

## **Professional musician and lead facilitator Heather McClelland reflects on her role in VOCAL BEATS, a three-year music project for hospitalised young people at Royal Brompton Hospital**

I first started working on Rose Ward, a paediatric ward at Royal Brompton & Harefield NHS Foundation Trust in November 2015. It is a specialist hospital which treats people from all over the UK with the most complex cardiothoracic conditions/diseases.

Inspired by the success of Singing for Breathing (SFB) workshops for older adults living with Chronic Obstruction Pulmonary Disease (COPD), Karen Taylor, Head of Arts, created a new pilot music project for young inpatients. A new role was created, advertised and I was appointed.

From the outset it included the teaching of SFB techniques for paediatric patients and music-making/lullaby sessions for the younger patients. I have a performance background, with many years working as a singer, songwriter and ukulele player. Although I had always combined my performance practice with music education, I had never worked specifically in a healthcare setting, but when I found the job, it felt like a great opportunity to bring my skill set and passions together for the first time.

As soon as I started working on the ward, I saw the transformative effect music can have in clinical settings. Within this environment, music felt so concentrated and the intense impact was highly evident. Lyrics were suddenly so much more important – and a particular song could make a mother cry, or a family sing together and often, positively change the mood of the bay. It took me a while to build the confidence to gauge the space, to know what was going on in the room and the appropriate repertoire for that moment, as well as finding songs that met the needs of such a varied age group.

There were moments where I would take more of a performative role, alongside occasions where music activities would become participatory. Things could also change in an instance, and I developed a hypersensitivity to understand what was going on in each location. For example, the room could be in the middle of a group sing along when a patient returned from surgery and the upbeat song would no longer be appropriate. Becoming familiar with and not scared of the quick-changing pace of hospital life really helped build my confidence for working in this environment.

One aspect that feels special about working in a hospital setting is that it is a very human place – no matter what circumstances people are in outside the hospital, it is a real leveller for people. Depending on what people are dealing with, it is often a time of great vulnerability. Patients and their families are allowing you into a very intimate environment, and whilst my role is about playing music, it is also about recognising human connections are formed, being sensitive and responsive to how other people will react. Many patients at Royal Brompton will stay long term and/or return frequently. Vocal Beats has been designed to provide 4 hours of creative-

music twice a week, we will often get to know patients and their families well and can become a big part of their experience. Many patients are critically ill, so at times we are faced with patients passing away. This is never something that is easy to deal with, especially when you experience it for the first time when it can be very challenging. The Play Service Manager, Maxine Ovens, has been an amazing help with these occasions, supporting me and ensuring I have a debrief after every session. In instances where I have found hard a death particularly hard to deal with, she has been very good at reminding me to turn it around - rather than focus on the sadness of the situation, to think instead about the positive memories that I have helped that patient and family to create through my own music practice.

Time spent on the ward is very varied in that you never know quite what is going to happen. There are some magical moments that you couldn't plan if you tried. The patient group I work with spans from 0-17 so I have had to build up a vast array of activities and songs for the different age groups. A flexible and fluid approach is also essential since the material planned for the sessions can often change or have to be adapted. But what is key is that the work I do is responsive to the needs of the patients, families and guardians at the particular time.

As the project developed throughout 2016 it became evident that we were not reaching teenage boys. Although I would offer age-appropriate singing for breathing activities, and/or ukulele playing, it didn't seem appealing or very current to this cohort! In short, we needed to find a more effective way of meeting their musical interests. During a conversation with a physiotherapist about this gap in provision, we developed the idea of introducing beat boxing for breathing. Due to my own performance work and contacts, I know a large network of incredibly talented beatboxers and musicians. When selecting who to ask to take part, I wanted someone who not only was a fantastic musician, but who would also bring the right energy and approach with the capacity to work in a hospital setting. When I recruited the beat boxers they were both very excited about getting involved in the project, and we worked alongside physiotherapists to find ways that beatboxing would work towards the same benefits as the Singing for Breathing programme. As part of their induction, we organised a joint training session with Physiotherapists to share practice and knowledge about cardiothoracic conditions and breath management.

Bringing in the beatboxers brought in a new energy to the project and, from my perspective, having other musicians to bounce off during the sessions made a massive difference to the quality of provision. The young people responded really well (in that it was hugely popular) whilst it also diversified the project and made it more contemporary. From then on all music activities on Rose Ward included some aspect of beatboxing – from accompanying me with lullabies or nursery rhymes (which the babies loved!) to leading beatboxing lessons, or using beatboxing as an accompaniment to a song a patient was singing, the sounds of Boots and Katz was never far away.

One of the reasons we were able to introduce beatboxing to Rose Ward was because of the holistic and the inter-disciplinary approach supporting the hospitalised young person. Indeed, I am not simply an external musician who comes in each week to play music, I am instead, a key team member who works alongside other clinicians and rbh&Arts to find creative ways to provide each young person with the best hospital experience. It is fair to say that I have been able to learn from other staff members whilst also contributing to the approach on the ward. For example, every time I come into the ward in I have a detailed handover from the Playteam Service which supports me to recognise the specific needs of the patients. I also work closely with rb&hArts which supports the project to develop, as together, we bring expertise in music in health practice and the broader arts & health together.

I will often also provide music activities alongside physiotherapists. For example, I spent several months working alongside Alison Bolton, Highly Specialist Neurodevelopmental Physiotherapist. Together we worked with F, a 1-year old child who required regular exercises which was uncomfortable for the patient and a challenge to complete. Instead, working together, we introduced music to the sessions with Alison guiding the style and tempo using live music to structure the sessions with exercises. Alison believed that said there was a marked difference in F's responsiveness and said that with the introduction of the music she was often able to get F to stay in positions she had previously struggled with. The thing that was also so lovely about these sessions was that F's mother and grandmother loved music and would always sing along during the sessions. Sometimes they would even teach me, the nurses and other patients' songs, which would have a big impact on the room. During the sessions F would shake rattles, smile and kick along - it was really evident how much she loved hearing her mum sing. Indeed, it felt like a big part of my role was to create the space for that musical interaction between the family.

Another example of our interdisciplinary approach was with a difficult asthma patient E who is 10 years old. Her condition was impacting upon many areas of her life outside the hospital including school attendance and overall confidence. One of the physiotherapists requested that I run Singing for Breathing sessions with exercises that would help those areas of breathing that they wanted to develop further. E seemed to really enjoy the sessions and continued to practice throughout her stay. When she was discharged she was given a Singing for Breathing CD to continue her practice at home. A few months later I spoke to one of the physiotherapists from outpatients who said that she had had a session with E and had seen an outstanding improvement in her breathing and confidence. She said that E had told her she had been practicing with her SFB CD every night, that her attendance at school had improved greatly and that the hospital stay had made a huge difference to the quality of her life. There were of course many contributing factors to the improvements E had made, as during her stay she had worked in a very holistic way with staff and clinicians on the ward, but it was extremely positive seeing how the music had also played an integral role for E's treatment.

One of my favourite parts of the job is meeting some remarkable young people who then return to the hospital and are excited at being able to continue the music projects they did during their last stay on the ward. It's great having the opportunity to continue to develop their interest in music and support their music education/progression. It feels like a real privilege to contribute to their wellbeing and can also have positive associations with the hospital. One very fond memory I have from the ward is a 9 year old patient M, who I have seen every few months since the project began. She loves music and is always incredibly enthusiastic about the sessions when she returns. She brings her ukulele with her (something she was inspired to buy after our sessions) and has told me she counts down the days till the next session. On one of her visits I helped her to write a song about a unicorn. On the next visit, though she was initially shy about the prospect of performing, she decided she wanted to do a performance of the song. We worked alongside the Play Service and the school to organise the event. M made 30 tickets at school which she gave out to the ward. The playroom was full for the performance and everyone sung along to the unicorn song she had written. Other patients also performed songs as did one of the leading heart consultants. It was a real moment where music had impacted the community spirit on the ward and there were lots of smiles throughout the room.

I feel so incredibly lucky to be part of the Vocal Beats project and to work on the Rose ward. I consistently see the positive impact of music on wellbeing for young people in a very direct way and I love the diversity of the project. I also appreciate the freedom to respond to the needs of the individuals and I get to meet the most amazing people. I am very clear that the whole experience of working on this project has made a big impact on my own performance practice. Perhaps it is due to the human aspect of a hospital environment or the fact I've had to overcome any feelings of self-consciousness when going into sing in a bay, but I know that my stage presence and capacity to speak to the audience in my own gigs has really improved, as well as my musicianship and capacity to figure out a song on demand, as frequently happens when children make requests! I have also recently started doing music sessions at Great Ormond Street Hospital and I am looking forward to having the opportunity to reflect on my own practice through working in a different environment. Seeing the positive impact and progression of Vocal Beats in such a short time really highlights for me how exciting it is and how much potential it has to continue growing. I am looking forward to being part of the journey.

**Royal Brompton & Harefield NHS Foundation Trust** is the UK's largest specialist centre for the treatment of heart and lung disease. Working from two sites, Royal Brompton Hospital in Chelsea, West London, and Harefield Hospital, near Uxbridge, the Trust has an international reputation for the expertise of its staff, high standard of care and research success. Experts at the Trust help patients from all age groups who have heart and lung problems and provide some of the most complex surgery and sophisticated treatments available anywhere in the world.



**rb&hArts** is delivered through Royal Brompton & Harefield Hospitals Charity. It is charitably funded to bring the benefits of the arts to support in and outpatients. They aim to increase levels of wellbeing, enhance the patient experience and improve the healthcare estate through the arts. It first began in 2002 and now, in a typical year, they run 250 workshops with over 5,000 people taking part.

**Vocal Beats** is a three-year music project for young people in hospital which aims to provide early-years singing and music activities for babies and their parents; creative music-making for people of all ages; beatboxing and 1-2-1 vocal coaching for young people living with breathlessness. It promotes wellbeing, builds confidence and teaches new music skills to young people. It is generously supported by BBC Children in Need, Brompton Fountain and Youth Music

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