



Salford Creative Health Network Meeting

Date: Monday 29 January, 10am to 12.30pm

Venue: The Lowry

Welcome & update from Caroline Alexnder from SCL and Bruce Poole from Salford CVS

- Theme of today is evaluation & measuring impact. What does good creative health evaluation look like in Salford? How can we balance data, stories and creativity? How can we use evaluation to bring more funding into the city to scale-up work & work collectively?
- Looking ahead: 4 network meetings in 2024 – each quarter. Next one in April will be on joining up better & strengthening communication between ourselves and participants. Ideas welcome for format/venue. CA to send short survey to gather feedback from everyone.

Case studies 1-3 – see attached PDFs of presentations

- **Measuring the impact of START's Art on Prescription Programme** – Michelle Dennett from START
- **Evaluating Salford Youth Service's photography project creatively in Little Hulton Family Hub** – Natalie Lunn & Rob Fulton from Salford City Council
- **Evaluation of Women into Visual Arts: a cross-cultural, inclusive project across two continents** – Bev Fletcher from Langworthy Cornerstone

Questions/discussion:

- How are evaluation questions from mentors at START asked in a systematic way? Michelle: Mentors assigned, relationships built, personal development plans in place. Participants understand that they are referred but want them to feel like they are aspiring artists – questions re: wellbeing relate specifically to this as opposed to mental health and recovery.
- Evaluation challenge can be getting balance right – without it becoming too onerous – how do you incorporate it with this in mind? Michelle: evaluation built into discussions/questions that asking all the time. Members understand funding and want START to prove impact on people. Part of the everyday, no issues getting that from people, especially re having mentors. Rob Fulton Youth Service: be direct with people as to why we have money and that we need to know – so YP understand process. Qualitative is so important – adds depth, need a relationship to do that.
- Who are START mentors? Michelle: employed staff – some are people that have been through programme. Also have 50 volunteers, some of whom do initial visits & capture initial data.
- Question to Early Help/Youth Service re: movement/walking – how in evaluation would you attach physical activity to creative activity to make benefits explicit? Rob/Natalie: encouraged people to tell stories in their pictures– a lot of info comes out this way.
- Interesting that we don't always ask what participants want to get out of projects at the beginning, often set out with organisational/funder priorities. Useful to adapt Wellbeing wheel to participant-led questions.

- Discussion re: pauses for reflection in a project being beneficial to person involved as well as funding reports? Bev: captured that on video link to Nigeria and unexpected and profound impact on participants. Useful for participants to have opportunities to reflect.

Case studies 4-5 – see attached PDFs of presentations

- **Arts for the Blues: Evaluating creative psychotherapy within the NHS** – Joanna Omylinska-Thurston & Scott Thurston from the University of Salford
- **Creative Evaluation and Arts for Wellbeing at The Lowry** – Louise Harney, The Lowry

Questions/discussion:

- Question re: how referrals work for Arts for the Blues? GM Mental health regular pathway and can self-refer as a group, access for free. Commissioned GM CAMHS 8 groups from March.
- Discussion re: the need to show funders what works for us (participants/organisation) in terms of evaluation, not just 1-10 scale measures. And how useful is it – lots of factors influence how people respond to this. And it can be alienating. Be more creative/responsive to project.
- Important to ask communities to inform evaluation measures rather than just what funders want.
- Might they be just as impressed by creative outputs – something really unique.

The WELLBY: Measuring and valuing social impact in line with HM Treasury guidance – Lizzie Trotter from State of Life – see attached PDF

Questions/discussion:

- Question re: how might this approach (surveys etc) work with smaller data sets – a lot of creative health work smaller groups. Lizzie: when data tracks individuals (e.g. Stockport activity referral service) the less you can generalise & less representative but can be indicative findings to build on or scale it in the future, engage funders etc.
- Some concern expressed that we have to make the collective case economically to show the value of this work. And that we're always being asked to do more with less. There has to be the economics to go with the wellbeing value. Lizzie – context is important and having quality evidence. WELLBY doesn't just search for the big numbers. Rigour.
- Question re: if there a cost for this work and concern re: this financial cost taking away from participants/activities on the ground. Lizzie: State of Life don't own the approach, it's publicly available. But organisations do need to pay for analysis. Coalition approaches welcome with core aim for over 50 orgs to use for it to be cost-effective. Open to conversations.
- Point raised that the Green Book can be downloaded & is easily available. Everyone can use its guidance in evaluation easily. And this information can be used for tendering – whether bidding for contract or using to apply for funding/grants.

Wider Discussion

- Does consistency of data between organisations matter? People evaluating in their own way but is there a value in sharing measures? Would be useful to have a set of evaluation tools, perhaps on Salford CH website – where people could see best practice. Or to have some regular get together for those who do evaluation to learn from each other (smaller working groups).
- Perhaps would be useful to organised some shared training sessions – e.g. share costs of bringing in an expert for a shared learning session. CA to ask if people interested in network survey.
- How do we move forward together to share success stories? Desire for people to have more opportunities to showcase their work. There is an August Creative Health month on social media (started by Muna's public health calendar). At next network meeting with discuss ideas for

#YourCreativeHealth in August 2024 – but actually these stories need to be shared consistently. Would be good to celebrate our connectivity. And/or could we collate stories on shared website?

- There are also some key interesting stories that come out when you listen to just a few case studies today. Would be good to have a platform/opportunity to share these collectively, e.g. creativity engaging young people that don't otherwise engage; creativity being the first step on the road to employment/other training. This is happening across the city and it's a key theme – how do we showcase not just individual examples of this – but the collective case?
- Discussion about who is in the room today (and who is missing). Not actually any commissioners or clinical leads – people who can tell us what sorts of evaluation they really recognise as impactful. Bruce: we need to lobby commissioners as a network to come up with some consistent guidance re: ways of evaluating delivery (that is proportionate to delivery). Don't want to take away from on the ground delivery. Reports often go into a black hole. Collective power in Salford.
- Joanna: do we need a holding space for this information and learning for the city. Come up with our own approach that works, rather than asking the commissioners to lead. Happy medium. Engage commissioners in the conversation. Julie McCarthy to support with this. Is it arts-led, NHS-led, Commissioner-led, participant-led? CA to discuss with JM – getting more commissioners in the room.
- Rod: iThrive GM model. Certain things we have to have to measure impact specifically. Should we collate all this recognised models/approaches. CA to investigate – ask question in survey.
- Discussion re: people's pathways through different interventions/support across the city. If someone engages in X project, how do we make sure we signpost them to Y. And how might we track this movement across the city. How well are we linked up in this way – so there are no dead ends in Salford.
- Useful to have questionnaire/survey re what participants to CH Network would like to see?

Actions:

- CA to set up Creative Health mailing list – to ease communication.
- CA to send everyone a (short) survey with a few questions about how everyone would like to develop the network. What we'd like to see happen: e.g. website; shared training; shared evaluation toolkit; place to share case studies etc.
- Next meeting: April (date TBC) with focus on: Strengthening Connections & Communications – suggestions for speakers, case studies, format of session and venue welcomed. Please email caroline.alexander@scll.co.uk