboration with the Department of Health and Children, is formulating a set of welfare and protection guidelines customised to the needs of the arts sector. Arts organisations have a responsibility to protect the welfare and safety of the children and young people they come in contact with in accordance with Children First National Guidelines. These guidelines are available from the Department of Health and Children website, www.doh.ie.
Health & Safety

Adequate time and resources must be allocated to health and safety issues for artists. These include explanation of any risks involved, offering protection such as vaccinations and ensuring there is an adequate time allowed for these to take effect.

Training and Support for Artists

Training for artists in the field of Arts and Health should be provided in a number of areas including child protection, health and safety, boundaries etc. As artists working in health care contexts have not come through the health care system of education and work, professional support should be provided for them in this area. This could take the form of a mentoring programme with a health care professional, membership of a networking body etc. Artists also need to be supported by a co-ordinator or project manager to enable, support and champion the work.

Evaluation

The Eastern Regional Arts Committee is aware that various methods of evaluation are already in use in other jurisdictions. It would be necessary to ascertain if these methods are complementary to the structure of art in an Irish healthcare setting, and if necessary adapt to an Irish context.

Examples of the different forms and levels of evaluation would include a simple written record of the ‘who, what, when, why, where?’ of the project, along with photographs of the work in progress and/or finished work. This could also include a diary kept by the artist and/or participants, recording their feelings about the project from both positive and negative perspectives, what worked well and what did not.

Another example could take the form of a more detailed document, which would quantify the effects of the project. This would usually involve engaging arts and/or healthcare staff. This would follow the format of the evaluation carried out by Dr. Rosalia Staricoff on the Chelsea / Westminster project, the ongoing evaluation (funded by the Irish Cancer Society) of the Open Windows project at the Bone Marrow Transplant Unit at St James’s Hospital, and the evaluation of the five pilot projects carried out under the ERHA/Arts Council Steering Committee.
The Wonder Web, created by an artist and the young clients of Creag Aran School, South Western Area Health Board

Where possible, arts projects should be evaluated. Work on the development of arts in health settings should be continued with the Arts Council as part of Public Arts Strategy.
Funding

Funding for arts projects will be linked inextricably with policy development, echoing the need to have arts in health as an integral part of the healthcare setting, with budgets for projects, and their evaluation, ring-fenced and protected.

All Art and Health programmes should aim for sustainability, and avoid in so far as possible a stop/start timetable. Although evaluation may need to be built in to the initial stages of a programme, it should be carried out as quickly as possible and a decision taken about the future sustainability of the project.

Matching funding from public or private sources outside the Health Agencies should also be explored.

Arts in Health Agencies

There may be a role for a separate Arts in Health agency that would provide a service across the regional health agencies. A model for such an agency might be ArtsCare in Northern Ireland. ArtsCare provides artists and support for 22 independent arts committees in a variety of healthcare settings across Northern Ireland.

The existing informal network of Arts in Health coordinators could be formalised, provided there was an adequate structure and funding. This could provide an information resource and support for arts and health practitioners across the country.

Recommendations

- Each major agency involved in the provision of health and personal social services in the east should adopt an arts policy, which should cover issues such as recruitment of artists, necessary supports, health and safety issues and ownership of projects
- Each major agency should have a designated person with responsibility for developing arts within the agency as part of his/her wider brief
- An Arts Committee should be established in each agency
- Agencies should source resources for the practice of arts
- Emphasis should be on high quality projects and best practice
- Linkages with the Arts Council should be maintained and developed
- Information/Education programmes should be drawn up for healthcare staff
- Projects should take into account the requirements of artists and also the expectations of participants and staff
• Agencies should encourage interaction with clients and staff of other agencies involved in arts projects
• Projects should be accessible to as many clients as possible
• On going evaluation of the benefit and effectiveness of the practice of arts in the various settings should be carried out
• The new National Health Portal should contain a special section on the practice of arts in health and personal social service settings
• The Per Cent for Arts Scheme should be incorporated in each new development
• Agencies should be encouraged to utilise existing schemes for the acquisition of works of art

The Acquisition of Visual Arts Works
The Arts Council is the development agency for the arts in Ireland. The Arts Council administers two schemes in particular, the Joint Purchase Scheme and the Loan Scheme, which can provide direct support on the acquisition of art works to the Eastern Regional Health Authority and health agencies in the east. For full information please see www.artscouncil.ie

Loan Schemes
This scheme allows public bodies to apply to the Loan Scheme in order to borrow works of art from the Arts Council’s collection for periods of up to two years.

The Council has been drawing together a collection of contemporary Irish art since its inception in 1951. To date, there are over 900 works that embrace a broad range of art practice. The collection represents emerging as well as more established artists.

Over 90% of the collection is on loan to public institutions around the country at any time. The aims of the scheme are to ensure that the maximum number of people should have access to this extensive collection of contemporary Irish art and to encourage organisations to start their own collections.
The Office of Public Works

The Office of Public Works, under the guidance of their Arts Management Committee set up in 1991, has acquired a considerable collection. This includes original prints, paintings, sculpture, stained glass, mural mosaics, installations, and applied art works such as commissioned carpets and customised furnishings, gardens, wrought iron gates, and stone seating areas using the Percent for Art Scheme. This Committee manages, maintains and accounts for artworks ensuring that they are included on the OPW annual asset register. A new OPW handbook is in preparation. The previous OPW Handbook covered such issues as Government Art Policy, Implementation of the Per Cent for Arts Scheme, Acquisition Policy, Acquisition Procedures, and the Management of Art Works.

The Per Cent For Arts Scheme

This scheme applies to all Government Departments with construction budgets and applies to all healthcare capital construction projects funded by means of a capital grant from the Department of Health and Children (see Appendices for Department circulars 4/97 and 1/02 HPO).

Under the Per Cent for Arts Scheme, budgets for construction capital projects undertaken by relevant public bodies should include 1% as funding for an art work, feature, or project subject to limits detailed below

- Construction projects costing up to €2,550,000 may include a maximum art budget of €25,500
- For projects costing between €2,550,000 and €6,300,000 a further 1% (up to €12,500) is allowed, giving a maximum art budget of €38,000
- For projects costing between €6,300,000 and €12,700,000, a further 1% (up to €13,000) is allowed, giving a maximum art budget of €51,000
- For projects costing in excess of €12,700,000, a final 1% (up to €13,000) is allowed giving a maximum art budget of €64,000

The percentages are calculated on VAT-exclusive construction costs, and appropriate construction projects include renovations, extensions, fit-outs, enabling works, etc., as well as new-build.

The total capital funding for any project includes construction costs, design fees, equipping costs and ancillary costs (project management costs, planning costs, Local Authority costs, utility costs, etc.). The Per Cent For Art Scheme funding is from the ancillary costs and therefore is in addition to the construction, design and equipping budgets.
One of a number of artists who performed solo at the Christmas Renaissance Show at St. Ita's Hospital.

Training and support on health and safety and ethical issues should be provided for artists. All opportunities for awareness-raising should be explored.
Register of Arts in Health Settings - Practitioners and Projects

The Eastern Regional Arts Committee wishes to point out that this register is for the purposes of information only. The presence of absence of any project or contact person does not carry with it any inference or qualification whatsoever.

<table>
<thead>
<tr>
<th>What organization?</th>
<th>When?</th>
<th>What activity?</th>
<th>Nature of activity</th>
<th>For whom?</th>
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<td>AMNCH (Tallaght Hospital)</td>
<td>May-November 2004</td>
<td>Volunteer Art Cart</td>
<td>Maintain volunteer art groups. Currently 5 groups running.</td>
<td>For patients in ARHC (In-patient and Day Hospital), Dialysis and Ruttle Ward.</td>
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<td>AMNCH</td>
<td>May-November 2004</td>
<td>Concert series</td>
<td>Concerts booked for May to June.</td>
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<td>AMNCH</td>
<td>May-November 2004</td>
<td>Exhibitions</td>
<td>* Intercultural tent * Tallaght Institute of Technology photography exhibitions * SDCC 10th anniversary</td>
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<td>AMNCH</td>
<td>May-November 2004</td>
<td>Creative Writing Project</td>
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<td>Music Therapy in Psychiatry service</td>
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<td>AMNCH</td>
<td>Ongoing project</td>
<td>Ward Plaques</td>
<td>Visual arts</td>
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<td>Stairwell design</td>
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<td>AMNCH</td>
<td>May 2004</td>
<td>Audit of current art collection</td>
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<td>AMNCH</td>
<td>May 2004</td>
<td>PEACE exhibition</td>
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<td>AMNCH</td>
<td>May 2004</td>
<td>Schizophrenia Ireland Basin Club artworks</td>
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<td>AMNCH</td>
<td>May 04</td>
<td>Arts Council works on loan to be delivered and hung in hospital street.</td>
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<td>What organization?</td>
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<td>AMNCH</td>
<td>May 04</td>
<td>String Quartet: in the Atrium</td>
<td>Music</td>
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<td>AMNCH</td>
<td>May 04</td>
<td>Harp recital in ARHC Day Hospital</td>
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<td>AMNCH</td>
<td>June 04</td>
<td>Intercultural Tent</td>
<td>Exhibition</td>
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<td>AMNCH</td>
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<td>World of Music concert in the Atrium – part of SDCC Arts Festival <em>Fused</em></td>
<td>Music</td>
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<td>AMNCH</td>
<td>July 04</td>
<td>SDCC photographic exhibition celebrating 10 years of the council</td>
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<td>AMNCH</td>
<td>September 04</td>
<td>Tallaght Institute of Technology Temporary exhibition</td>
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<td>Our Lady's Hospital for Sick Children, Crumlin</td>
<td>October 2003 to June 2004</td>
<td>Puppetry residency</td>
<td>Performing arts</td>
<td>Patients and clients</td>
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<td>Our Lady's Hospital for Sick Children, Crumlin</td>
<td>Autumn 2004</td>
<td>Performing Arts residency/project</td>
<td>Performing arts</td>
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<td>ECAHB Open Door Day Care Centre, Vevay Road, Bray. Contact: Clare Desmond, Manager.</td>
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<td>Paintings, Pottery, Woodwork</td>
<td>Arts workshops</td>
<td>18-65 Physical Disabilities</td>
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<td>ECAHB Co Wicklow Contact: Veronica O'Leary, Director.</td>
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<td>Arts workshops exploring theme of &quot;Life as a Journey&quot;</td>
<td>Performing arts</td>
<td>All people with cancer and their families</td>
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<tr>
<td>ECAHB Rehab Care Rosslyn Park College Sandymount D 4. Contact: Joan Cullen, Training Supervisor.</td>
<td></td>
<td>Performing Arts: Music, Drama, Mime, Stage Management, Costume Design</td>
<td>Performing arts and backstage work</td>
<td>Adults with disabilities</td>
</tr>
<tr>
<td>ECAHB Traveller Women's Programme, c/o Rere 97 Main Street, Bray, Co Wicklow Contact: Rosemary St Leger, Manager</td>
<td></td>
<td></td>
<td></td>
<td>18-60 years</td>
</tr>
<tr>
<td>ECAHB Kinvarra House Nursing Home, Strand Road, Bray, Co Wicklow Contact: Elisabeth Prenter, Manager.</td>
<td></td>
<td>Various art classes conducted through a voluntary group</td>
<td></td>
<td>Older People</td>
</tr>
<tr>
<td>What organization?</td>
<td>When?</td>
<td>What activity?</td>
<td>Nature of activity</td>
<td>For whom?</td>
</tr>
<tr>
<td>--------------------</td>
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</tr>
<tr>
<td>ECAHB St John of God's, “Carmona”, Ravenswell, Castle St, Bray, Co Wicklow Contact: Pauline Mellett, Supervisor.</td>
<td></td>
<td>Arts and crafts</td>
<td>People of all ages with disabilities</td>
<td></td>
</tr>
<tr>
<td>NAHB St Ita’s Hospital, Portrane, Co Dublin (Mental Health Services). Contact: Mary Cantwell, St Camillus’ Therapy.</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapist</td>
<td>Art Therapy</td>
<td>For the in-patient and Admission Units</td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>Coolock Day Hospital</td>
<td></td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>Woodview House, St Ita’s Hospital</td>
<td></td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>Laurena Day Centre, Balbriggan</td>
<td></td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>St Francis’ Day Hospital, Raheny</td>
<td></td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>Artane Day Care Centre</td>
<td></td>
</tr>
<tr>
<td>NAHB Contact: Mary Cantwell, MSc, CRC, AT</td>
<td>Day Programmes have been in operation since 1995.</td>
<td>Art Therapy</td>
<td>Willowbrook Rehabilitation Unit, St Ita’s Hospital</td>
<td></td>
</tr>
<tr>
<td>NAHB Claremount Complex Services for Older Persons, CCA7:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAHB Clarehaven Home, Ms Patricia McMenamin</td>
<td>Drama</td>
<td>Drama</td>
<td>Residents at Clarehaven Home</td>
<td></td>
</tr>
<tr>
<td>NAHB St Clare’s Home Ms Sarah McShane</td>
<td>Art</td>
<td>Art</td>
<td>Day care clients and residents at St Clare’s Home.</td>
<td></td>
</tr>
<tr>
<td>NAHB Searchara Ms Elaine Moore</td>
<td>Art</td>
<td>Art</td>
<td>Day care clients and residents at Searchara</td>
<td></td>
</tr>
<tr>
<td>NAHB Lourdes Day Care Centre. Contact: Bernie Pierce</td>
<td>Art Programme</td>
<td>Art exhibition staged recently</td>
<td>Clients</td>
<td></td>
</tr>
</tbody>
</table>
A register of arts in health settings should be set up and maintained. Potential collaboration of arts practice and health promotion should be explored. The potential for community engagement and linking with health promotion in the public art commissioning process should be explored.
<table>
<thead>
<tr>
<th>What organization?</th>
<th>When?</th>
<th>What activity?</th>
<th>Nature of activity</th>
<th>For whom?</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAHB: St Joseph’s Intellectual Disability Services Arts Committee.</td>
<td></td>
<td>Art</td>
<td>Two designated arts spaces within the service and the use of the Church of Ireland on campus as a theatre space.</td>
<td>Clients of the service.</td>
</tr>
<tr>
<td>NAHB St Brendan’s Psychiatric Hospital, Rathdown Road, Dublin 7</td>
<td></td>
<td>Two groups of drama facilitated by drama teacher, Helen Blackhurst.</td>
<td>Drama.</td>
<td>For clients who have difficulties in communication skills, assertiveness, general conversation. For clients of long stay/continued care.</td>
</tr>
<tr>
<td>NAHB St Brendan’s Psychiatric Hospital</td>
<td></td>
<td>Creative Writing facilitated by Helen Blackhurst</td>
<td>Creative writing.</td>
<td>Residents.</td>
</tr>
<tr>
<td>NAHB Lusk Community Unit</td>
<td>Pilot for three months</td>
<td>Enhancing dining experience</td>
<td>Themed evening entertainment.</td>
<td>Residents</td>
</tr>
<tr>
<td>NAHB St Brendan’s Psychiatric Hospital</td>
<td></td>
<td>Sound-E-scapes facilitated by Slavek Kwi</td>
<td>Exploration of sound through manipulation of everyday objects</td>
<td>Clients.</td>
</tr>
<tr>
<td>NAHB: St Brendan’s Psychiatric Hospital</td>
<td>Sessional</td>
<td>Art Group facilitated by Triona Logan</td>
<td>Artwork – painting and drawing.</td>
<td>Clients.</td>
</tr>
<tr>
<td>NAHB: St Brendan’s Psychiatric Hospital, Special Care Therapy Unit</td>
<td>Sessional</td>
<td>Art Group facilitated by Triona Logan</td>
<td>Clients take part in the St Brendan’s Annual Art Exhibition and also in the Lundbeck Art Competition.</td>
<td>Clients.</td>
</tr>
<tr>
<td>What organization?</td>
<td>When?</td>
<td>What activity?</td>
<td>Nature of activity</td>
<td>For whom?</td>
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<tr>
<td>--------------------</td>
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<td>-----------</td>
</tr>
<tr>
<td>NAHB: St Brendan’s Psychiatric Hospital Special Care Therapy Unit</td>
<td>Weekly</td>
<td>Calypso Production (professional theatre company) provide two actors for one hour each week for a &quot;Dreamin’ in the Snoezelen&quot; poetry and drama group.</td>
<td>Drama</td>
<td>Clients.</td>
</tr>
<tr>
<td>NAHB: St Brendan’s Psychiatric Hospital Special Care Therapy Unit</td>
<td></td>
<td>A classical music session is provided by a member of the unit.</td>
<td>Music</td>
<td>Clients.</td>
</tr>
<tr>
<td>NAHB: Usher’s Island Day Centre for homeless men</td>
<td>Sessional</td>
<td>Music Group facilitated by Peter Malone</td>
<td>Music</td>
<td>Clients.</td>
</tr>
<tr>
<td>NAHB: Usher’s Island Day Centre</td>
<td>Thrice weekly</td>
<td>Art Group facilitated by Artist, J.J. O'Sullivan</td>
<td>Art</td>
<td>Clients</td>
</tr>
<tr>
<td>NAHB: St Mary’s Hospital, Phoenix Park, Dublin 8 Contact:Breda Hayes, Director of Nursing.</td>
<td>Since 2002</td>
<td>Art with Art Therapist Pauline Macey</td>
<td>Weekly art therapy</td>
<td>Residents and staff</td>
</tr>
<tr>
<td>NAHB: St Mary’s Hospital, Phoenix Park, Dublin 8 Contact:Breda Hayes, Director of Nursing.</td>
<td>Since 2002</td>
<td>Drama with facilitator Con Gunning.</td>
<td>Drama</td>
<td>Residents</td>
</tr>
<tr>
<td>NAHB: St Mary’s Hospital, Phoenix Park, Dublin 8 Contact:Breda Hayes, Director of Nursing.</td>
<td></td>
<td>Reminiscence project facilitated by Terence White and co-ordinated by two members of Activity Staff</td>
<td>Musical memories of ten residents taped and produced on a CD entitled &quot;Then and Now&quot;</td>
<td>Residents</td>
</tr>
<tr>
<td>NAHB: St Mary’s Hospital, Phoenix Park, Dublin 8 Contact:Breda Hayes, Director of Nursing.</td>
<td>Weekly</td>
<td>Multi-sensory programme</td>
<td>Music, sing-song, poetry recitation, therapeutic touch and movement to music.</td>
<td>Forty residents</td>
</tr>
<tr>
<td>NAHB: Cuan Aoibheann a service for young chronic sick people</td>
<td>Weekly</td>
<td>Music</td>
<td></td>
<td>Clients</td>
</tr>
<tr>
<td>What organization?</td>
<td>When?</td>
<td>What activity?</td>
<td>Nature of activity</td>
<td>For whom?</td>
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<td>-----------------------------</td>
</tr>
<tr>
<td>NAHB: Cuan Aoibheann a service for young chronic sick people</td>
<td>Weekly</td>
<td>Artwork</td>
<td></td>
<td>Clients</td>
</tr>
<tr>
<td>NAHB: Cuan Aoibheann a service for young chronic sick people</td>
<td>Sessional</td>
<td>Drama</td>
<td></td>
<td>Clients</td>
</tr>
<tr>
<td>NAHB: Soilse Drug Rehabilitative Service, North Frederick Street, Dublin 1 Contact: Gerry McAleenan</td>
<td></td>
<td>Holistic learning components of rehabilitation. A broad range of creative themes are employed</td>
<td>Current art facilitator is the Artist in Residence in the Fire Station Studio, Buckingham Street. Creative themes since 1992 include: Art, Drama, Video, Photography, Copper Engraving, Wood Carving, Graphic Design, Creative Writing, Music, Dance, Glass work and the award winning Soilse magazine Hyper</td>
<td>Arts courses are FETAC accredited and all facilitors are of professional backgrounds. Evaluation and public performance at festival and competition as well as the presentation of artwork to Ministers of State and the President of Ireland are among the outputs of the arts programme. Community arts links and regularly contributions to local arts projects.</td>
</tr>
<tr>
<td>Mater and Children's Hospitals Development: Contact: Dara Carroll, Arts &amp; Environment Manager MCHD. Email: <a href="mailto:dcarroll.mchd@mater.ie">dcarroll.mchd@mater.ie</a></td>
<td>Ongoing</td>
<td>Arts and Environment Programme</td>
<td>Commissioning artworks and developing a broad arts programme (as part of the Mater and Children's Hospital Development)</td>
<td>Patients, staff and visitors</td>
</tr>
</tbody>
</table>
The vision of the ERHA is to create a linked and co-ordinated structure for arts activity and the development of arts in health settings.
Conclusion

It is acknowledged that an alliance of arts and health has the potential to make a significant beneficial contribution to the well-being of individuals and communities. In order to maximise this contribution, the arts and health sectors need to work together to develop a strategic approach to moving arts and health beyond individual projects into mainstream activity.

A steering group is needed to develop this approach. The Eastern Regional Arts Committee is representative of both the statutory and voluntary sectors. It has demonstrated its ability to work effectively and to produce an environment where arts and health can develop and flourish. The committee has provided a number of different tools and resources to assist with this development. The Arts Committee would be very happy to progress this if required.
Artist Andrew Folan’s proposal, selected for the new Mater and Children’s Hospital Development as part of the Per Cent for Art Scheme
Appendices

Appendix I

Suggestions for Arts Committees

• Develop better communication networks for those involved in the arts and creative industries
• Ensure clients are at the core of all projects
• Establish advocacy/consultation groups
• Identify ways of encouraging the sharing of information between arts groups, practitioners and creative industries through newsletters, intranets, websites, libraries, etc
• Look into the feasibility of developing an interactive Arts Forum on the internet, linked to the ERHA and the HSE
• Work with partners such as the libraries and parish councils to identify any gaps and attempt to address these
Appendix II

Awareness Raising Programmes

These aim to raise the profile of the arts and the creative industries in health settings by:

- Establishing partnership with press and media
- Developing newsletters
- Working with venues to develop exhibition and performance opportunities
- Holding regular showcases of local artists
- Developing and publicising trails linked with other health settings or public buildings to attract people into these settings

Key areas to be investigated for further consultation and development:

- Identify priorities and facilitate arts projects to raise awareness and engage all ages
- To ensure sustainability, develop one or more arts projects that are specifically designed to document and display the benefits for health, and for health promotion
- Promote a sense of pride in health settings by showcasing and raising awareness of the uniqueness of each health setting through arts projects, linking with local artists
- To ensure sustainability, organise ‘taster sessions’ in various arts activities which could encourage direct engagement – for example an Awareness Day
- Promote a sense of community by bringing people together for arts events and activities, bringing in community arts organisations to work in health settings
- Value the centrality of communities in arts and health projects
- Contribute towards building a sense of community by bringing people together in celebration through arts events and activities
- Help to address needs around social inclusion and stigma of ill health
- Enhance quality of experience for sick children
- Identify potential areas within health settings that could benefit from an arts input and examine the feasibility of developing guidelines for art projects and architecture
- Ensure, where possible, that arts activities and opportunities are accessible to people with disabilities, special needs or from diverse cultures
- Value and grow the benefits of existing core cultural activities
- Provide greater access to quality and professional arts by:
  - Increasing provision of professional arts in the eastern region
  - Working with colleges and other providers
  - Taking arts to isolated services, e.g. through arts outreach work
  - Encouraging existing arts programmes to be pro-active in involving clients and arts practitioners from more isolated services
  - Investigating the possibilities for developing outreach work from external organisations to work in health settings, including community arts organisations, arts venues and providers
Appendix III

Glossary of terms

art / the arts
includes all forms of creative expression such as; visual art, dance, drama/theatre, architecture, music, literature, architecture, film, opera, music, circus etc.

abstract / non-figurative art
artwork concerned with expressing a mood, emotion, an aspect of a subject, or with the surface, colour and/or texture of the medium (rather than with the subject itself)

applied art
embellishments or designs on functional items such as furniture, carpets, soft furnishings, door handles, signs, children's playthings etc.

visual art
traditionally paintings, wall-hangings and sculptures - more recently also includes video, digital technologies such as CD-ROM or web-pages; film, performance art, artists' books etc.

art work
a general word for art objects, installations, performance, video etc.

commissioning
employing a selected artist to make a particular item, usually at an agreed price / fee

contemporary art
art made by a currently living artist or art made within the last 10 years

figurative / representational
recognisable and often familiar images (i.e. portraiture, still life and landscape), conventional works, illustrative and realistic works considered ‘true to life’

fine art print/original print
work/s individually made through the printing process i.e. the image is transferred from one surface to another. Such an image is a piece in its own right but can be made in editions so that there can be more than one of each image - fine art prints can incorporate such techniques as etching, mezzotint, engraving, aquatint, drypoint, screenprint, relief printing, lithography, monoprint, collagraph, carborundum
<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>fresco</td>
<td>a method of making images on walls using a special paint onto a wet plaster surface (often used in previous centuries in churches)</td>
</tr>
<tr>
<td>installation</td>
<td>a work made for a particular location - would tend to be temporary</td>
</tr>
<tr>
<td>medium / media</td>
<td>the components with which the work is made i.e. oil paint, watercolour paint, stone, bronze, wood, recycled materials, plastic, film, video etc.</td>
</tr>
<tr>
<td>new media</td>
<td>digital technologies (i.e. CD-ROM, web sites); video etc.</td>
</tr>
<tr>
<td>performance art</td>
<td>a live art work often involving the use of the artist's body</td>
</tr>
<tr>
<td>reproduction</td>
<td>a duplicate of an artwork, i.e. a copy made photographically of a painting or other image - can be mass produced i.e. posters, reproductions of famous paintings, etc.</td>
</tr>
<tr>
<td>site-specific art work</td>
<td>a work made for a particular location - would often be related to a commission - would tend to be permanent i.e. The Spire in O'Connell Street</td>
</tr>
<tr>
<td>subject</td>
<td>the theme with which the work is concerned i.e. a person, people, landscape, religious event</td>
</tr>
<tr>
<td>emerging artist</td>
<td>one at the beginning of career</td>
</tr>
<tr>
<td>art practice</td>
<td>artist's method of working (studio, manufacture of work, exhibition, sales etc.)</td>
</tr>
<tr>
<td>SDCC</td>
<td>South Dublin County Council</td>
</tr>
<tr>
<td>AMNCH</td>
<td>Tallaght Hospital</td>
</tr>
<tr>
<td>NAHB</td>
<td>Northern Area Health Board</td>
</tr>
<tr>
<td>ECAHB</td>
<td>East Coast Area Health Board</td>
</tr>
<tr>
<td>SWA HB</td>
<td>South Western Area Health Board</td>
</tr>
<tr>
<td>HSE</td>
<td>Health Service Executive</td>
</tr>
</tbody>
</table>
Appendix IV

Useful websites and addresses

Department of Health and Children: www.doh.ie
The Eastern Regional Health Authority: www.erha.ie
The Arts Council/An Chomhairle Ealaíon: www.artscouncil.ie
Information regarding Arts Council Schemes Grants and Awards > Support for Artists > Artists’ Schemes
The Office of Public Works: www.opw.ie
Information regarding the work of Dr Rosalia Staricoff: www.publicartonline.org.uk/archive/research/studystaricoff.html
Chelsea and Westminster Hospital, 369 Fulham Road, Chelsea, London SW10 9NH
Tel: 020-8746-8000  Fax: 020-8237-2784
Health Portal (from January 2005) www.healthireland.ie

Appendix V

References

Arts and Health Handbook (a practical guide), Arts Council, 2003 (available pdf document www.artscouncil.ie/library)
The Practice of Arts in Healthcare, ERHA/Arts Council, 2003
Work by a young diabetes patient from Tallaght Hospital