



**TRINITY LABAN CONSERVATOIRE  
OF MUSIC & DANCE  
VITALARTS**

A SERVICE EVALUATION OF A 6-WEEK VITAL DANCE PROGRAMME AT MILE END  
HOSPITAL FROM JUNE-JULY 2015

**ABSTRACT**

This evaluation provides an overview of the Vital Dance provision for older adults at Mile End Hospital, detailing the collaboration between Trinity Laban Conservatoire of Music and Dance and Vital Arts, an overview of the dance sessions provided at Mile End Hospital, feedback from staff as well as patient engagement in the project.

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## SUMMARY

Over two million people access the five hospitals which fall within the Barts Health NHS Trust each year, their ailments as diverse in nature as their demographic. Combined with routine diagnosis and treatment of conditions, Vital Arts on behalf of Barts Health NHS Trust offers a range of supplementing arts activities to the patients including, music, film, visual arts, cookery, and dance.

A collaboration between Vital Arts and Trinity Laban Conservatoire of Music and Dance, Vital Dance was founded in 2010 to deliver dance sessions to maintain and improve the well-being of patients and the wider hospital community. This evaluation assesses the first Vital Dance project working with older adults on wards at Mile End Hospital in the summer of 2015. Prior to this Vital Dance was a provision only delivered to children and young people on wards in The Royal London Hospital (2010-2014).

The purpose of this report is to evaluate the success of group and bedside dance sessions in areas of physical capacity, health and wellbeing of the patients who were being treated on two wards at Mile End Hospital in the summer of 2015. Vital Dance provided an opportunity for patients to experience and enjoy dance as both a creative art form and an alternative physical activity to physiotherapy group sessions.

A team from the Dance Science department at Trinity Laban monitored patients' engagement levels throughout the sessions, and distributed questionnaires to the hospital staff at the end of the project. The findings of the Mile End Vital Dance project are largely qualitative, subjective and anecdotal in nature as patient cognition was very low in the participating population.

## INTRODUCTION

### What is Vital Dance?

Vital Dance is the name given to a partnership initiated by Vital Arts in collaboration with the Learning and Participation department at Trinity Laban Conservatoire of Music and Dance. Between May-July 2010 the first Vital Dance sessions were delivered on four inpatient children's wards at the Royal London Hospital. Vital Dance on the children's wards began as a fun new way of engaging the patients and improving their health and well being and over time developed to become a structured part of the children's rehabilitation.

In 2010 pediatric physiotherapists provided a brief handover each day to prioritise young patients. Bedside visits were made available to the children who were unable to leave their beds. The health status of the patients was diverse, and those also in isolation due to infection control received one on one bedside visits to avoid contamination.

During the residency of April-August 2012, handover sessions with the pediatric physiotherapists become more detailed to provide the dance artists with specific information regarding each patient's needs. This initial provision marked the beginning of a successful collaboration between Vital Arts, Trinity Laban and the physiotherapy team.

The fully inclusive dance and creative movement programme included sensory work for those with special needs; bespoke one-to-one classes for patients undergoing neuro-rehabilitation; cardiovascular workouts for respiratory patients; creative movement for babies, toddlers and their parents; and street dance and hip hop available to those attending outpatient clinics. Group sessions took place in play areas, classrooms, wards, waiting areas, physiotherapy gymnasiums and an outdoor 'play space'.

## Vital Dance Aims

Aims for Vital Dance projects were as follows;

- To provide an enjoyable and innovative way of incorporating dance and movement into patients' rehabilitative targets.
- To facilitate two-way observations between Laban dance artists and physiotherapists which explores the synergy between the two practices; enables dancers to deliver creative dance sessions informed by knowledge gained from physiotherapist consultation and observation; enables physiotherapists to explore creative solutions to therapeutic goals
- To provide additional exercises and activities which are:
  - informed by the patient's physiotherapist;
  - tailored to each patient's needs;
  - designed to reinforce patients' rehabilitative or respiratory targets (posture; airway clearance (breathing, huffing); core strengthening exercises; general fitness/cardiovascular; weight transference?).
- To explore creative ways to engage reluctant patients in fitness sessions.
- To use creative movement to energise patients and to nurture their physical, psychological and emotional health.
- To encourage physical activity and mobility in an environment which is traditionally sedentary.
- To provide creative, stimulating and physical activities for patients who may otherwise not have access to the art form.
- To allow all participants to engage in imaginative, creative dance exploration at their own level whilst finding renewed skill in co-ordination and balance and re-gaining confidence in their own physical ability.
- To celebrate the participation and achievement of all patients, encouraging positive body image and acceptance of change related to this.
- To offer the opportunity for patients to interact in small group situations sharing experiences in a structured yet fun environment.
- To provide ongoing evaluation between dancers, physiotherapists, hospital staff participants, and carers, enabling all to contribute to the outcome of the sessions and to influence how future sessions are structured.

## Project Partners

### Vital Arts

Vital Arts is the pioneering arts organisation for Barts Health NHS Trust - the largest NHS Trust in the UK, with five hospitals in east London and over 2.5m patients. Vital Arts work in partnership with medical staff, artists and cultural organisations to devise and deliver therapeutic creative programmes - workshops, residencies, exhibitions, installations and public art commissions - that support medical goals; enhance patient well-being; provide continual professional development opportunities for staff; and create stimulating and uplifting spaces for patients, staff and the wider hospital community. A list of Vital Art's current projects can be seen in figure 1 below.

[www.vitalarts.org.uk](http://www.vitalarts.org.uk)

Vital Dance (paediatrics)	In partnership with Trinity Laban and a multidisciplinary team at The Royal London Hospital made up of physiotherapists, play specialists and teachers. Patients are offered dance as an option to enhance their physiotherapy.
The Song Weaver & Sail Away	In partnership with Speech and Language Therapists and Physiotherapists. Participatory singing sessions are offered to all children under five to encourage parents to read communication signs, to encourage young children to reach developmental milestones in speech and movement. Project include writing and recording new works for staff to use with future patients to support learning and reaching developmental milestones
Come Sing With Me	Singing project for older adults in partnership with the London Symphony Orchestra, Dementia Specialists and Occupational Therapists
Being As You Mentioned	Arts reminiscence project in partnership with Occupational Therapists; collecting stories from patients and talking in response to carefully curated photographic stimuli.
Feeling At Home	In partnership with the Geffrye Museum and Occupational Therapists. Object handling (including plant cuttings) from the museum's collection to stimulate reminiscence conversations
Vital Dance	

Figure 1: Current arts in health projects offered by Vital Arts

### Trinity Laban Conservatoire of Music and Dance

Trinity Laban Conservatoire of Music and Dance primarily offers a range of music and dance undergraduate and postgraduate courses and performances from their home in South East London. As well as providing degree-level education, Trinity Laban is an advocate for community and social inclusion work. The Learning and Participation department at Trinity Laban coordinates many inclusive projects with people of all ages and abilities. The diverse courses cover professional development for dancers, adult classes, classes for older participants (aged 60 plus) and health projects.

Trinity Laban Learning and Participation (Dance) offer a distinct approach to Dance and Health work. The staff and artists are not Dance Therapists, their strength lies in high quality and sensitive delivery of the art form, which is adapted to remain accessible for any person despite age or ability. Trinity Laban’s Learning and Participation practice is driven by creativity, more so than therapeutic aims, allowing participants to become physically, emotionally and creatively invested – factors which are suggested to support good physical and mental health and wellbeing.

Trinity Laban have a breadth of experience delivering Learning and Participation activities with a variety of health partners. Through robust project planning and partnership working they are able to deliver models which provide reciprocal learning for dance artists, context staff and partners. This supports a shift in perceptions about the value of arts in health and social care settings. As a Higher Education Institution, with a Dance Science department and established Masters programmes, Trinity Laban are uniquely placed, and committed to providing a robust evidence base for the field of Dance in health settings.

Current Dance Projects at Trinity Laban	
Headstart- Dancing Ahead	Fun, creative dance classes for young people to support transition to secondary school. This group is targeted at young people at risk of mental health issues.
Headway	This project’s purpose is to improve the wellbeing of people affected by acquired brain injury living in the DCT area and the inner south east London postcodes Working in collaboration with a neurological physiotherapist, who will provide specialist assessment and evaluation of outcome, the project will aim to improve wellbeing, balance and movement
Bellingham Beats	A creative dance class for young people with an aim to improve general community wellbeing.
Retired Not Tired	A music and dance programme for the over 60’s, comprised of music, dance and combined music and dance classes.
Dance Ability	A weekly creative dance class for young people aged 5-12 years with disabilities and their siblings. This class accepts self-referrals as well as GP referrals.
Kaleidoscope	Kaleidoscope brought together specialist community services for health, disability, mental health, education and social care. Dance sessions at Trinity Laban allowed Physiotherapists to benefit from CPD throughout the process. Project came to completion in July 2015.
Pulse	This programme is for 7-13 year olds in Lewisham who do not have access dance or physical activity and/or are above a recommended weight. Self-refer or referred from a GP or school nurse. This project is no longer active, though the department is actively investigating funding options.
Vital Dance	

Figure 2: Current dance-health projects offered by Trinity Laban

## VITAL DANCE AT MILE END HOSPITAL

Mile End Hospital (MEH) is a community hospital in Tower Hamlets which offers a range of inpatient and outpatient services. Vital Arts and Trinity Laban collaborated in 2015 to provide accessible dance sessions to older adult patients on two wards; Gerry Bennett Ward and Jubilee Ward. These wards specialise in rehabilitation, aiding older adults in their journey back to independent living, or assisted living, through physiotherapy and occupational therapy sessions.

Therapist-lead classes at Mile End Hospital include:

- mindfulness sessions to positively encourage a range of psychological components, specifically cognition and social mobility;
- upper limb seated exercise classes to improve functional reach;
- a balance class using fixed parallel bars to promote weight bearing, equal gate and improved equilibrium.

The project was managed by Louisa Borg-Costanzi Potts, the Learning and Participation (Dance) Programme Manager from Trinity Laban; Rachel Louis, Arts Participation Manager from Vital Arts; freelance dance artists Anja Schall and Chantal Bardouille; and two dance researchers, Agathe Dumont and Jasmine Middleton. The external team worked alongside the ward occupational therapists (OT's), physiotherapists and therapy assistants.

Liaison with the ward staff allowed for some common goals to be established. The OT's aims for Vital Dance differed from the Physiotherapists; both are outlined below.

Occupational Therapist Aims:

- Opportunity for social interaction
- Increased eye contact
- Improving independence
- Prevent isolation (encouraging patients to leave beds)

Physiotherapist Aims:

- Enhanced balance
- Encourage movement and functional reach
- Improved weight distribution

The project ran for six weeks, from May-July 2015. The first three weeks took place in the afternoon, and the remaining sessions took place in the morning to avoid disrupting the schedule for the classes already available to the patients and to gain a better understanding of the best time to conduct these sessions for future projects.



Session Overviews

Group Session

Group sessions lasted an average of 52 minutes (SD=10.37) and were loosely structured around a warm up, standing work, mobilizing joints, rest periods, creative tasks, and cool down (see figure 2). Each section varied in length and intensity each week, working directly with the group dynamics to benefit each patient.

Section	Example
Warm up (10-15 minutes)	Seated: Breathing patterns, self massage, dynamic stretches, making eye contact across the room, clapping, reaching. Choice of standing/remaining seated: shaking hands, swaying, breathing in with expansive movement (e.g. arms out) and breathing in with centering movement (e.g. bring limbs back to centre).
Mobilising joints (10-15 minutes)	Copying the dance artists, all seated. Nodding, twisting, reaching, tapping, lifting legs, heavy repetition with developing material, e.g. tilting head, swaying upper body, reaching with arms side to side.
Rest period (5 minutes)	Deep breaths, rolling the head and spine up and down, upper limb stretches in all directions.
Creative Task(s) (10-15 minutes)	Usually with a colourful and sensory prop (inflatable balls, bean bags, ribbons, silk scarves, elastic material). Starts with copying the artists, develops into independent exploration of the prop. Depending on number of available staff/assistants, patients with the ability stand to explore prop whilst standing. Bending knees, lifting legs, transfer of weight. Using the prop from the previous task. E.g. passing the ball around, throwing the scarves to each other, linking hands, twisting and reaching. Partnering dance artist/staff with a patient and asking patient to stand, gentle swaying/twisting to the beat of the music.
Cool Down (5-10 minutes)	Gentle dynamic stretches, seated rotations of the spine, deep breaths, singing, tapping, round of applause, drink of water, talking about the session.

Figure 3: Vital Dance group session content

### Bedside Session

The bedside sessions were usually more sedentary than the group sessions, the patient remaining in bed for the duration of the session.

Section	Example
Warm up	Talking to each other, introducing idea of movement and use of a prop. Gentle self/other massage. Touching of hands, encouraging eye contact and mirroring.
Activity	Tapping along to music, swaying, tilting.
Cool Down	Gentle dynamic stretches, seated rotations of the spine, deep breaths, talking about the session.

Figure 4: Vital Dance bedside session content

### Patient Demographic

Up to 80% of the patients on the Gerry Bennett and Jubilee wards have mild-severe cognitive impairments. The patients range in age from 65 to over 100 and have been admitted for a variety of ailments from infections to falls.

Approximately 75% of patients on the wards have impaired mobility and need assistance to stand and walk. On average patients remain on the ward for six weeks before being discharged.

## RESULTS

### Patient Outcomes

*'[the patient] has become more and more withdrawn during her stay, which is fairly common. She never speaks anymore and never moves her peripheries. It's amazing.'*

– OT statement after witnessing a bedside visit where the patient was tapping her toes along to the music and with her eyes closed held onto the dance artist's hands.

*'Usually [the patient] needs lots of persuasion to stand and it take two of us to assist her. She was really engaged in the session and wanted to join in. She even tried to stand alone but never has before'*

-OT describing a patient's reaction to the group session.

*'[The patient] is a 'special' so we hire extra help for additional fees to be at her side 24/7 because she's always on the move. It's a shock for us to see her like that!'*

-OT describing how a patient who requires external support joined in for the whole 60-minute group session.

*'The patients all have different coping mechanisms ranging from becoming mute, aggressive or distracted. But by doing dance they have to look at you to know what they have to do, so it's good.'*

–OT describing cognitive responses of patients on the wards.

*'[I] only witnessed two weeks of this class, however I saw that the patients were more engaged with therapy and that it improved their state of mind and above all they enjoyed the sessions'*

-Physiotherapist comment in the evaluative questionnaire.

### Staff Feedback

Feedback from staff was gathered through recording corridor conversations regarding the sessions as well as an evaluative questionnaire at the end of the project.

The questionnaire revealed that staff felt that most patients' participation in the dance sessions positively impacted their treatment, increased their self esteem, increased motor coordination and body control and aided relaxation (all responded neutral-strongly agree on Likert scale). Staff also agreed that the additional movement session better prepares patients for discharge from the hospital, improves the patient's current mental wellbeing state and provides positive stimulation where patients might otherwise be isolated. Both the physiotherapists and occupational therapists said that these results were long lasting, and 'that they were often more engaged for a day or two following the session'.

Only one of the physiotherapists arranged her schedule to allow her to attend all of the sessions that she was on shift for, the others feeling that they were either not needed, or it was more beneficial for them to use their time to see patients that required complex handling as part of their rehabilitation. Staff highlighted that they 'do not want [it] to be assumed that I do not feel that it is important- it is just as important!'

### Patient Engagement

Measuring patient engagement through self report forms was unsuccessful due to the patients' low cognition. Also attempted was a visual analogue scale, however this too was unsuccessful.

The final method chosen noted patient status at five minute intervals throughout the session (example shown in figure 4). Patient statuses included **active engagement** (patient actively dancing), **passive engagement** (eye contact, focused on artist or other person) and **disaffection** (disengaged, detached from the situation, refusal to participate or asleep). The number of patients in each category were recorded at five minute intervals by one of the dance science researchers.

Time (mins)	Number of patients		
	Active-engaged	Passive-engaged	Disaffected
0	10	0	0
5	10	0	0
10	8	0	2
15	5	5	0
20	4	6	0
25	4	5	1
30	6	3	0
35	3	1	7
40	6	5	0

Figure 5: Table showing patient status at 5 minute intervals of the Vital Dance group session in week 1

Graphs below (figures 6-8) show average percentages of patients in each engagement category for each of the group sessions from weeks 2-6.

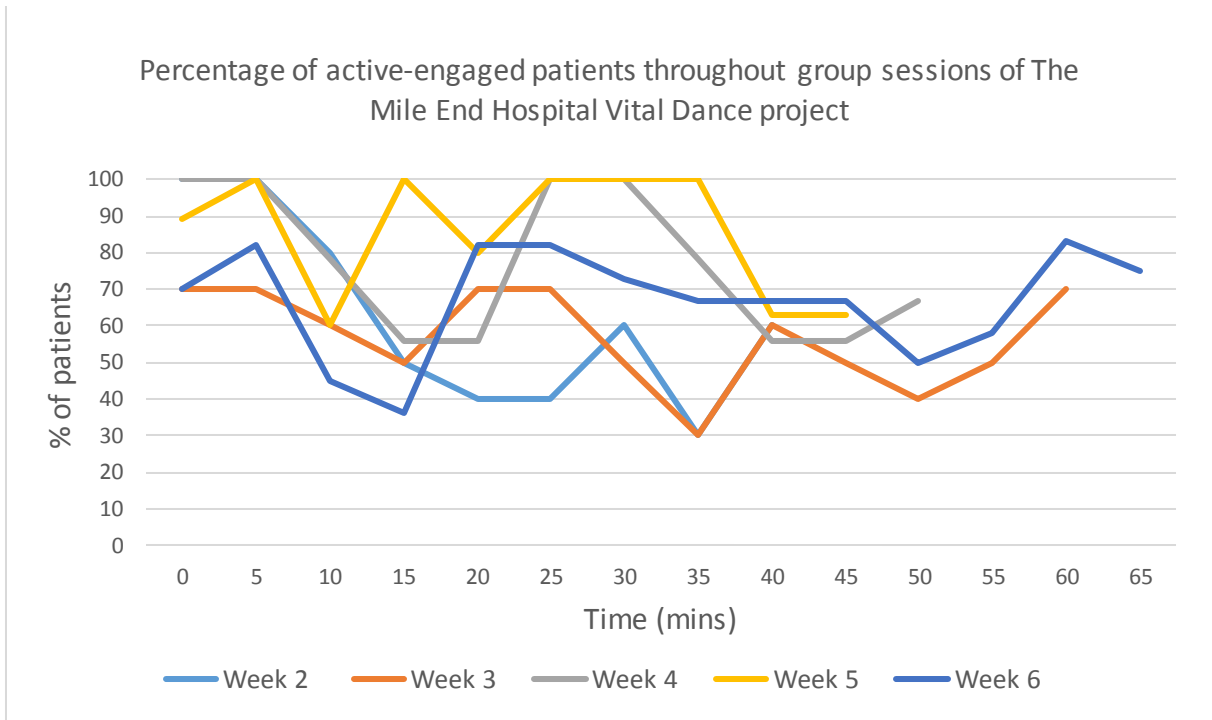


Figure 6: Percentage of active-engaged patients during each group session in the Mile End Hospital Vital Dance Project

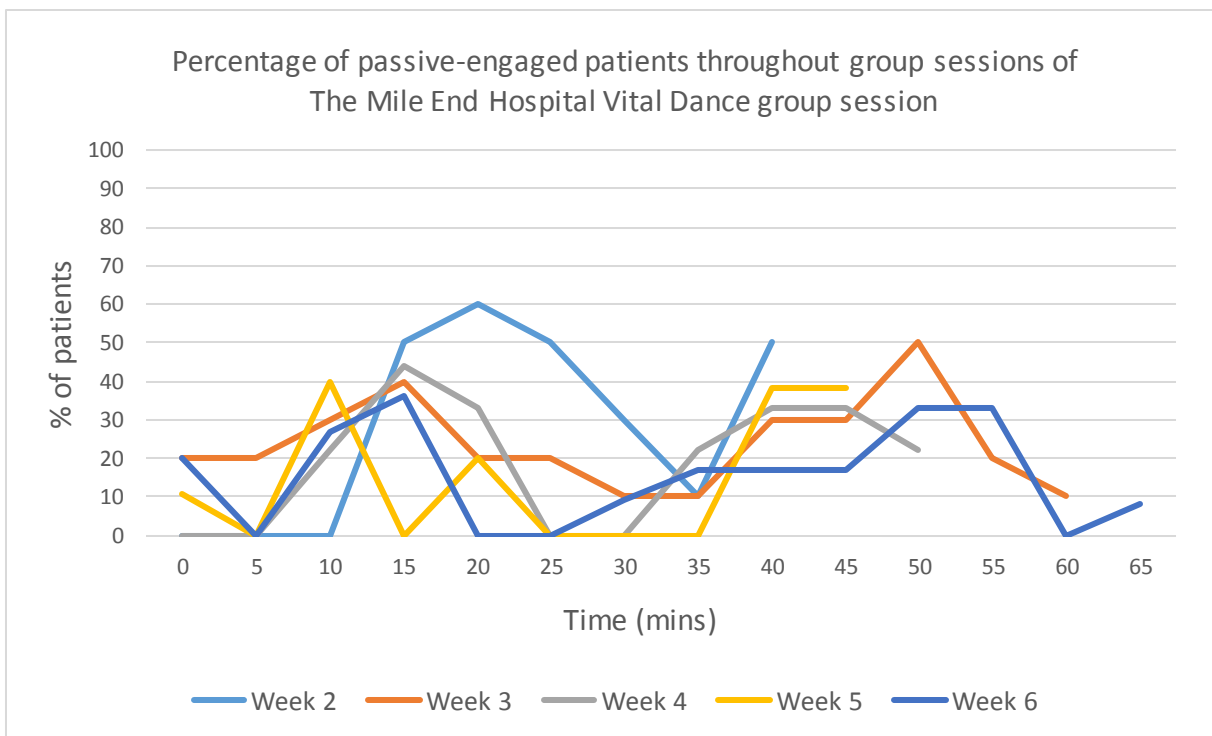


Figure 7: Percentage of passive-engaged patients during each group session in the Mile End Hospital Vital Dance Project

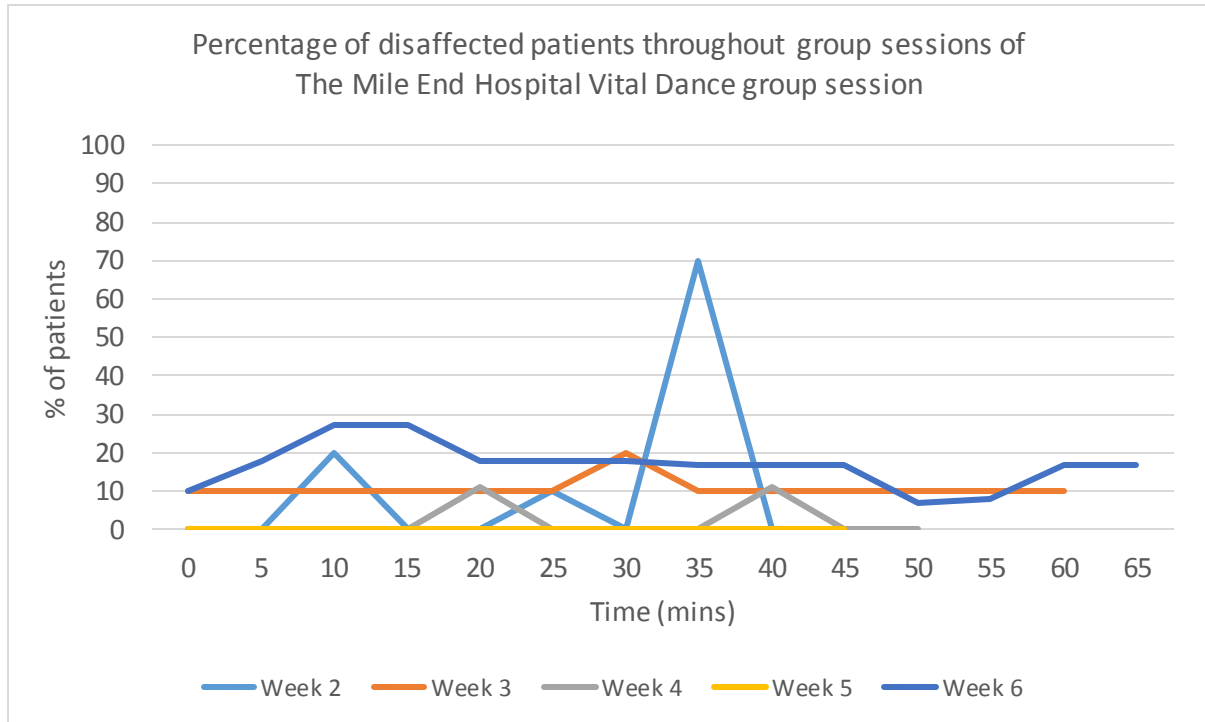


Figure 8: : Percentage of disaffected patients during each group session in the Mile End Hospital Vital Dance Project

Figure eight shows the patient distribution in each level of engagement throughout the whole project. This shows that >55% of the patients were engaged at any one time throughout the project. It also shows that whilst some patients (19%, SD=12%) displayed passive-engagement, very few (9%, SD=5%) were disaffected during the sessions. Although there is no data to draw comparison to other classes attended by the patients, these levels of engagement suggest that the dance sessions are successful in stimulating attention, socialisation and/or physical mobility for the patients.

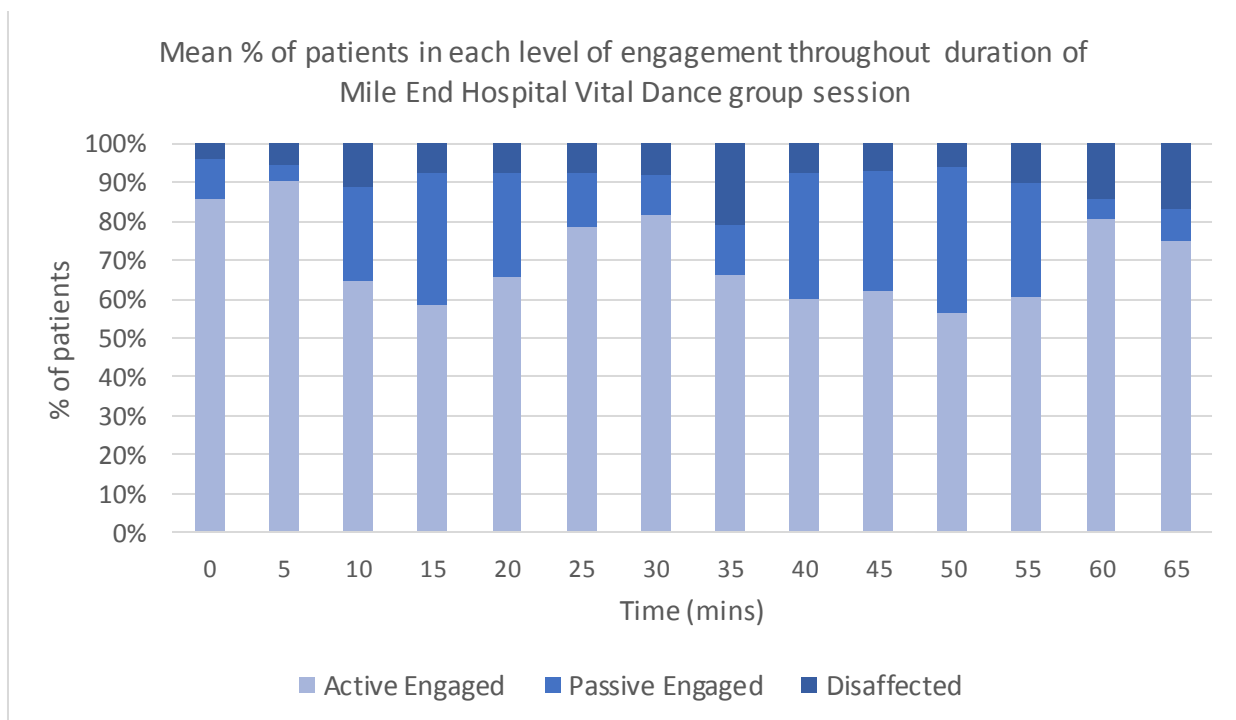


Figure 9: Mean % of patients in each level of engagement during the Mile End Vital Dance Project

## LIMITATIONS

The primary aim of Vital Dance at Mile End was to provide enjoyable dance and movement classes to support patients' rehabilitative targets, therefore the evaluation element held less precedence. Consequently, there limitations to this report;

- No inclusion or exclusion criteria were specified,
- There was no control group,
- The dance class material and structure changed throughout the project,
- The outcome measures are subjective,
- Assessors were actively involved in the classes,
- Participant attendance fluctuated due to admissions/discharge from hospital/appointments,
- Participant age, gender and medical conditions were not disclosed,
- No physical or psychological outcome measures were used due to the cognitive and physical abilities of the population.

## CONCLUSION: THE FUTURE FOR VITAL DANCE

The Mile End Hospital Vital Dance project was a pilot project to evaluate the effectiveness of creative dance sessions in promoting well-being and adding value to the rehabilitation goals in an older adult population. Despite the limitations mentioned above, staff suggested that there had been positive impacts on the patients both during and after the dance sessions.

When completing an evaluation form, staff strongly agreed that the Vital Dance sessions had improved patients' current mental wellbeing state during the classes. Furthermore, all staff felt that these effects lasted beyond the session (one OT felt it lasted 4-5 hours, whereas one physiotherapist believed it lasted for 'a day or two' following the session). Staff also agreed that the Vital Dance sessions supported their work as OT's and physiotherapists, that the additional movement sessions better prepares the patients for discharge from the hospital, and overall that the Vital Dance session aids the patient's relaxation and positively impacts their treatment.

Patient engagement levels were high throughout the project, with over 50% of the group being actively engaged during each group session. No data is available to draw comparison to other available classes, however the results show that the patients were actively involved in the Vital Dance sessions.

Updates include:

Vital Dance project managers will use the findings of this evaluation to introduce an updated model to all 12 of Barts Health NHS Trust's older adult wards. Intending to work closely with Trinity Laban Conservatoire of Dance Music and Science's Dance Science department, the following updates will aim to be achieved;

- To evaluate patient engagement in the projects through psychological reported/self reported feedback and/or physical outcomes
- To measure functional fitness using standardised outcome measures commonly used in other studies of older adults to facilitate meta-analysis.

- To use generation-appropriate music to stimulate engagement in disaffected patients.
- To use growing dance science research on fall prevention in older adults to inform the dance movement vocabulary with this population.
- To measure the specific activities that increase active engagement in order to maximize the potential impact of the classes (e.g. did clapping of hands and stamping feet engage more or less patients than the creative tasks).
- To measure adherence and reasons for dropout (discharge from hospital/decline in condition/relocation to alternate ward).

The collaboration between Trinity Laban Conservatoire of Music and Dance and Vital Arts expects to continue into 2016/17 with a yearlong residency within the Children's physiotherapy team at the Royal London Hospital, though this is dependent on securing funding.

### FURTHER RESOURCES

[www.communitydance.org.uk/dance-health-and-wellbeing](http://www.communitydance.org.uk/dance-health-and-wellbeing)

[www.iadms.org](http://www.iadms.org)

[www.nidms.co.uk](http://www.nidms.co.uk)

[www.trinitylaban.ac.uk](http://www.trinitylaban.ac.uk)

[www.trinitylaban.ac.uk/schools-and-community/projects/health-projects](http://www.trinitylaban.ac.uk/schools-and-community/projects/health-projects)

[www.trinitylaban.ac.uk/study/dance/dance-science/dance-science-research/health-screening-research](http://www.trinitylaban.ac.uk/study/dance/dance-science/dance-science-research/health-screening-research)

[www.vitalarts.org.uk](http://www.vitalarts.org.uk)