



Culture, Health & Wellbeing Alliance

Creative Health Quality Framework







The Creative Health Quality Framework outlines a set of principles which underpin good practice. It looks at how these principles might be adopted by everyone involved in Creative Health and explores how they might be applied to practice to support the best possible experience and health outcomes for participants.

Shaped through extensive collaboration with the Creative Health sector, the Quality Framework has been informed by people with direct experience of Creative Health practice and builds on existing work articulating what good looks like across the creative, cultural and health sectors.

The Quality Framework does not seek to test or rank Creative Health work. Rather, it aims to acknowledge and celebrate the work, supporting us all to work together to reflect, develop and improve what we do.

The process of developing the Quality Framework has been led by the Culture, Health & Wellbeing Alliance (CHWA), working with creative health consultant Jane Willis. Funded by Arts Council England, it has been supported and guided by the collaborative expertise and experience of the Quality Framework Steering Group and Reference Group, which include practitioners, researchers, health partners and funders - with a strong focus on lived experience. It has been tested and workshopped with over a hundred people working in Creative Health.

The Framework recognises that Creative Health is always part of a bigger picture. The long histories of participatory creative practice that underpin Creative Health are rooted in the idea of building a fairer society.

This work is more relevant than ever in the face of well-documented impacts of structural racism, ableism, sexism, homophobia, transphobia, ageism, economic inequality and geographic disparities on our health and wellbeing, on our climate, even on our abilities to access our own imagination and build a culture in which we can recognise ourselves. By emphasising a person-centred, equitable approach to practice, the Quality Framework is intended to support work that reveals and challenges inequities and supports positive action.

Whether we are delivering, commissioning, participating in, funding, or building policy to support Creative Health, we are part of a long history of positive change and a collective effort to build a fairer and more equitable society. This wider sense of shared responsibility is ultimately what makes this work both sustainable and joyful.

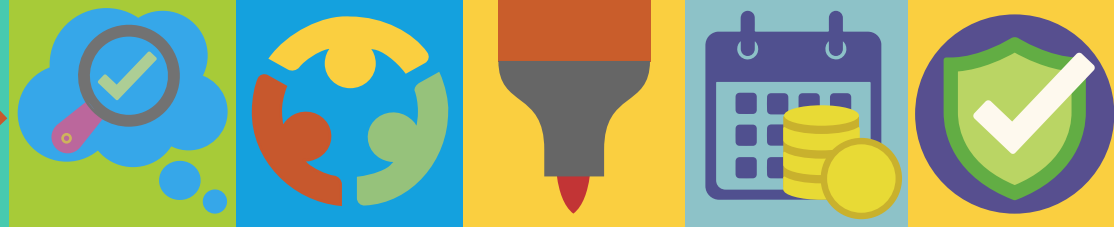
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1 Introduction



The Need for a Creative Health Quality Framework

The Creative Health Quality Framework aims to support the best possible experience and outcomes for everyone involved in Creative Health work by:

- Advocating for Creative Health practice
- Supporting practice development
- Fostering collaboration and partnership
- Enabling the best use of resources
- Improving working conditions
- Informing funding criteria and decisions
- Supporting reflection, learning and development
- Guiding research and evaluation

The Creative Health Quality Framework recognises that every project is unique, encompassing great breadth and variety in terms of the aims, context, and scale of programmes, as well as the skills, experience and resources available. This diversity brings great richness and is to be celebrated.

The Framework is aimed at everyone involved in Creative Health work, including:

- Freelance creative and cultural practitioners
- Creative and cultural organisations
- Health, social care, and community sector partners

- Policy makers, funders, and commissioners
- Educators and trainers, including in further and higher education – training both creative health practitioners and partners in health and social care.

Creative Health Quality Principles

The Framework outlines eight Creative Health Quality Principles which drive quality and good practice, leading to improvements in participant experience and outcomes. While always fundamental to quality and good practice, these Quality Principles will be applied in different ways according to the context, aims, scale and duration of a project or programme.

Quality as a Shared Responsibility

Quality is a shared responsibility. It takes a collective effort from all stakeholders to deliver quality and good practice.

Each of the eight Quality Principles therefore includes specific Stakeholder Recommendations for how it might be adopted and embodied by:

- Policy makers, Commissioners, and Funders
- Creative Health Organisations and Partners
- Creative Practitioners

1 Introduction



The Quality Cycle

Quality is also something that is shaped and developed as part of an ongoing process. This ongoing process of considering what good looks like at all stages of the work has been conceived as the Quality Cycle.

The Quality Cycle looks at how the eight Quality Principles might be applied to practice across five stages of the work:

- Developing the idea
- Building strong foundations
- Making detailed plans
- Delivering the work
- Learning from the work.

The Quality Cycle includes statements that describe what good looks like in relation to each Quality Principle at each stage of the work.

These statements are offered as prompts for consideration and discussion within the specific context of your work so that you can decide what is relevant and appropriate to your practice.

The Quality Framework

The Quality Principles, Quality Cycle, and statements describing what good looks like at each stage are brought together in the Quality Framework. This is a downloadable PDF providing detailed guidance on how to implement each Quality Principle across the process of developing and delivering Creative Health work.

The framework is not intended as a universal benchmark. Instead, it helps you consider how to apply the Quality Principles to your specific context. It allows you to assess your practice, see where you are, and consider where you might want to take small steps towards development.

Piloting and Review

The Creative Health Quality Framework is undergoing piloting and evaluation from 2023 to 2024, after which it will be reviewed and updated. Considering the ever-evolving sector and its needs, it is recommended that the Creative Health Quality Framework continues to be reviewed and updated every three years.

Links to Further Resources

This document sits alongside a wealth of other work in the field. Numerous materials are available to support the practical implementation of the framework, and we have provided relevant signposts to these where possible. We acknowledge that there will be additional resources we have missed and welcome feedback during the pilot phase to include them in the next iteration.

2 Creative Health Quality Principles



The Creative Health Quality Framework is built around eight Quality Principles which drive quality and good practice.

The Creative Health Quality Principles are:

Person-Centred: Value lived experience and enable potential.

Equitable: Work towards a more just and equitable society.

Safe: Do no harm, ensure safety, and manage risk.

Creative: Engage, inspire and ignite change.

Collaborative: Work with others to develop joined-up approaches.

Realistic: Be realistic about what you can achieve.

Reflective: Reflect, evaluate, and learn.

Sustainable: Work towards a positive, long-term legacy for people and planet.

The Creative Health Quality Principles are available to download as a poster that you can display in your studio or office or place of work as a visual reminder of the values that underpin this work.

PDF Download:
Creative Health Quality Principles Poster



3 A Shared Responsibility



Quality is a shared responsibility.

A shared concept of quality, underpinned by shared values and principles, enables those working within Creative Health to work together to plan, deliver, assess, and advocate for quality and good practice.

We have identified three main stakeholder groups who share the responsibility for quality:

Creative Practitioners

Those ‘in the room’¹ where the activity takes place, including creative practitioners, volunteers, support workers and participants. The skills, behaviours, and attributes of those in the space where the activity takes place shape the creative activity and influence the environment, atmosphere, and interactions that take place.

Creative Health Organisations and Partners

The work that takes place in the room is influenced by the way in which it is planned, resourced, and managed by those ‘outside the room’¹, including creative health managers, evaluators, co-ordinators, support staff and health, care, and community sector partners.

Policy Makers, Commissioners, and Funders

Those ‘furthest from the room’¹, including policy makers, commissioners, and funders, have significant influence over the quality and sustainability of the work.

When everyone works together to deliver quality:

- Policy makers, commissioners and funders work together to ensure joined-up approaches to realistic long-term investment in programmes and partnerships informed by wider health needs, priorities, and inequalities.
- Creative health organisations, and health, care and community partners collaborate to develop ideas, build strong foundations, make detailed plans, deliver, and learn from the work.
- Creative practitioners, volunteers, and support workers are skilled, experienced and receive appropriate support enabling them to collaborate effectively in delivering the work.

¹ This draws on Seidel, S., Tishman, S., Winner, E., Hetland, L. and Palmer, P. (2010). *The Qualities of Quality: Understanding Excellence in Arts Education*. Massachusetts: Harvard Graduate School of Education.

3 A Shared Responsibility



Collaboration and partnership development

The Quality Framework can be used to support collaboration and partnership development.

For example, the Quality Principles can be used to:

- Reassure partners that you are committed to recognised standards of practice
- Generate discussion and debate around what good looks like
- Develop a shared vision for the work
- Develop consensus and agreement
- Pool resources and identify shared expertise
- Advocate for your needs
- Keep you focused and on track as a team.

PDF Download: How to use the Quality Framework to help you collaborate



The Importance of Good Governance

A shared responsibility for quality is underpinned by good governance.

Governance means being clear and accountable for achieving goals safely. It ensures responsibility, accountability, transparency, and fairness. Good governance underpins effective, equitable, collaborative, realistic and sustainable organisations, working practices, and work.

Whether you're a freelance practitioner or running a large organisation, having proper governance structures in place around the work is crucial.

For Creative Health organisations this might mean establishing a clear mission, vision and aims which guide decision-making around processes, finance, and activity.

For freelance creative practitioners, this might involve having clear briefs and contracts, defined lines of accountability, supportive structures, and fair and timely payment.

For lived experience groups this might mean collectively taking responsibility for governance, co-producing activities, ensuring mutual respect.

4 Recommendations for Applying the Quality Principles



Specific recommendations around each of the Quality Principles have been developed for each of three stakeholder groups.

We have included headline recommendations below. To see the full recommendations for each group, please download these PDFs.

Recommendations for Policy Makers, Commissioners and Funders



Recommendations for Creative Health Organisations and Partners



Recommendations for Creative Practitioners





Person-Centred

Value lived experience and enable potential.

Recommendations for...

Policy makers, commissioners, and funders:

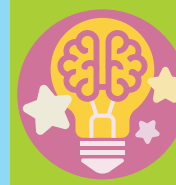
- Target investment and policy around work informed by lived experience.
- Involve people with relevant lived experience in the assessment of funding applications.
- Remove the pressure on individual projects to prove or measure outcomes.

Creative Health Organisations and Partners:

- Involve and support people with lived experience in the development and delivery of the work.
- Embed a trauma-informed approach.
- Consider what matters to participants when planning how to evaluate.

Creative Practitioners:

- Work with people with lived experience to co-create work that meets people's needs and preferences.



Equitable

Work towards a more just and equitable society.

Recommendations for...

Policy makers, commissioners, and funders:

- Codesign accessible and inclusive funding application processes.
- Target investment and policy towards work that responds to clearly identified needs informed by local health priorities, and inequalities.
- Ensure funding covers fair and equitable rates of pay, including access costs, honoraria and financial support in relation to lived experience.

Creative Health Organisations and Partners:

- Find out about local health needs, priorities, and inequalities and develop work in response to these needs.
- Ensure employment practices are equitable, inclusive, and accessible and that everyone involved in the work has a clear brief, contract, and fair and equitable rates of pay.
- Think about how to evaluate in a way that includes diverse voices and perspectives and benefits participants as well as stakeholders.

Creative Practitioners:

- Make sure the way you work is accessible, equitable and inclusive.
- Don't be afraid to challenge and question the terms for this work if they are not fair and equitable.



Safe

Do no harm, ensure safety, and manage risk.

Recommendations for...

Policy makers, commissioners, and funders:

- Encourage practice that supports the safety and wellbeing of practitioners, partners, and participants.
- Invest in practitioner support, supervision and training.

Creative Health Organisations and Partners:

- Risk assess practice, both formally and informally, at all stages of the work.
- Think about the impact that the work (including its evaluation) may have on those delivering it and ensure that policies, procedures, and practical support is in place to ensure safety.
- Support creative practitioners, volunteers, support workers and staff to be able to model and manage healthy boundaries.
- Consider any training needed to practice safely and well, including safeguarding, equality and diversity and mental health first aid.
- Identify appropriate budget to support the needs of creative practitioners, volunteers, and support workers.

Creative Practitioners:

- Ensure participants are safe.
- Keep yourself safe.



Creative

Engage, inspire, and ignite change.

Recommendations for...

Policy makers, commissioners, and funders:

- Invest in work that embraces creative challenge, risk, and failure.
- Acknowledge, value and fund research and development time for creative practitioners.

Creative Health Organisations and Partners:

- Co-produce the work with creative practitioners from the outset.
- Keep briefs open and flexible, ensuring there is space to experiment, iterate and adapt.
- Enable space to reflect on and learn from failure as well as success.

Creative Practitioners:

- Don't be afraid to push for work that is creatively and culturally ambitious, relevant, and meaningful.
- Make space to experiment and adapt, ensuring the work is responsive to people's needs.
- Consider how the work will help you learn and develop.



Collaborative

Work with others to develop joined-up approaches.

Recommendations for...

Policy makers, commissioners, and funders:

- Develop joined-up approaches to policy and funding, informed by wider health needs, priorities, and inequalities.
- Foster trust and collaboration with creative partners.
- Encourage creative partners to budget time and resources for partnership development.

Creative Health Organisations and Partners:

- Invest time in building strong, sustainable partnerships.
- Develop shared solutions to identified needs by pooling resources, sharing expertise, and working together across sectors.
- Budget time and resources for this process.

Creative Practitioners:

- Develop ideas in collaboration with others.
- Draw on shared skills and expertise.
- Look for shared opportunities to reflect and learn.



Realistic

Be realistic about what you can achieve.

Recommendations for...

Policy makers, commissioners, and funders:

- Be realistic about what can be achieved for any given investment.
- Make application processes appropriate to the scale of the funding.

Creative Health Organisations and Partners:

- Allow sufficient time for the work at all stages – ideas development and testing, partnership building, participant recruitment, and evaluation.
- Be realistic about what you can achieve in relation to the time and resources available.
- Be prepared to do better by doing less.

Creative Practitioners:

- Make sure your plans are realistic and appropriate to the budget, time and resources available.
- Make sure that the timescales for the work are realistic and achievable.



Reflective

Reflect, evaluate, and learn.

Recommendations for...

Policy makers, commissioners, and funders:

- Ensure budgets include adequate resources for evaluation.
- Amplify and share practice-based learning.
- Remove the pressure on individual projects to prove or measure outcomes.
- Promote collaboration between practice and research.

Creative Health Organisations and Partners:

- Don't wait until the end. Plan and budget for evaluation at the same time as developing and planning the work.
- Use evidence and learning from previous evaluations to inform the development of new work.
- Create opportunities for creative practitioners to have a voice in the evaluation.
- Don't underestimate the time and resources needed for evaluation. Budget accordingly. Be realistic. It is better to do less and do it well.

Creative Practitioners:

- Take a reflective approach to learning.
- Find out whether the work will be evaluated and what is expected of you in this.
- Consider the impact of the evaluation on participants' experience of the work.



Sustainable

Work to develop a positive long-term legacy for people and planet.

Recommendations for...

Policy makers, commissioners, and funders:

- Prioritise investment in long-term programmes, partnerships, and practices that deliver sustainable social and environmental impacts.
- Invest in the sustainability of this work by supporting the professional development of creative practitioners.
- Recognise and fund time and resources for research, planning, relationship building, project management, evaluation, and practitioner support.
- Identify opportunities for longitudinal evaluation that tracks impact beyond the end of the project.

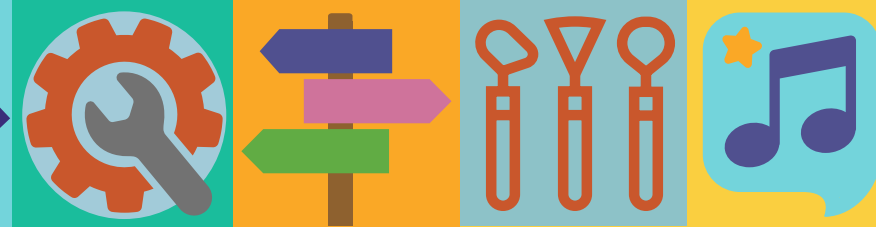
Creative Health Organisations and Partners:

- Develop partnerships that will support the delivery of sustainable social and environmental impacts.
- Make sure that the resources needed for the sustainable, long-term running of the organisation are built into project funding bids.

Creative Practitioners:

- Consider environmental sustainability.
- Consider how the work might contribute to longer-term social impacts.
- Consider how this work will support the long-term sustainability of your practice.

5 The Quality Cycle



The Quality Cycle shows the way in which all stakeholders need to work together to deliver the Creative Health Quality Principles in a continuous process of learning and development across the five stages of the work:

Developing your idea:

Developing the concept, proposal, aims and approach for the work.

Building strong foundations:

Developing policies, processes, structures, briefs, and contracts for the work.

Making detailed plans:

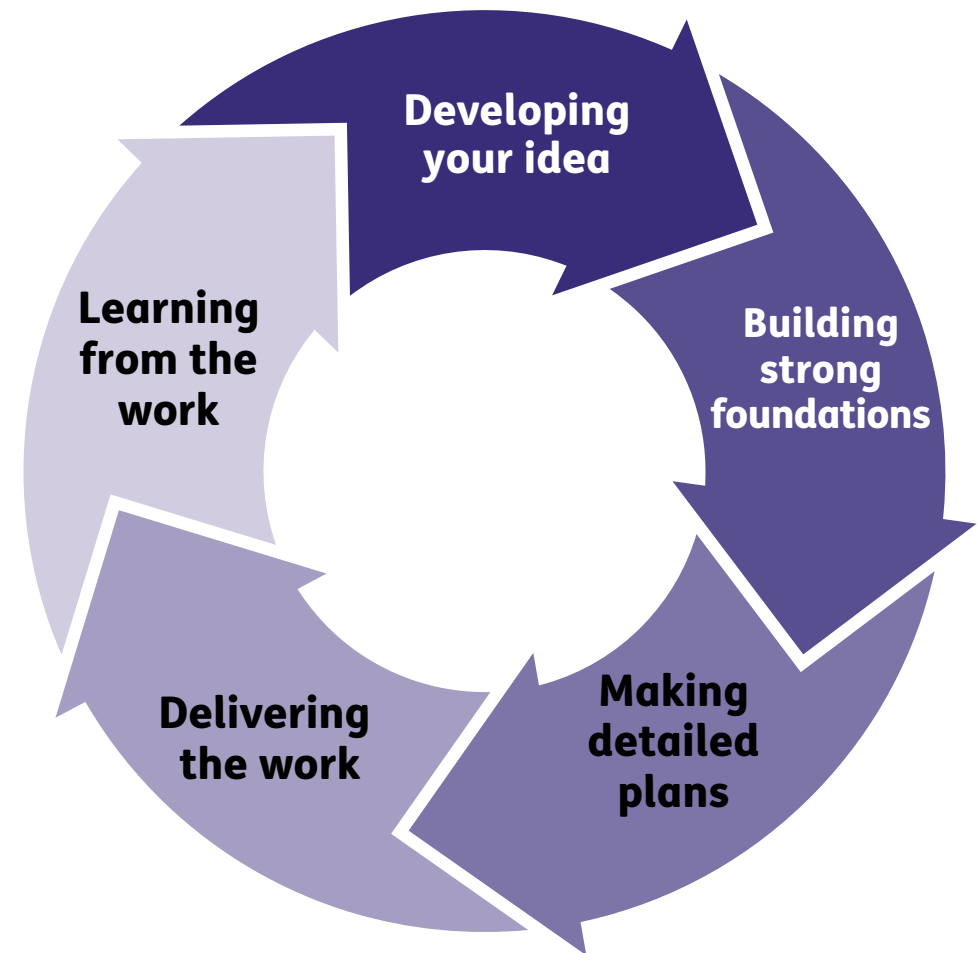
Developing detailed work plans, programmes, and budgets.

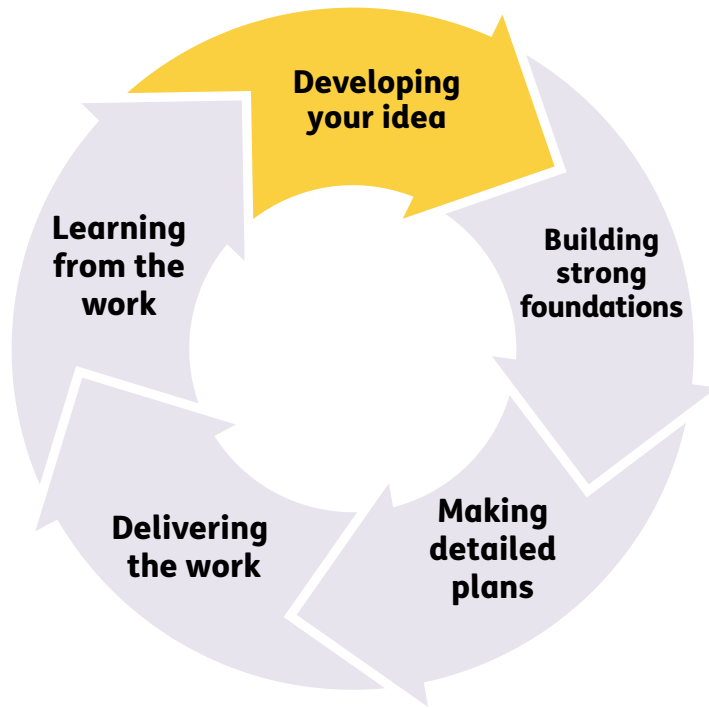
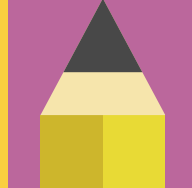
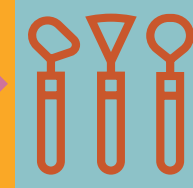
Delivering the work:

Devising and delivering creative groups, workshops, and activities.

Learning from the work

Reflecting, evaluating, and learning from the work.





Developing your idea

Ensure that the concept, proposal, aims and approach for the work are:

Person-Centred:

- The idea for the work responds to people's needs and has been led, co-produced, or informed by lived experience.
- The idea for the work responds to the needs of the whole person, not just the illness or symptom.
- Aims and outcomes are identified that matter to people.

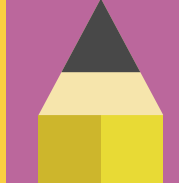
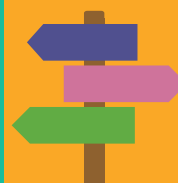
Equitable:

- The idea for the work responds to a clearly identified need informed by local health priorities, and inequalities.
- The project team commits to supporting equity, social justice, and climate justice.
- A culturally appropriate and inclusive approach to developing the work is embedded from the start.

Safe:

- The work is designed to minimise harm and ensure physical, emotional, and social safety.
- Processes for managing risk and ensuring safety are identified from the start and considered on an ongoing basis.
- Budget and resources are in place to support the safety and wellbeing of volunteers, creative practitioners and staff.

5 The Quality Cycle



Creative:

- The transformative potential of creativity and the capacity of creative practitioners to facilitate this is acknowledged and embedded in the work.
- There is space to be responsive to people's needs and for the role of not-knowing within the creative process.
- Creative challenge, risk and failure is encouraged and supported.

Collaborative:

- Solutions to identified needs have been developed through collaboration.
- Ideas draw on shared expertise from across the creative, health, community, and research sectors.
- The approach to collaboration is appropriate to the context, scale and aims of the project. This might involve consultation, engagement, partnership, or co-creation, for example.

Realistic:

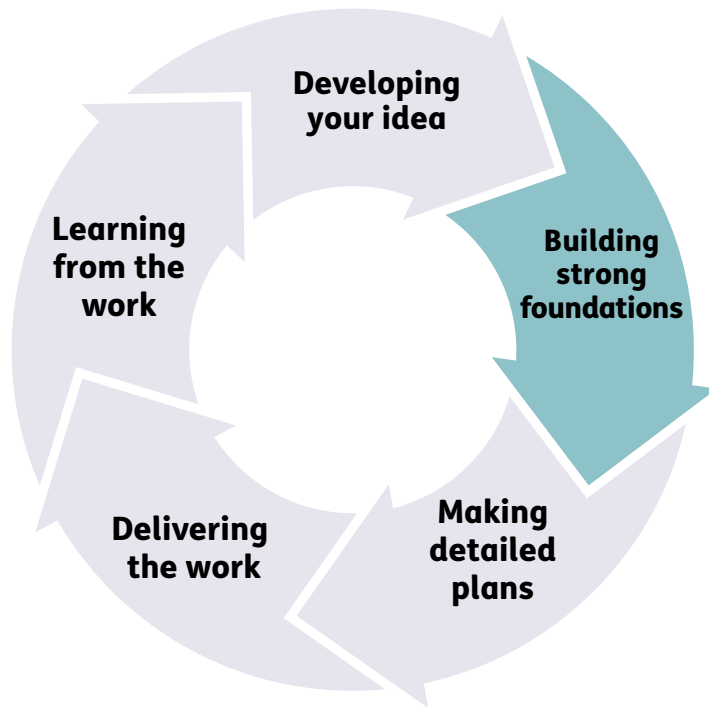
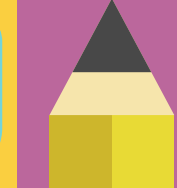
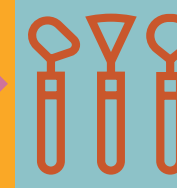
- Enough time has been allowed to develop and test the idea.
- The aims are achievable in relation to the scale and scope of the work.
- The scale and scope of the work is realistic given the funding and resources available.

Reflective:

- The idea has been informed by evidence and learning from previous work (your own and others').
- Resources for evaluation, reflection and learning are identified from the outset.
- Clarity is established from the start about why you are evaluating and what you want to find out.

Sustainable:

- The work is part of a longer-term vision.
- The work is underpinned by a desire to achieve beneficial and sustainable social and environmental impacts.
- All parties – participants, creative practitioners, partners, and other stakeholders – are involved in deciding what a meaningful, long-term legacy will look like.



Building strong foundations

Develop policies, processes, structures, briefs, and contracts for the work that are:

Person-Centred:

- Structures and processes are in place to enable the ongoing involvement of people with lived experience.
- The work is informed by an understanding of the ways in which trauma might affect participants and facilitators.

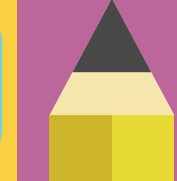
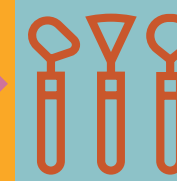
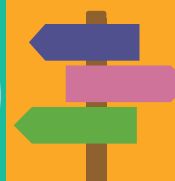
Equitable:

- Employment and volunteering policies and practices are equitable, inclusive, and accessible.
- Equitable working practices consider caring responsibilities including child-care needs.
- Creative practitioners are paid fair and equitable hourly / day rates in line with those recommended by artists unions and support organisations.
- Creative practitioners and volunteers have clear briefs and contracts.

Safe:

- Appropriate safeguarding, risk assessments, and insurances are in place.
- Appropriate policies and procedures are in place to support the safety and wellbeing of participants, volunteers, creative practitioners and staff.
- Appropriate support is in place for volunteers, creative practitioners and staff which might include briefing and debriefing, training, mentoring, supported reflective practice, peer support, and clinical supervision.

5 The Quality Cycle



Creative:

- Creative practitioners are suitably skilled and experienced.
- The creative experience is exciting, inspiring, and engaging, as well as purposeful, meaningful and relevant.
- Good governance is in place to ensure that creative risk can be taken without causing harm.

Collaborative:

- There is agreement around a shared vision, aims and outcomes.
- The vision for the work has been informed by wider, relevant health and social care policies and agendas.
- Sufficient time and resources are in place for collaboration and partnership development.

Realistic:

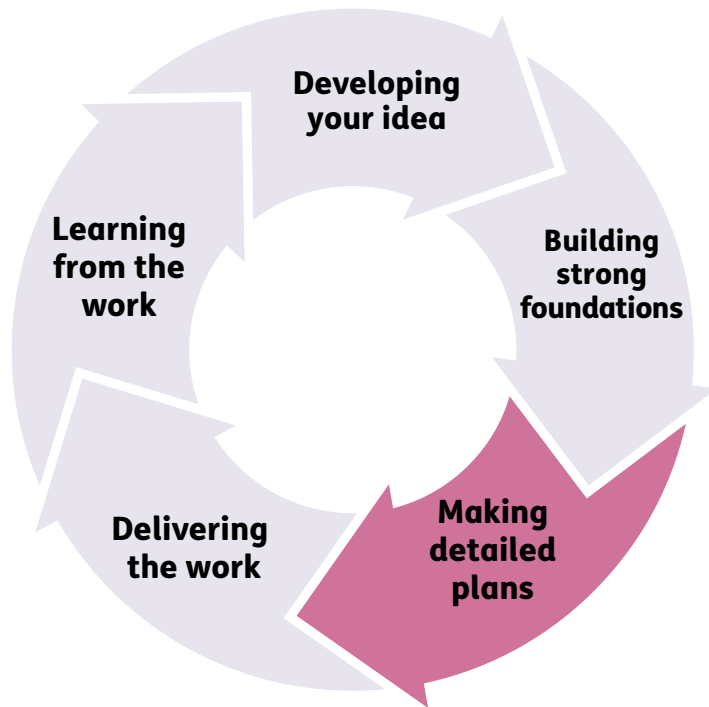
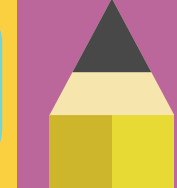
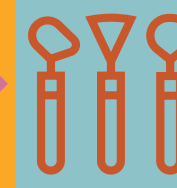
- The programme and timescales are realistic and achievable.
- The budget covers all costs including research and planning, relationship-building, training, travel, marketing, access, translation, evaluation, wellbeing support and contingency.
- Volunteer, freelance, staff and partner responsibilities are appropriate to the time and resources available.

Reflective:

- Time for reflection and evaluation is embedded into the process of developing the work.
- The evaluation plan identifies roles, responsibilities, and resources for all aspects of evaluation, including record-keeping, data-collection, analysis, reporting and dissemination.
- Ethical guidelines including consent, confidentiality and anonymity are adhered to as part of the evaluation.

Sustainable:

- Policies and processes are in place to support environmentally sustainable practices.
- Resources are in place to support the long-term running of the organisation as well as the cost of delivering the work.
- Partnership working supports the delivery of sustainable impacts.



Making detailed plans

Develop detailed work plans, programmes, and budgets that are:

Person-Centred:

- People with lived experience have been involved in planning the work.
- Participants are given control, choice and agency.

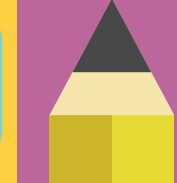
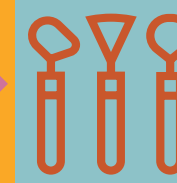
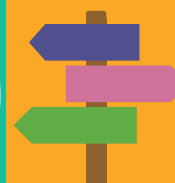
Equitable:

- Diverse voices and perspectives, including those of creative practitioners, have been involved in planning the work.
- The project team is informed and appropriately skilled and experienced in relation to equality, diversity, and inclusion, including cultural appropriateness, anti-racism, and anti-ableism.
- Barriers to access and engagement have been considered and addressed.
- Contracts are fair and equitable, including recognition and payment for all time spent on a project.

Safe:

- Risk assessments are carried out for all planned activity to determine whether the environment, activities and materials are safe.
- The size of the group is appropriate to the skills and experience of the creative practitioner and any support workers.
- There are people on hand who are trained and responsible for Health and Safety, First Aid and Mental Health First Aid.

5 The Quality Cycle



Creative:

- Creative practitioners are recognised and valued for their full range of skills, which might include curating, producing, problem-solving, reflection and evaluation, as well as facilitating creative activities.
- The planning process honours creative thinking as an open-ended process.
- There is space to experiment and adapt.

Collaborative:

- There is buy-in and trust from all parties.
- There is open and honest communication between all parties.
- Democratic decision-making is in place, which acknowledges unequal power dynamics.

Realistic:

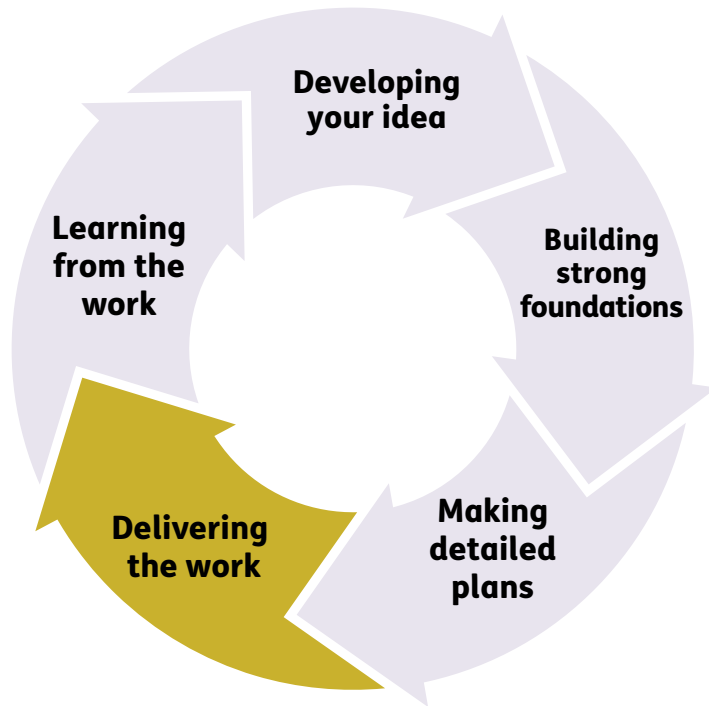
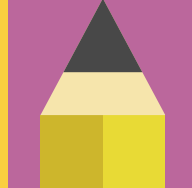
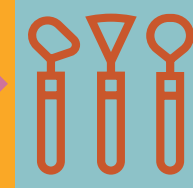
- Sufficient time has been allowed for planning and preparation, including the recruitment of creative practitioners and participants.
- Resources, including for example staff time, materials, equipment, and refreshments, are appropriate to the project and size of group.
- Opportunities to improve the work by doing less are regularly reviewed.

Reflective:

- There are opportunities for reflection and learning throughout the delivery process, as well as at the end of the work.
- The evaluation benefits all parties directly, including participants.
- The evaluation includes reflection, understanding and learning as well as monitoring and assessment.

Sustainable:

- Progression routes and follow-on activities are identified to support participants' continued creative engagement.
- Endings are planned to help participants transition to a range of activities or support.
- All parties, including participants, are involved in deciding what happens next.



Delivering the work

Devise and deliver creative groups, workshops and activities that are:

Person-Centred:

- The work is responsive to people's needs and preferences.
- The work enables people to choose whether to engage, how to engage and what to do.
- Creative practitioners are able to adapt and tailor the work to people's preferences, strengths, and abilities.

Equitable:

- The work is creatively and culturally ambitious, relevant, and meaningful.
- The work allows space for critique and challenge.
- Appropriate physical, emotional, and practical support is available for participants, creative practitioners, and support staff.
- Payment of freelance practitioners is timely and prompt.

Safe:

- Volunteers, creative practitioners, and staff are clear about who to turn to in case of need.
- Lone working is minimised or avoided by involving volunteers, support workers, or health professionals where appropriate.
- Creative practitioners are clear about the intent and remit of the activity and are able to work safely within these boundaries.

5 The Quality Cycle



Creative:

- The work inspires creativity.
- The approach to creative facilitation is engaging and accessible.
- Activities include creative stimulation and challenge.

Collaborative:

- Diverse skills, experience and resources are equally valued.
- Resources are pooled to ensure the creative experience is inspiring and transformational.
- All parties come together at key intervals to review progress.

Realistic:

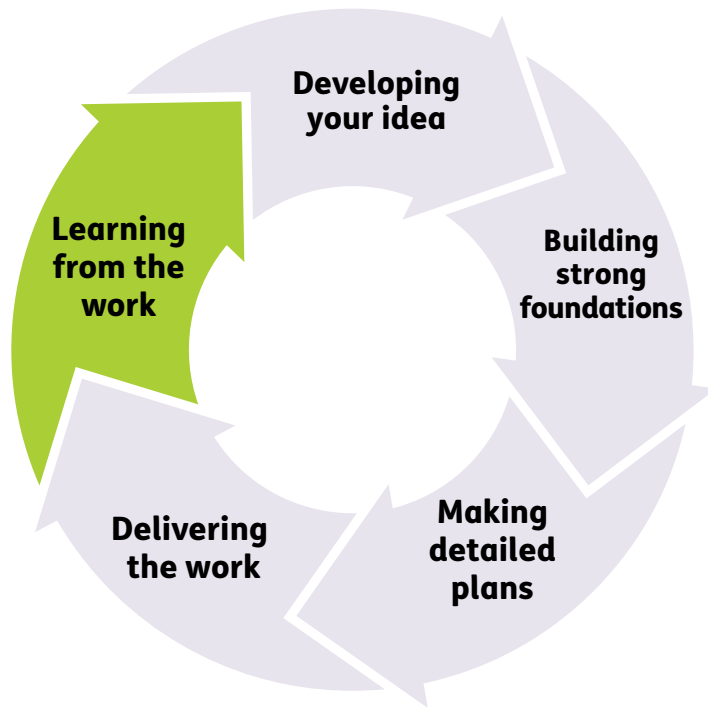
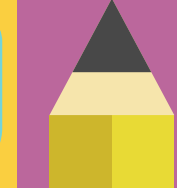
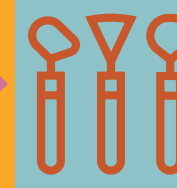
- There is clarity around what the work can and cannot offer.
- Sufficient time is allowed for trust and relationships to develop.
- Sufficient time and resource is allowed for endings.

Reflective:

- Appropriate and creative approaches to reflection and evaluation are used to support engagement, insight, and learning.
- Regular team meetings and debriefs are used to reflect on and share learning.
- Creative practitioners are supported to reflect and learn from their experience and have a voice in the evaluation.

Sustainable:

- Working practices are realistic and sustainable for the project, the practice, and the planet.
- The work is emotionally and professionally sustaining for creative practitioners.
- Creative practitioners develop skills and experience that enables them to sustain a living.



Learning from the work

Reflect, evaluate and learn from the work in ways that are:

Person-Centred:

- The evaluation reflects what matters to people, especially participants.
- The evaluation seeks to understand people's experience as well as, or instead of, measuring outcomes.
- Improved understanding of people's experience informs the development of future work.

Equitable:

- A range of perspectives have been considered in shaping the evaluation aims.
- Diverse voices and perspectives are included in the evaluation, including creative practitioners and volunteers.
- Care is taken to ensure that the process of evaluation doesn't diminish or disrupt participants' experience.
- The evaluation is reciprocal, benefitting participants as well as stakeholders.

Safe:

- The evaluation process ensures the safety, dignity and privacy of participants.
- Participants rights to confidentiality and anonymity are upheld as part of the evaluation process.
- A continual approach to learning is taken to ensure safety and avoid risk.

5 The Quality Cycle



Creative:

- Opportunities for reflection are embedded into the project.
- There is space to reflect on and learn from failure as well as success.
- Consideration is given to using creative evaluation tools.

Collaborative:

- The evaluation is co-produced with partners and participants.
- All parties reflect openly and honestly on the process of working together.
- All parties come together to review learning and consider how to take the work forward.

Realistic:

- Sufficient time is allowed for reflection, evaluation and learning.
- The approach taken to evaluation is proportionate and appropriate to the scale of the project.
- The approach taken to evaluation is appropriate to the time and resources available.

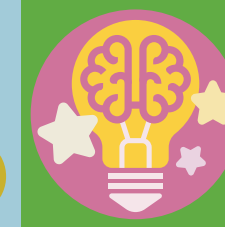
Reflective:

- Opportunities are identified to share learning.
- Learning is shared openly and transparently.
- Learning informs the development of future work.

Sustainable:

- Unintended impacts or outcomes are identified and acknowledged.
- Where possible, impact and outcomes are tracked beyond the end of the project.
- Learning informs practices that create better futures for people and the planet.

6 The Quality Framework Spreadsheet



The Quality Principles, Quality Cycle, and detailed statements describing what ‘good’ looks like at each stage of the work are brought together in the Quality Framework Spreadsheet.

The Quality Framework Spreadsheet brings together the Quality Principles and Quality Cycle. This is the same information we’ve given above, laid out so that you can read across and down and see how you might apply the Principles at each stage of the Cycle.


You can download the spreadsheet as a separate PDF, or read it below.

The Quality Framework Spreadsheet

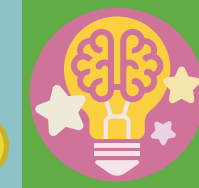



The Quality Framework Spreadsheet



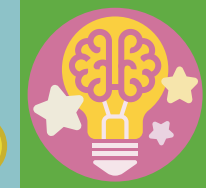
	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
Person-centred: Value lived experience, and enable potential. 	The idea for the work responds to people's needs and has been led, co-produced, or informed by lived experience.	Structures and processes are in place to enable the ongoing involvement of people with lived experience.	People with lived experience have been involved in planning the work. <u>See Links PDF</u>	The work is responsive to people's needs and preferences.	The evaluation reflects what matters to people, especially participants.
	The idea for the work responds to the needs of the whole person, not just the illness or symptom.	The work is informed by an understanding of the ways in which trauma might affect both participants and facilitators.	Participants are given control, choice and agency.	The work enables people to choose whether to engage, how to engage and what to do.	The evaluation seeks to understand people's experience as well as, or instead of, measuring outcomes.
	Aims and outcomes are identified that matter to people.	-	-	Creative practitioners are able to adapt and tailor the work to people's preferences, strengths, and abilities.	Improved understanding of people's experience of taking part informs the development of future work.


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
Equitable: Work towards a more just and equitable society. 	The idea for the work responds to a clearly identified need.	Employment and volunteering policies and practices are equitable, inclusive and accessible. <u>See Links PDF</u>	Diverse voices and perspectives, including those of creative practitioners, have been involved in planning the work.	The work is creatively and culturally ambitious, relevant, and meaningful.	A range of perspectives have been considered in shaping the evaluation aims. <u>See Links PDF</u>
	The idea for the work is informed by local health needs, priorities, and inequalities. <u>See Links PDF</u>	Equitable working practices consider caring responsibilities including child-care needs.	The project team is informed and appropriately skilled and experienced in relation to equality, diversity, and inclusion, including cultural appropriateness, anti-racism, and anti-ableism. <u>See Links PDF</u>	The work allows space for critique and challenge.	Diverse voices and perspectives are included in the evaluation, including creative practitioners and volunteers.
	The project team commits to support equity, social justice, and climate justice. <u>See Links PDF</u>	Creative practitioners are paid fair and equitable hourly / day rates in line with those recommended by artists unions and support organisations. <u>See Links PDF</u>	Barriers to access and engagement have been considered and addressed. <u>See Links PDF</u>	Appropriate physical, emotional, and practical support is available for participants, creative practitioners, and support staff. <u>See Links PDF</u>	Care is taken to ensure that the process of evaluation doesn't diminish or disrupt participants' experience. <u>See Links PDF</u>
	A culturally appropriate and inclusive approach to developing the work is embedded from the start. <u>See Links PDF</u>	Creative practitioners and volunteers have clear briefs and contracts. <u>See Links PDF</u>	Contracts are fair and equitable, including recognition and payment for all time spent on a project.	Payment of freelance practitioners is timely and prompt.	The evaluation is reciprocal, benefitting participants as well as stakeholders.


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
<p>Safe: Do no harm, ensure safety, and manage risk.</p> 	<p>A trauma-informed approach ensures the work is designed to minimise harm and ensure physical, emotional, and social safety. See Links PDF</p>	<p>Appropriate policies and procedures are in place to support the safety and wellbeing of participants, volunteers, creative practitioners, and staff.</p>	<p>Safeguarding measures, risk assessments, and appropriate insurances are in place. See Links PDF</p>	<p>Volunteers, creative practitioners, and staff are clear about who to turn to in case of need.</p>	<p>The evaluation process ensures the safety, dignity and privacy of participants.</p>
	<p>Processes for managing risk and ensuring safety are identified from the start and considered on an ongoing basis.</p>	<p>Appropriate support is in place for volunteers, creative practitioners and staff which might include briefing and debriefing, training, mentoring, supported reflective practice, peer support, and clinical supervision.</p>	<p>Risk assessments are carried out for all planned activity to determine whether the environment, activities, materials and group size are safe.</p>	<p>Lone working is minimised or avoided by involving volunteers, support workers, or health professionals in the work where appropriate.</p>	<p>Participants rights to confidentiality and anonymity are upheld as part of the evaluation process.</p>
	<p>Budget and resources are in place to support the safety and wellbeing of volunteers, creative practitioners and staff.</p>	<p>Creative practitioners, volunteers, support workers and staff understand and are able to model and manage healthy boundaries.</p>	<p>There are people on hand who are trained and responsible for Health and Safety, First Aid and Mental Health First Aid.</p>	<p>Creative practitioners are clear about the intent and remit of the activity and are able to work safely within these boundaries. See Links PDF</p>	<p>A continual approach to learning is taken to ensure safety and avoid risk.</p>


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
<p>Creative: Engage, inspire, and ignite change.</p> 	<p>The transformative potential of creativity and the capacity of creative practitioners to facilitate this is acknowledged and embedded in the work.</p>	<p>Creative practitioners are suitably skilled and experienced.</p>	<p>Creative practitioners are recognised and valued for their full range of skills, which might include curating, producing, problem-solving, reflection and evaluation, as well as facilitating creative activities.</p>	<p>The work inspires creativity.</p>	<p>Opportunities for reflection are embedded into the project.</p>
	<p>There is space to be responsive to people's needs and for the role of not-knowing within the creative process.</p>	<p>The creative experience is exciting, inspiring, and engaging, as well as purposeful, meaningful and relevant.</p>	<p>The planning process honours creative thinking as an open-ended process.</p>	<p>The approach to creative facilitation is engaging and accessible.</p>	<p>There is space to reflect on and learn from failure as well as success.</p>
	<p>Creative challenge, risk and failure is encouraged and supported.</p>	<p>Good governance is in place to ensure that creative risk can be taken without causing harm.</p>	<p>There is space to experiment and adapt.</p>	<p>Activities include creative stimulation and challenge.</p>	<p>Consideration is given to using creative evaluation tools.</p>


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
Collaborative: Work with others to develop joined-up approaches. 	Solutions to identified needs have been developed through collaboration.	There is agreement around a shared vision, aims and outcomes.	There is buy-in and trust from all parties.	Diverse skills, experience and resources are equally valued.	The evaluation is co-produced with partners and participants.
	Ideas draw on shared expertise from across the creative, health, community, and research sectors.	The vision for the work has been informed by wider, relevant health and social care policies and agendas.	There is open and honest communication between all parties.	Resources are pooled to ensure the creative experience is inspiring and transformational.	All parties reflect openly and honestly on the process of working together.
	The approach to collaboration is appropriate to the context, scale and aims of the project. This might involve consultation, engagement, partnership, or co-creation, for example.	Sufficient time and resources are in place for collaboration and partnership development.	Democratic decision-making is in place, which acknowledges unequal power dynamics.	All parties come together at key intervals to review progress.	All parties come together to review learning and consider how to take the work forward.


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
<p>Realistic: Be realistic about what you can achieve.</p> 	Enough time has been allowed to develop and test the idea.	The programme and timescales are realistic and achievable.	Sufficient time has been allowed for planning and preparation, including the recruitment of creative practitioners and participants.	There is clarity around what the work can and cannot offer.	Sufficient time is allowed for reflection, evaluation and learning.
	The aims are achievable in relation to the scale and scope of the work.	The budget covers all costs including research and planning, relationship-building, training, travel, marketing, access, translation, evaluation, wellbeing support and contingency.	Resources, including for example staff time, materials, equipment, and refreshments, are appropriate to the project and size of group.	Sufficient time is allowed for trust and relationships to develop.	The approach taken to evaluation is proportionate and appropriate to the scale of the project.
	The scale and scope of the work is realistic given the funding and resources available.	Volunteer, freelance, staff and partner responsibilities are appropriate to the time and resources available.	If necessary, do less and do it well rather than try to do everything with insufficient resources.	Sufficient time and resource is allowed for endings.	The approach taken to evaluation is appropriate to the time and resources available.


The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
Reflective: Reflect, evaluate, and learn 	The idea has been informed by evidence and learning from previous work (your own and others'). See Links PDF	Time for reflection and evaluation is embedded into the process of developing the work.	There are opportunities for reflection and learning throughout the delivery process, as well as at the end of the work.	Appropriate and creative approaches to reflection and evaluation are used to support engagement, insight, and learning.	Opportunities are identified to share learning.
	Resources for evaluation are identified from the outset, to support reflection and learning.	The evaluation plan identifies roles, responsibilities, and resources for all aspects of evaluation, including record-keeping, data-collection, analysis, reporting and dissemination.	The evaluation benefits all parties directly, including participants.	Regular team meetings and debriefs are used to reflect on and share learning.	Learning is shared openly and transparently.
	Clarity is established from the start about why you are evaluating and what you want to find out.	Ethical guidelines including consent, confidentiality and anonymity are adhered to as part of the evaluation.	The evaluation includes reflection, understanding and learning as well as monitoring and assessment.	Creative practitioners are supported to reflect and learn from their experience and have a voice in the evaluation.	Learning informs the development of future work.

The Quality Framework Spreadsheet



	Developing Your Idea	Building strong foundations	Making detailed plans	Delivering the work	Learning from the work
<p>Sustainable: Work to develop a positive long-term legacy for people and planet.</p> 	The work is part of a longer-term vision.	Policies and processes are in place to support environmentally sustainable practices. See Links PDF	Progression routes and follow-on activities are identified to support participants' continued creative engagement.	Working practices are realistic and sustainable for the project, the practice, and the planet	Unintended impacts or outcomes are identified and acknowledged.
	The work is underpinned by a desire to achieve beneficial and sustainable social and environmental impacts.	Resources are in place to support the long-term running of the organisation as well as the cost of delivering the work.	Endings are planned to help participants transition to a range of activities or support.	The work is emotionally and professionally sustaining for creative practitioners.	Where possible, impact and outcomes are tracked beyond the end of the project.
	All parties – participants, creative practitioners, partners, and other stakeholders – are involved in deciding what a meaningful long-term legacy will look like.	Partnership working supports the delivery of sustainable impacts.	All parties, including participants, are involved in deciding what happens next.	Creative practitioners develop skills and experience that enables them to sustain a living.	Learning informs practices that create better futures for people and the planet.

7 Links to Further Resources



The Creative Health Quality Framework sits alongside a wealth of other work in the field.

Numerous materials are available to support the practical implementation of the Quality Framework, and we have provided relevant signposts to these where possible.

We acknowledge that there will be additional resources we have missed and welcome feedback during the pilot phase to include them in the next iteration.

A full table of all links can be downloaded here:

Links to Further Resources



8 Glossary



Co-creation is used to mean a coming together of people with diverse lived and professional experience to participate equally in a creative process.

Co-design is used to mean building a project or programme collectively.

Creative arts therapies refers to activities led by a professionally trained creative arts therapist, who has a registration and license with the Health & Care Professions Council (HCPC).

Creative Health is used to refer to all work with creativity, arts and/or culture that supports health and/or wellbeing.

Creative health is defined as creative approaches and activities that have benefits for our health and wellbeing. Activities can include visual and performing arts, crafts, film, literature, cooking and creative activities in nature, such as gardening; approaches may involve creative and innovative ways to approach health and care services, co-production, education and workforce development. Creative health can be applied in homes, communities, cultural institutions and heritage sites, and healthcare settings. Creative health can contribute to the prevention of ill-health, promotion of healthy behaviours, management of long-term conditions, and treatment and recovery across the life course.

Creative Practitioner is someone who works in any of the creative arts, including but not limited to dance, theatre, performance, writing, and the visual arts.

Commissioner is used to mean a person or organisation who contracts the work.

Equity is used to describe a situation of fairness or justice. We use the term to recognise that each person has different circumstances, and that these are impacted by structural injustices. To move towards a fair or just situation in our work, we need to provide resources according to people's different needs (rather than providing an equal amount to everyone).

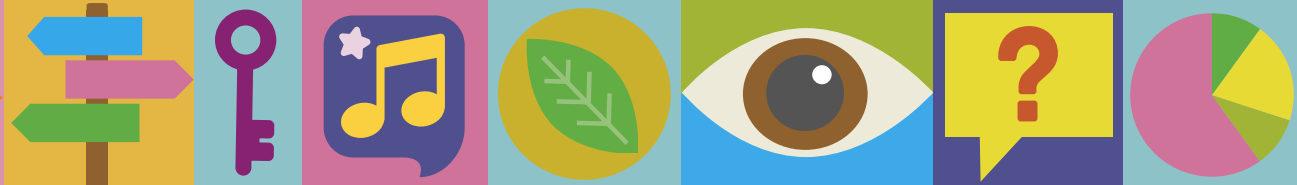
Health inequalities is used to refer to differences in health across the population, and between different groups in society, that are systematic, unfair and avoidable.²

Health and social care is used to refer to formal health and care services provided by or funded by the government via the NHS, Public Health teams in local councils, or care providers such as care homes and domiciliary care services.

Impacts are longer-term or wider change which your project might contribute to but which is often hard to measure, and which you might not be able to attribute directly and wholly to your activity.

² This is the definition given by the National Institute for Health & Care Excellence (NICE). Available at <https://www.nice.org.uk/about/what-we-do/nice-and-health-inequalities>

8 Glossary



Lived Experience is used in this context to refer to people's own, personal experience of health or wellbeing concerns, or of situations that might impact our health and wellbeing, including structural inequities (see 'Equity', above).

Longitudinal evaluation means evaluating the impact of a project beyond the end the project over a longer period of time which may include months, years, or decades.

Local health needs is used to refer to the specific health issues that are most likely to affect people living near you.

Mentoring is the process of receiving support, direction and an objective view from a mentor on how the mentee can develop and progress in their working practice.

Monitoring involves collecting and reporting on existing information about a project. Such information might include the numbers of workshops delivered, artworks produced or performances created, the number of participants engaged. It might also include information about who is involved, including for example age, heritage, marital status, gender, pregnancy, sexuality, disability, caring responsibilities or socio-economic status.

Outcomes are measurable changes that you can attribute directly to your activity. Outcomes are usually described in terms of an increase or decrease in something; for example, enjoyment, confidence, anxiety, or wellbeing. It is necessary to gather evaluation data before and after an activity to show whether there has been a change.

Outputs are things that might be made or produced during a project; for example, a piece of music, or an exhibition. Not every project has clear outputs.

Participants is used to mean people taking part in creative health activities.

Peer support is when people use their own experiences to help each other.

Progression routes are the ways in which participants are enabled to access support or continue to engage in creative practices and activities beyond the end of a project or programme. These might include follow-on groups, peer support groups, and signposting to community-based activities.



Protected characteristics is used to refer to characteristics protected by the UK's Equality Act. These are age, gender reassignment, being married or in a civil partnership, being pregnant or on maternity leave, disability, race including colour, nationality, ethnic or national origin, religion or belief, sex, or sexual orientation. The law also protects carers and people who are breastfeeding.³

Reflective practice includes a range of structured, formal, and informal approaches towards reflecting on and learning from practice. It supports us to be curious about our practice - and ourselves - by paying critical attention to the values, theories, principles, and assumptions that underpin and shape practice.

Risk Assessment is a careful examination of what could cause harm to people in a given activity or environment so that you can weigh up whether you have taken enough precautions or should do more.

Safeguarding is used to refer to steps taken to protect people from harm, recognising that some people may be more vulnerable to harm than others. Most organisations working with people will have a Safeguarding policy that helps them make sure this is happening.

Supervision usually refers to clinical supervision. This means support provided by a trained clinical supervisor to help creative practitioners and others make sure that they are safe and that anyone they are working with is safe. Supervision does this by helping practitioners to reflect, review and change or modify their practice, as well as by identifying training and continuing development needs.

Stakeholders is used to mean people who have an interest or involvement in a project, programme of work, or organisation.

Trauma-informed practice is an approach based on understanding that being exposed to trauma can impact us physically, socially and psychologically.

The work is used to refer to whatever you need this Framework to guide. This could be individual projects; longer programmes of work; organisational strategies or Theories of Change; or your own learning and development.

Whole person describes an holistic approach to seeing each person as a whole, with social, emotional and spiritual as well as medical needs. It is often used within the context of the 'social' or 'biopsychosocial' model as opposed to a 'medical' model of healthcare, whereby care is aimed not just at a medical good or a psychological good, but at the patient's total good, or best interests.

³ See Equality Act 2010 (UK Government), available at <https://www.gov.uk/guidance/equality-act-2010-guidance>; and Discrimination: Your rights (UK Government), available at <https://www.gov.uk/discrimination-your-rights>.

9 Acknowledgements



Building this Framework was made possible by the expertise, time and generosity of the Steering Group to whom we are supremely grateful:

Laura Bedford (Kids in Museums); Tony Cealy (Freelance Theatre Practitioner, Producer); Jemma Channing (Canterbury Museums and Galleries); Amy Creech (City of Bristol College); Ranjita Dhital (University College London and Chair of RSPH Special Interest Group in Arts, Health & Wellbeing); Yvonne Farquharson (Breathe Arts Health Research); Sue Flowers (GreenClose Arts); Philippa Forsey (Creativity Works); Julia Puebla Fortier (Arts & Health South West); Esther Fox (Accentuate); Jules Ford (NHS England); Richard Ings (Arts Council England); Sue Mackay (Thackray Medical Museum); Kiz Manley (Hip Hop HEALS and University College London); Nicola Naismith (Visual Artist & Researcher); Douglas Noble (Live Music Now); Tim Sayers (Leicestershire Partnership NHS Trust); Olatunde Spence (Akoma Healing H'Arts); Matt Walsh (Culture, Health & Wellbeing Alliance); Laura Waters and Guy Noble (National Arts in Hospitals Network); Anna Woolf (London Arts and Health).

Thank you too to the Reference Group for their invaluable advice and guidance:

James Banks (London Funders); Prof Helen Chatterjee (University College London); Alex Coulter (National Centre for Creative Health); David Cutler (Baring Foundation); Rosie Dow (University

College London); Lerato Dunn (Bristol City Council); Liz Ellis (National Lottery Heritage Fund); Sandra Griffiths (Red Earth Collective / Synergi Collaborative Centre); Jayne Howard (Arts Well UK CIC); Janette Kilner and Lorraine Maher (National Criminal Justice Arts Alliance); Clare Lovett (Greater London Authority); Julie McCarthy (Greater Manchester NHS Integrated Care / Greater Manchester Combined Authority); Deborah Munt (Ministry of Others); Jennifer Ngyou (Arts Council England); Clive Parkinson (Manchester Institute for Arts, Health, and Social Change); Cat Radford (National Centre for Creative Health); Daniel Regan (Arts & Health Hub); Farrell Renowden (Age of Creativity); Hollie Smith-Charles (Arts Council England); Chris Stenton (People Dancing); Virginia Tandy (Creative Ageing Development Agency); Alison Teader (NAPA Arts in Care Homes); Rachel Tranter (The Group for Education in Museums GEM); Ben Walmsley (Centre for Cultural Value).

Thank you to Arts Council England for supporting this process not just through their funding, but through many helpful conversations.

Finally thank you to the 150 people who attended seven workshops in October and November 2022 to discuss and develop this Framework.



If you would like to feedback on this document, share additional links or resources, or let us know more about your experience of using the Quality Framework, please contact:

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Supported using public funding by
**ARTS COUNCIL
ENGLAND**

With thanks to Jennie Ives for the design of this document.

