

This evaluation report was undertaken by
the University of Gloucestershire, 2018.

Flourish 2

Mixed Method Evaluation
Final Report, October 2018

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**WE ARE
MACMILLAN.
CANCER SUPPORT**

 **UNIVERSITY OF
GLOUCESTERSHIRE**
at Cheltenham and Gloucester

 **ART
LIFT**

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Funding Declaration

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Executive Summary

Introduction

Flourish (“the intervention”) is based on the Gloucestershire Artlift project but is targeted at participants who are living with or beyond cancer. It is a joint programme between Gloucestershire Artlift and Macmillan Cancer Support. Flourish is a referral scheme that aims to improve the health and wellbeing of patients through an 8-week arts course. Courses in a variety of arts are being offered on a limited, pilot basis to understand their efficacy in this particular patient group. Participants are recruited via GP and clinical referral, through targeted promotion in clinical settings and the offering of “taster sessions” for interested patients. The inclusion criteria for referral included people who have either a current or past diagnosis of cancer for the purposes of improving ability to self-manage consequences of treatment and late effects.

In 2017 the University of Gloucestershire evaluated the first Flourish programme (1). This report provides a summary of the Flourish 2 evaluation undertaken by the University of Gloucestershire during 2018. The report also presents collated, compared and contrasted data from findings from the Flourish 1 evaluation in 2017.

Objectives

The evaluation investigated the following objectives:

1. To investigate the effect of the intervention on wellbeing, using a validated measure (WEMWBS), Generalised Anxiety Disorder Assessment (GAD-7) and Patient Health Questionnaire depression scale (PHQ-8), pre- and post- intervention
2. To investigate the nature of all referrals (i.e. gender, referral reason, places of residence, etc.) and their progress through the intervention (i.e. attendance)
3. To qualitatively investigate patient experiences and perceptions of the Flourish programme.

Method

Participants ($n=21$) were referred into the project via a referral form, and participated in Flourish in one of two community venues. Pre and post intervention Warwick and Edinburgh Mental Health and Wellbeing (WEMWBS), Generalised Anxiety Disorder Assessment (GAD-7), and Patient Health Questionnaire depression scale (PHQ-8) questionnaires were completed. Demographic data was also captured on the referral form. On completion of the intervention, participants ($n=3$) were invited to take part in a post intervention focus group lasting 65 minutes. These findings were then contextualised against the prior Flourish (1) data findings for similarities and difference to provide more substantial data for the quantitative component.

Results

Findings from this mixed method evaluation are summarised below:

- Statistically significant increase in wellbeing when comparing pre and post wellbeing scores, using WEMWBS, for 80% of participants on the Flourish course.

- Statistically significant decrease in both pre and post anxiety and depression scores for those that competed.
- Flourish provided the opportunity for social interaction with similar others, where talking and sharing experiences was welcomed, and for these participants, created a sense of belonging.
- The group provided a source of social support, which was received from the artist and the cancer support worker. The artist was seen as a critical component of these positive experiences.
- Participants reported that the Flourish course provided them with an enhanced health and wellbeing, and enables them to have some distraction from their worries and provided them with enjoyment.
- Continuation of art once Flourish has been completed, was of concern to participants. There is an important role for the Move on Groups (MOGs) (sessions after the course has finished), but a mechanism to support and advice about what this could be for participants, needs some consideration in the future.
- The celebration event was seen as something valued and special for participants, providing them with validation of their art and recognition of the intervention in health services.

Conclusions

These findings support previous evaluations of arts on prescription programmes regarding a positive change on wellbeing, post intervention (1-3). Moreover, they add to the broader literature by providing support for reductions in levels of anxiety and depression within these patients. These findings also support previous studies with patients with cancer (4, 5).

Recommendations

A number of recommendations are drawn from the findings for consideration for future arts on prescription programmes for people living with and beyond, cancer. These include:

1. Continue to include the celebration event at the end of the programme due to its value in supporting self-validation and worthiness, and credibility to the Flourish programme
2. Ensure that Flourish courses are located in accessible and local venues for ease and familiarity, of patient attendance.
3. Consider targeted and strategic recruitment of participants from lower socio-economic groups, and consider the location of Flourish courses in locations where patients from this group would be more likely to attend.
4. Practices and health centre personnel to be more active at promoting Flourish, and through the targeted location of leaflets, such as radiotherapy suites.
5. Ensure that the choice of artist has the necessary skills and competencies to work with people living with and beyond, cancer. Consideration of this should be assured if Flourish is to develop further and employ more artists than currently involved.
6. Consider how the MOGs can be developed for this programme, to ensure that they are suitable, accessible, viable, sustainable and significant to the participants of Flourish.

Lay Executive Summary

What is the report about?

Flourish (“the intervention”) is based on the Gloucestershire Artlift project but is targeted at participants who are living with or beyond cancer. It is a joint programme between Gloucestershire Artlift and Macmillan Cancer Support. Flourish is an arts on referral scheme that aims to improve the health and wellbeing of patients through an 8-week arts course. Courses in a variety of arts are being offered on a limited, pilot basis to understand their efficacy in this particular patient group. Participants are recruited via GP and clinical referral, through targeted promotion in clinical settings and the offering of “taster sessions” for interested patients. The inclusion criteria for referral included people who have either a current or past diagnosis of cancer for the purposes of improving ability to self-manage consequences of treatment and late effects.

In 2017 the University of Gloucestershire evaluated the first Flourish programme (1). This report provides a summary of the Flourish 2 evaluation undertaken by the University of Gloucestershire during 2018. The report also presents collated, compared and contrasted data from findings from the Flourish 1 evaluation in 2017.

What did it aim to do?

The evaluation investigated the following objectives:

1. To investigate the effect of the intervention on wellbeing, and levels of anxiety and depression, using a validated measure (WEMWBS, GAD-7, PHQ-8), pre- and post- intervention
2. To investigate the nature of all referrals (i.e. gender, referral reason, places of residence, etc.) and their progress through the intervention (i.e. attendance)
3. To qualitatively investigate patient experiences and perceptions of the Flourish programme.

How did it do it?

Participants (n=21) took part in the Flourish project, which took place in two venues in Gloucestershire. Wellbeing, anxiety and depression were measured at the beginning and at the end of the 8-week course of art. We also compared person data such as age and gender, with the wellbeing findings. When people finished the course, they were invited to take part in a group discussion. Three people took part, and it lasted 65 minutes. We analysed their discussion to understand what people thought about the programme and how it could be improved. We then compared this data to last year’s evaluation and looked for similarities and differences in the findings from both evaluations.

What did it find?

We found the following from our evaluation:

- People who completed the Flourish course increased in measurements of wellbeing and decreased in measures of anxiety and depression.
- Taking part gave people the opportunity to be with similar other people where they could talk about their cancer experiences, and gave them a sense of belonging.

- The artist was central to the positive experiences that patients had on the course.
- People who took part said that they felt their health and wellbeing was improved. They also enjoyed taking part.
- People were concerned about what to do after it had finished, which helped to identify that support is needed for people to carry on with Flourish if they wanted to.
- At the end of the course there was a celebration event which was seen as a good event and that highlighted the importance of the course and made people feel proud that their art was on display.

What happens now?

We have suggested some recommendations to the organisations that run Flourish. These include:

1. Ensure that Flourish courses take place in easy to get to places for a range of people.
2. Include the celebration event in future courses.
3. Promotion of the Flourish course should be more active, through for example all staff at health centres and practices, and through the targeted location of leaflets, such as radiotherapy suites.
4. The artist is key to experiences. Make sure artists have the skills needed to work with this group of people.
5. Think about how people can carry on doing art once the Flourish course has been completed.

Flourish 1 and 2 Infographic

Flourish

A mixed methods evaluation of an arts on prescription intervention (2017-2018) for people living with and beyond cancer.

Method:

Pre and post intervention (i) wellbeing, and levels of (ii) anxiety and (iii) depression, using validated measures (i. WEMWBS, ii. GAD-7, iii. PHQ-8), were completed (n=21). Demographic data was also captured on the referral form. On completion of the intervention, participants (n=7, Flourish 1 2017 n=4; Flourish 2 2018 n=3) were invited to take part in a post intervention focus group.

Participants (Flourish 1 and 2):

- n=21 (16f, 5m); mean age 62.4 (±13.7) years.

Attendance and completion:

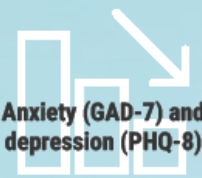
- "Completers" n=13 (61.9%);
- "Non-completer" (attended but did not complete) n=1 (4.8%);
- "Non-attendees" n=7 (33.3%).

Demographic profile:

- n=21 in middle to lowest quintile brackets of deprivation (medium 19%; low 23.8%; lowest 57.1%);
- majority retired (n=11, 52.4%).



Overall participants significantly increased in their WEBWMS scores as a result of attending the course (42.1±6.99 versus 49.59±8.99, t=-4.96, df=16, p<.001).



For those that completed there was a statistically significant decrease for anxiety (7.40±5.4 versus 4.00±3.97, t=3.69, df=9, p=.005), and depression (8.40±4.9 versus 4.50±3.06, t=2.97, df=9, p=.016).



I felt the understanding we had of each other and the support we offer each other was really positive.

Nice to get support from other people who understand...however much people want to help...if you haven't been there you haven't been there.

A sense of validation of being a person who does things rather than a person to whom treatment is done.

Opportunity for social interaction, a sense of belonging and acceptance

Getting out of the house and doing something made me feel better.

I enjoyed meeting up with people and making friends. It makes you feel not so bad in yourself.

Yeah, I found it was therapeutic really... You had to concentrate on what you were doing and don't worry about what you'd had wrong with you.

Enhanced health and wellbeing, enjoyment and a welcome distraction from worries

I would identify her as a brilliant teacher...really good at the kind of interpersonal stuff and shutting down anything that seems to be upsetting anyone, but allowing everyone space to say what they need to. And really encouraging, she's...given me confidence.

She'd (the artist) ask everybody how they were and created a communal feeling of care.

Facilitated sessions with an experienced and skilled artist



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Introduction

Flourish (“the intervention”) is based on the Gloucestershire Artlift project but is targeted at participants who are living with or beyond cancer. It is a joint programme between Gloucestershire Artlift and Macmillian. Flourish is a referral scheme that aims to improve the health and wellbeing of patients through an 8-week arts course. Courses in a variety of arts are being offered on a limited, pilot basis to understand their efficacy in this particular patient group. Participants are recruited via GP and clinical referral, through targeted promotion in clinical settings and the offering of “taster sessions” for interested patients. The inclusion criteria for referral included people who have either a current or past diagnosis of cancer for the purposes of improving ability to self-manage consequences of treatment and late effects.

The aim of the referral scheme is to improve the health and wellbeing of patients through an 8-week arts course. Courses in a variety of arts were being offered on a limited, pilot basis to understand their efficacy in this particular patient group. Specifically, we wished to ascertain whether there was anything in particular from this cohort of people taking part in creative sessions that they would not have gained from being in a group of people in mainstream Artlift sessions. We also aimed to understand how the development of the project could be supported by asking participants about their intentions to maintain contact with their intervention group after the sessions have ended.

The University of Gloucestershire (UoG) were commissioned to undertake the initial Flourish evaluation in 2017 and this report presents findings from both Flourish programmes, and includes a comparison and collation of data from the two programmes.

Evaluation framework

The evaluation framework adopted a mixed method design to focus on process and outcomes, from the Flourish pilot project, an extension of Artlift, an arts referral programme. This framework has been used previously in such programmes, see for example (1, 3, 6)

Aim of the evaluation

To undertake a mixed method process and outcome focused evaluation of the Flourish 2 programme. The evaluation aimed to ascertain whether this cohort of people gain any specific benefits from taking part in creative sessions that would not be gained from being in a group of people in mainstream Artlift sessions. The evaluation also aimed to understand how follow on groups can best be established after

the intervention period had ended. The data from this will potentially increase understanding of how art can benefit people living with and beyond cancer.

The proposed project included the following objectives:

1. To investigate the effect of the intervention on wellbeing, anxiety, and depression, using validated measures (WEMWBS, GAD-7, PHQ-8, respectively), pre- and post- intervention
2. To investigate the nature of all referrals (i.e. gender, referral reason, places of residence, etc.) and their progress through the intervention (i.e. attendance)
3. To qualitatively investigate patient experiences and perceptions of the Flourish programme.

Ethical considerations

The study received ethical approval in June 2018 from the Gloucestershire Research Support Service (R & D ref: 18/003/CCG/SE).

Method

Process of referral and data collection

Participants were referred into the project via a referral form (appendix 1), a modified version of the Artilift referral form. On arrival at the art intervention they completed a Warwick and Edinburgh Mental Health and Wellbeing (WEMWBS), Generalised Anxiety Disorder Assessment (GAD-7), and Patient Health Questionnaire depression scale (PHQ-8) questionnaires (7-9). Demographic data were also captured on the referral form. On completion of the programme, the questionnaires were completed once again, and along with participant demographic data (see below) the data were anonymised by the artist and collated for the evaluation team (Crone, Hughes and Sumner) from the UoG.

Quantitative Data

Data collected by artists delivering the programme were collated and entered anonymously into a spreadsheet. Analysis for change pre and post the intervention was undertaken. Data collected included the following:

- Gender
- Date of birth

- Diversity information
- Post code
- Reason for referral
- Referring health professional (GP, Practice Nurse, etc)
- Warwick and Edinburgh scores (WEMWBS);
<http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/>) pre and post
- Generalised Anxiety Disorder Assessment (GAD-7; <https://patient.info/doctor/generalised-anxiety-disorder-assessment-gad-7>) pre and post
- Patient Health Questionnaire depression scale (PHQ-8;
https://www.selfmanagementresource.com/docs/pdfs/English_-_phq.pdf)
- Session information (number attended, location, art type)
- A subjective (from the artist) appraisal of participant involvement

Qualitative Data:

A focus group with participants who engaged in the programme ($n=1$ focus group with 3 participants) was undertaken at the completion of the programme. An interview schedule was devised to guide the discussion to address objective 4, which can be found in Appendix 2. The focus group lasted 65 minutes and was recorded using a Dictaphone. The recording was transcribed verbatim.

Data analysis

Quantitative

Limited quantitative analysis can be carried out with this small sample size ($n=21$), however we compared pre to post scores on the WEMWBS, GAD-7, and PHQ-8 to provide an indication as to efficacy in this cohort. This was then compared to prior Flourish findings with respect to WEBWMS to provide a more detailed overview of wellbeing impact.

Qualitative

The focus group transcript was analysed using inductive thematic analysis techniques (10). These included the following phases:

1. Familiarisation with the data - transcripts were read and re-read, with brief notes recorded to create preliminary ideas for the next phase of the analysis.

2. Codes of interest were generated by extracting and collating pertinent excerpts of the data.
3. Emerging codes were organized into broad themes that reflected the content and meaning of the data, and reflected the evaluation aims and objectives.
4. Themes were reviewed and refined in relation to the generated codes and the entire data set.
5. Themes were labelled and defined, attempting to capture the essence of the data it contained.

Quotations were used in each theme, where possible, to enable the voices of participants to be represented in the findings.

Findings

Quantitative

The quantitative findings addressed objectives 1-3:

1. To investigate the effect of the intervention on wellbeing, anxiety and depression, using validated measures (WEMWBS, GAD-7, PHQ-8, respectively), pre- and post- intervention
2. Investigate the nature of all referrals (i.e. gender, referral reason, places of residence, etc.) and their progress through the intervention (i.e. attendance)

Twenty-one participants have provided quantitative data for analysis, 16 female and five male, with a mean age of 62.4 (± 13.7) years. The age range and ratio of male to female participants was equivalent across both waves of the Flourish programme. The majority ($n=13$, 61.9%) of the cohort attended the course to completion and were rated as “completers” in their engagement of the course. There were seven (33.3%) non-attendees, and one (4.8%) non-completer. This is in contrast to the prior course of the Flourish programme where 100% of those referred attended. All that were referred for participation were in the middle to lowest quintile brackets of deprivation (medium deprivation 19%; low deprivation 23.8%; lowest deprivation 57.1%); and the majority were retired ($n=11$, 52.4%).

Wellbeing

Of those that completed the course, and had pre and post scores ($n=10$), 80% ($n=8$) experienced an increase in wellbeing. Overall, participants significantly increased in their WEMWBS scores as a result of attending the course (42.6 ± 6.04 versus 49.1 ± 6.28 , $t=-2.89$, $df=9$, $p=.018$). As compared with the prior Flourish cohort, these changes are slightly more modest, and this is likely due to the presence of two

participants whose wellbeing scores decreased during the period of the intervention. Whilst these are exploratory analyses, they do indicate that there was a statistically significant increase in wellbeing by participating in the Flourish course. When combined with the prior Flourish cohort to establish a group of 17 completers with full pre and post data, again there was an overall increase in WEBWMS scores observed as a result of attending these courses (42.1 ± 6.99 versus 49.6 ± 8.99 , $t = -4.96$, $df = 16$, $p < .001$). These amalgamated findings lend further support to the efficacy of the Flourish programme, however must still be viewed conservatively due to the limited sample size.

Anxiety and depression levels

Of those that completed the course, all exhibited a decrease in their levels of anxiety and depression scores (as measured by GAD-7 and PHQ-8, respectively) as a result of attending. For both anxiety (7.4 ± 5.42 versus 4.0 ± 3.97 , $t = 3.69$, $df = 9$, $p = .005$), and depression (8.4 ± 4.97 versus 4.5 ± 3.06 , $t = 2.97$, $df = 9$, $p = .016$) there was a statistically significant decrease in scores after attending. Again, due to the limited sample size available for analyses these results should be viewed as exploratory, and a substantially larger sample would be required for definitive support.

Qualitative

The qualitative findings addressed objective 4:

3. To qualitatively investigate patient experiences and perceptions of the Flourish programme.

Findings that emerged from the data analysis are presented in themes. Due to the small size group, it must be noted that these outcomes are not generalizable. Furthermore, the small size also means that anonymity is difficult to maintain, so we have not included pseudonyms or reference numbers to quotations. Where interactions are quoted, the first speaker is numbered 1, the second 2 and so on.

Four themes emerged from the analysis, these (along with the related subthemes) are presented below:

- Referrals
 - *Referral process*
 - *Location*
 - *Attending initial session*
- People
 - *Peers / Flourish group attendees*

- *Group facilitator / tutor*
- Experience
 - *The art itself / being creative*
 - *Enhanced wellbeing*
 - *Concluding / celebration event*
- Flourish coming to an end
 - *Fear of letting go*
 - *Move-on groups*

Referrals

Referrals included subthemes related to the referral process, the location, and thoughts about attending the initial session of Flourish.

Referral process

Participants reported that the referral process was simple and easy irrespective of whether they were invited to attend Flourish by their GP, or whether they self-referred to the project:

I simply saw it in the waiting room, a little leaflet...on the table, I picked it up and "oh that would be wonderful." And just applied and the doctor happily signed it and there was no, you know I just sailed through...there is no difficulty in accessing it whatsoever.

Dr...is at my surgery and I think they sent a letter to absolutely all the appropriate patients in their practice. So they made it easier to actually join than not join.

Despite these personal experiences however, participants did comment that GPs and associated services could be more proactive in informing people of, through both the distribution of the leaflet and also actively referring people to Flourish:

Picking up a leaflet in my surgery was the way I found it, but it sounds as if your doctor is much more proactive in telling patients and it would be an idea to encourage a practice to do that because it is very beneficial.

The GP's need to be proactive...to contact patients rather than letting patients take it up.

I can't see why the leaflet, I mean, maybe that could be more widely distributed. So you spend quite a bit of time sitting in the radiotherapy waiting room that might be a place to have them.

Location

The Flourish groups were located in easily accessible areas for the participants. Their location, i.e. being local or in familiar surroundings, contributed towards the individual's decision to attend the course:

I'm just happy it is local. If I'd been offered it [Flourish] at Stroud, I've never been to the museum in the park before, I might have thought going to Stroud was too much of an obstacle, even though that when I got here I would have found it was such a lovely place.

The fact that this is being presented really locally...is just nice, it is just a 10 minute drive. I can dump my car in the Tesco car park and then walk round to the place. I wasn't taking a disabled space from somebody who needed it. And it is accessible for local people by bus isn't it? So it was a big advantage. If I'd been offered that further away I don't think I would have been able to attend.

Furthermore, the participants reported feeling extremely fatigued after their cancer treatment. Consequently, having Flourish located so that it was both quick and easy to get to eliminated a number of difficulties for the participants in terms of attending the sessions:

If you're short of energy to do things. I mean as you say, finding the energy to go and have a ghastly radio punishment is bad enough...But yeah if you can walk to somewhere even better...You want to eliminate as many obstacles as you can really before you get there

And a big spread out county like Gloucestershire, Cheltenham is not even the most central hospital...I mean it is an hour's drive each way, even if there is no traffic problems. If you're feeling not so good then that's not so easy... and you're not going to get there for a lot of things that would be good to do...access is a problem.

Attending the initial session

The participants reported that attending the first session of Flourish was difficult. Individuals felt anxious about their artistic ability, were extremely fatigued following treatment, and feared going out in public due to for example, physical signs such as hair loss.

I've done sewing but I haven't done any drawing based art before...at least not since primary school, so it was really new and I felt quite anxious before I went, you know would it be too difficult?

It can be quite hard to get yourself, you know if you've had chemo, it can be quite hard to overcome fatigue and get yourself out to do things.

1. When I went to the hospital...they said if I'd had chemotherapy and I lost my hair...you can get wigs and a bandana...

2. That's a very big thing...losing your hair...and it's your confidence...that goes

3. Yes...people are still thinking 'for goodness sake I'm only just out of bed and I don't want to go with no hair'.

However, Flourish presented these individuals with motivation to get out of the house and provided them with something to look forward to:

At first the doctor told me what was wrong. I was upset about it at the time. And I thought that after I had radiotherapy...I thought I might come to this [Flourish] to help me get through life.

And I felt it [Flourish] would just do me, because...since 2016 this is my second different cancer. I knew from the first one that it can be easier once your treatment finishes to get into a bit of a slump. You've no longer got to make the vast effort to drive yourself to radiotherapy and things. It is just easy, and the fatigue is real and is disabling...And it is all too easy to give in really. I thought here is this chance to try and start overcoming these difficulties this time.

Participants also felt that Flourish was open and appreciative of their situation and thus were reassured that they could attend the course regardless of their capability to remain for the entire session:

Having cancer treatment, having two sets of cancer treatment makes you feel very physically ill. Fatigue after chemo...you can feel your muscles are poisoned and will not work properly. You feel terrible...some of the ladies made an effort to come and sat there for 15 minutes and said, 'I can't go on I've got to go home'. But nevertheless I think it is really good for you to make that effort in the face of your difficulties.

People

People included two subthemes related to: 1. peers and fellow Flourish attendees, and 2. the group facilitator / tutor.

Peers / fellow Flourish attendees

Flourish is unique in that it is specifically designed for people living with and beyond cancer. This offered participants the opportunity to share experiences, and acknowledge the struggles of, one another in a way that would have been unattainable if the programme was open to a more diverse group of people:

Although something is difficult because we'd all been ill, I felt the understanding we had of each other and the support we offer each other was really positive.

Well in our group we did chat about various health related issues that we might be having...And that was nice to get support from other people who understand...however much people want to help...if you haven't been there you haven't been there.

When you're in this group...you're with somebody that has been going through almost the same as you. So that makes you feel not so bad in yourself really.

Although, on the whole, the participants felt a sense of belonging within the group a lack of sensitivity from a minority of the others in the group initiated difficulties and upset to others. Depicted in the quotes below, this was perceived to be a consequence of people being at different stages of their treatment and recovery journey:

Somebody...she'd come and she didn't really want to be with a lot of other people who had been ill. And the chap next to me I know has had a hell of a time, but he hardly mentioned it. And one woman went into huge detail about her trials and tribulations, which had been four years ago and I didn't think that was sensitive of her actually...there is no way you can avoid that. But I think being respectful of each other's difficult times is really important. And if you find one person maybe to talk to privately about what you've gone through that is one thing, but to tell the whole class...I don't know that just bothered me.

[I didn't enjoy it when] somebody went through hour by hour, name by name of everybody they'd encountered on their cancer experience...I just want[ed] to get on with my work. And it was being poured on us. But there is not much you can do about that.

It can make you feel upset when somebody may not be tactful, perhaps somebody who is further away from their treatment may not remember quite what it is like. And everyone's experience is different anyway, and people are differently sensitive about different things.

Furthermore, highlighted in the excerpts below, finding out that group members had become severely or chronically ill was extremely upsetting for the participants:

Somebody might become ill again and it makes you feel really distraught

One of the participants on our course pulled out and then we heard she become very seriously ill and that was very upsetting

Finding out that one of the participants was seriously ill again...She's less than half my age. She's got five kids. She is not going to make it. It is tough....So as the young ones say 'it is a bummer'.

Hearing about illnesses returning was difficult for the participants not only because they were worried for friends and loved ones, but also because it forced them to reflect upon their own journeys and, in doing so, recognise their vulnerability with cancer.

Group facilitator / tutor

Depicted in the utterances below, the participants believed that the group facilitator cultivated a non-judgmental, caring and inclusive atmosphere, which was viewed as fundamental to the success of Flourish:

[The artist] created an atmosphere of complete sensitivity to the fact, almost without saying anything, she'd ask everybody how they were and created a communal feeling of care, which was quite sensitively and almost done without words

I don't remember anybody saying I can't do this, they might have said they find it difficult, but often with art, people feel flummoxed or intimidated. But this was so beautifully prepared in steps and engaged people it was wonderful to see how carefully it was delivered

I haven't learnt any art before but I have done quite a bit of education in my time. And I would identify her as a brilliant teacher....really good at the kind of interpersonal stuff and shutting down anything that seems to be upsetting anyone, but allowing everyone space to say what they need to. And really encouraging, she's...given me confidence.

Additionally the participants understood the tutor to be motivational and inspirational, skilled and knowledgeable, patient and understanding; all of which helped individuals to feel better:

1. If you're unclear it's okay, and she'd [the artist] say 'oh you're clever' you know

2. Just like positive encouragement as well uplifts you

3. It does...makes you feel better

1. [The artist] is very gifted in helping you appreciate your own effort I thought. And she kept saying I'm going to boss you through another procedure and I thought there was nobody further from bossing you know she has got a very delicate touch.

2. Yeah well it is because of that that she can get away with saying that she's bossing

3. Exactly but it just made me smile because she had a nice sense of humour

1. There was a bird that she wanted us to do, but it was a bit difficult, she came and sat beside me and said don't worry, showed me how to do another one and that.

2. Very patient yeah. Very skilled in helping and I think no question that you weren't up to it.

3. She is a really great teacher. I mean if this is going to be rolled out on a big scale then different teachers will have different effects and it won't all be the same. But certainly I would recommend [this artist]....

Experience

Experience encapsulated three subthemes: the art itself and being creative, enhanced wellbeing and the concluding celebration event.

The art itself and being creative

Described in the excerpts below the creative process / doing art acted as a welcome distraction from the participants problems:

We got on with our art and it was a nice distraction from problems

1. *[I enjoyed] the ability to be distracted and switch off*
2. *Yes just to be involved in what we'd been shown and fascinated by it*
3. *Yeah I found it was therapeutic really...You had to concentrate on what you were doing and don't worry about what you'd had wrong with you*

Irrespective of the individual's previous artistic experience, doing art was also viewed as interesting, enjoyable and engrossing:

I think it was completely engrossing. The minute we started a deep silence fell over the class and people were totally engaged. And it is true that as the classes went on people were more comfortable with one another, we talked about all sorts of things. But I think in some ways the best bit was when we just got totally involved in what you were doing

It is very interesting, the same instructions, simple set of instructions producing different pieces of art is really very good

I've done several kinds of art you know life drawing and painting and so on, but it was unlike anything I'd done before. When we were building up and looking at things very carefully and I think any art class encourages you to do that, but that was voiced by people. I've been looking at things much more carefully, trees, leaves, shapes, clouds whatever it was yeah.

Enhanced wellbeing

Individuals reported that Flourish provided something purposeful to do and made them *feel better*. Attending the course not only got participants out of the house, but it also encouraged them to socialise, to feel more energetic and to sleep better:

Getting out of the house and doing something made me feel better

I enjoyed meeting up with people and making friends...it makes you feel not so bad in yourself

It has made me feel better physically and my sleep has improved

I didn't expect things like the improved sleep; I didn't expect the effect to be quite that marked

Concluding celebration event

The concluding celebration event was perceived to be important to the participants because it offered them a sense of self-validation and worthiness as a person. Having their artwork framed and presented at the event was a significant contributing factor to this:

I thought that event was spectacular especially since [the artist] had gone out and bought frames for all those things. I mean it was a hell of a lot of work for her I'm sure...she could have just put them on the wall, couldn't she? But the fact that they were framed gave them a value and meant you could take them home and put them on your own wall and give them away. And I was just actually astonished by the expense. You know there was food, there was drink, there was, your doctor came and spoke, it was...it was a proper event. I am extremely grateful for that.

There was a conversation between participants in the focus group on this, which further highlights the importance of the event, as this dialogue between participants portrays:

What actually surprised me was, like maybe doing our drawing and that [the artist] got some of our art work framed. I wasn't expecting that but she did it anyway...It made me feel great

Yes I think by doing that she says these are worth framing and putting on the wall...otherwise they would just be in a folder in a cupboard somewhere. But I've got quite a few of them on the wall.

Yes I think I didn't expect to get such a sense of validation from the course.

Well when I got all my art framed on the wall...[friend] said...'is that all your art work?' And I said 'yeah'. They said, 'that's really good' and again it just validates you doesn't it

The concluding celebration event was also enjoyable for the participants because it encouraged important people in their lives to come together:

Yeah my family thought [Flourish] was very positive. They were relieved that I'd got something to get out of the house...and they came to the celebration event

Well I was delighted. If you're delighted about something then usually other people are delighted about it. And [my family] came to the show and thought that was pretty interesting...one or two of the pictures they really liked. I gave one to my granddaughter and the rest are around the house.

Furthermore, Flourish enabled the participants to acknowledge, and reflect on, their cancer journey, in which they felt a renewed sense of autonomy and control over their lives, and provided a holistic view of themselves, rather than as a patient:

[Flourish provided me with] a sense of validation of being a person who does things rather than a person to whom treatment is done

It has also helped people with confidence to do other art related activities:

For me it has given me confidence when I became ill this time within weeks of having retired, having retired only because I'd only just recovered from the previous episode. And I've been looking forward to joining groups and things locally, being ill again I felt really unable to just go and do it. But I think this has been it has like opened the door to me to go and do some other things. Now if I see a leaflet for an art course in the library I might think 'right I'll do that', whereas before I would have thought 'I've never had any art training I can't do it'. 'What would people think of me?' This has given me more confidence to go and do different group activities.

Flourish coming to an end

Flourish coming to an end related to the participants fear of letting go and their thoughts about move-on groups.

Fear of letting go

Participants stated that they disliked Flourish coming to an end; they feared that it would inhibit the progress (i.e. motivation for, and engagement in life) that they had experienced as a result of attending the course:

I really looked forward to Tuesday mornings for the eight weeks. And yeah it was horrible when it came to an end actually

I just don't want to let go of the momentum I've developed by going to this. And I do more of other things now, working on my garden and stuff

Move-on groups

Once Flourish had come to the end individuals wanted to get involved in a similar course, however they were unsure of how to do so. Barriers included a lack of awareness, a lack of availability, location and funding constraints:

Well I haven't really [got any plans to continue] no, but I would like to...So I would like to try and come here, without [the artist] sort of join altogether, sit together...but in my experience an art class without somebody guiding you turns into a conversation class. You never go

I just hope to expand the number of group activities I can do. Get out and meet people. I mean this photography one sounds great but we haven't had it advertised to us. So whether they think they've got enough uptake in Stroud without overloading it with us as well. Or whether they think it is too far for us to drive or whatever. It seems a bit odd when they hesitate to make you drive yourself to Cheltenham...

Quite a lot of people would have done more of the same [Flourish] but you know I don't know how the funding goes. That must be expensive to put that on.

When some participants did manage to attend a move-on group they were deemed to be non-viable and unsustainable:

Yeah so people who did an Art Lift some years ago...a small group of those wanted to carry on and were able to get a room at the Hub...and we were told we could join that, and I have tried to join it...But there is only two other people so I don't know...

I think maybe some more information about what might be available locally that would be suitable and maybe more carefully curated, and maybe for somebody to actually have a look at it. Is it a viable group? Is there enough people going to it to keep it going? Perhaps something a bit firmer from putting us in touch with each other or different groups as well. I mean it was nice to meet everybody from Stroud at the exhibition, but that didn't really lead to anybody saying 'well we'd like to do some more, let's get together'.

Additionally, move-on groups were deemed to be too generalised and lacked the intricate values that were significant for this population group (i.e. a shared understanding, appreciation of each other's illness and struggles):

The woman who is running it [the move-on group] is very keen to help you, but she is not [our artist]...You do feel a bit bereft suddenly...You do need that careful guidance...I mean that is the disadvantage of it being really good is that it can't go on forever

The other people [in the move-on group] seemed fine. Just quietly getting on with their painting...The person running it says 'have you done water colouring?' And I said 'no never'. And she got me to do a colour wheel with some water colour paints and make some different colours of mud and....taught me a technique...So it is good but it hasn't got all the kind of values and things that were present at Flourish

Nevertheless, after finishing the Flourish course individuals felt inspired to pursue similar group activities and portrayed a number of recommendations in how they could do so. This included contributing funds toward the running of the course, recruiting volunteer artists, running sessions less frequently, and setting up their own group activities to help vulnerable others:

1. There are a number of art teachers presumably locally who could do an occasional, I mean even if it was only once a month or something... We don't need to continue every week. And maybe if it was less frequent people would feel more enthusiastic about it, you would be sort of looking forward to it wouldn't you? What do you think?

2. I think once a month is a good idea. It is a good idea especially from the funding point of view. Because it would be a lot less expensive wouldn't it...? It could be a bit more self-funding couldn't it?

3. Yeah...got like a tin and you pay, you give at least two quid to go in the pot... It would pay for the materials wouldn't it?

What I would really like to do is see if I could get together with Macmillan to set up a cancer survivors gardening club where...Where people who haven't got a partner or anyone else to help with their garden and it has got in a mess and are getting home feeling terrible we go and help one another. Because then those people are getting involved in the benefits of the people who understand aspects and are helping them. But I don't, I mean there is sort of police checks aspects and things like that would make it hard. But I would like to try and do that at some stage.

Overall attending Flourish provided many benefits for the participants including enhancement of their overall health and wellbeing. However further support could be provided to facilitate the participants confidence, motivation and ability to attend similar groups once the course has come to an end.

Table 1: Summary, by intervention topic, of the qualitative findings.

Topic	What participants said
Referral process	<ul style="list-style-type: none"> • The referral process was simple and easy • Although GPs were key to the referral process they could be more proactive in informing people of, and referring people to, Flourish
Location	<ul style="list-style-type: none"> • The Flourish groups were easily accessible and in familiar places • This was viewed positively by the participants who stated that being situated locally and in familiar surroundings significantly contributed towards their decision to attend the course
Attending the initial session	<ul style="list-style-type: none"> • Attending the first session of Flourish was difficult. Participants were anxious about their artistic ability, felt extremely fatigued following treatment, and feared going out in public as a victim (i.e. physical signs such as hair loss) • Flourish presented individuals with enough motivation to get out of the house and provided them with something to look forward to
Peers/Flourish group attendees	<ul style="list-style-type: none"> • The participants enjoyed meeting new people who had similar experiences to them • Having the opportunity to share experiences with, and acknowledge the struggles of, people in similar situations was viewed positively by the participants • A lack of respect and sensitivity from a minority of the participants caused difficulties and upset to others. This was often due to people being at different stages of their treatment and recovery journeys • Finding out that group members had become severely ill or were not going to make it was extremely upsetting for the participants
Group facilitator/ tutor	<ul style="list-style-type: none"> • The artists ability to cultivate a caring atmosphere was viewed as fundamental to the success of Flourish • Participants perceived the group facilitator as motivating and inspirational, skilled and knowledgeable, patient and understanding, inclusive and sensitive; all of which made individuals feel better
The art itself/ being creative	<ul style="list-style-type: none"> • The creative process / doing art acted as a welcome distraction from the participants problems • Irrespective of the individuals previous artistic experience doing art was viewed as interesting, enjoyable and engrossing
Enhanced wellbeing	<ul style="list-style-type: none"> • Individuals reported feeling better as a result of attending Flourish • Flourish not only got people out of the house, but it also encouraged them to socialise, to feel more energetic and to sleep better
Concluding/ celebration event	<ul style="list-style-type: none"> • The concluding / celebration event offered the participants a sense of self validation and worthiness as a person • It also encouraged important people in their lives to come together • Flourish enabled the participants to acknowledge, and reflect on, their cancer journey, in which they felt a renewed sense of autonomy and control over their lives
Fear of letting go	<ul style="list-style-type: none"> • The thought of Flourish coming to an end was horrible • Individuals feared letting go of the positive momentum (i.e. motivation for, and engagement in life) that the course had stimulated

Move-on Groups (MOGs)	<ul style="list-style-type: none"> • Individuals wanted to continue with similar courses to Flourish but did not know how to get involved in such programmes • On the rare occasion that individuals did manage to attend a move-on group they were deemed to be non-viable and unsustainable • Move-on groups were too generalised and lacked the intricate values that were significant for this population group (i.e. shared understanding, appreciation of each other’s illness and struggles) • After finishing Flourish individuals felt inspired to pursue similar group activities and portrayed a number of recommendations of how they could do so
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Collated findings from Flourish 1 and 2 programmes

Quantitative

After two programmes of Flourish there is still need for further data collection and analyses before substantial claims can be made with regard to efficacy. This is even more the case now more detailed data are being gathered regarding levels of anxiety and depression. These clinically relevant variables will be an important means to evidence the utility and value of the intervention. The present findings confirm and add to the prior evaluation, where a significant increase in wellbeing was observed. With this slightly larger sample, however, we see that some participants have not completed the programme, and of those that did, some have experienced a decrease in wellbeing. These findings should not necessarily be a cause for concern, however, as lack of completion and decrease in wellbeing have also been observed in Flourish’s comparator, Artilift (11). Nonetheless, an understanding of the drivers of both of these factors is clearly needed within the Flourish context and more broadly in arts-on-prescription.

Qualitative

A summary of Flourish (1) qualitative findings are presented in Table 2. These findings have been collated in a table to compare and contrast with Flourish 2 findings.

Table 2: Collated findings from the two data sets (Flourish 1 and Flourish 2).

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
Referrals	<ul style="list-style-type: none"> • Emphasising that skill in art is not important for participation • Personal approaches from referrers, may be more effective in recruiting participants 	Referrals	<ul style="list-style-type: none"> • The referral process was simple and easy • Although GPs were key to the referral process they could be more proactive in informing people of, and referring people to Flourish 	<ul style="list-style-type: none"> • The referral process has become more established over time • GPs are becoming more aware of Flourish and beginning to invite eligible patients to attend • More individuals are self-referring due to increased advertising of the programme
Location	<ul style="list-style-type: none"> • Venues need to be local and accessible 	Location	<ul style="list-style-type: none"> • The Flourish groups were easily accessible • This was viewed positively by the participants who stated that being situated locally and in familiar surroundings significantly contributed towards their decision to attend the course 	<ul style="list-style-type: none"> • The location of Flourish has been more widely considered and developed over time • The groups have been situated in more local and familiar areas for the participants • This has made a significant contribution to individuals ability to attend the course
Target groups	<ul style="list-style-type: none"> • The group thought that people undergoing treatment would be better in a discrete group. • 'Survivors' have different needs. 			<ul style="list-style-type: none"> • No references were made to target groups in Flourish 2 suggesting that it was not a significant factor • However, individuals did feel upset when their peers become significantly ill again; this may imply some underlying difficulties of trying to integrate patients at different stages of their cancer journey

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
		Attending the initial session	<ul style="list-style-type: none"> Attending the first session of Flourish was difficult. Participants were anxious about their artistic ability, felt extremely fatigued following treatment, and feared going out in public as a victim (i.e. physical signs such as hair loss) Flourish presented individuals with enough motivation to get out of the house and provided them with something to look forward to 	<ul style="list-style-type: none"> Significant barriers were present for all participants of Flourish in terms of attending the course However these barriers seemed to be of a greater concern for Flourish 2 attendees While people in Flourish 1 seemed mainly concerned about their artistic ability people in Flourish 2 had a multitude of concerns which made attending the initial session particularly difficult for them
People	<ul style="list-style-type: none"> People involved (artists, cancer support workers etc) need to be empathic and person centred 			<ul style="list-style-type: none"> People contributed significantly to attendee's experience in both Flourish 1 and Flourish 2 Although the theme 'people' was not depicted directly in Flourish 2 it was represented by two stand-alone themes (i.e. peers and artist) highlighting its growth in importance for the participants
Families	<ul style="list-style-type: none"> Not all families are fully supportive, especially with respect to participation in MOGs. Most partners are generally supportive. Open days/art exhibits were well received by families. 			<ul style="list-style-type: none"> In terms of social influence, the participants family seemed to have a greater impact on their experience in Flourish 1 Although attendees mentioned their families in Flourish 2 it was very brief and did not constitute a theme in its own right Rather individuals in Flourish 2 seemed to rely on their peers and

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
				the artist who they perceived shared more similar experiences to themselves
		Peers/ Flourish group attendees	<ul style="list-style-type: none"> • The participants enjoyed meeting new people who had similar experiences to them • Having the opportunity to share experiences with, and acknowledge the struggles of, people in similar situations was viewed positively by the participants • A lack of respect and sensitivity from a minority of the participants caused difficulties and upset to others. This was often due to people being at different stages of their treatment and recovery journeys • Finding out that group members had become severely ill or were not going to make it was extremely upsetting for the participants 	<ul style="list-style-type: none"> • The influence of their peer group became more prevalent in Flourish 2 contributing both positively and negatively to the participants experience • Although people in Flourish 1 enjoyed developing bonds and friendships and discussing their shared experiences with other group attendees they did not seem to rely on their peer group as significantly (they also had their family to talk to) as people in Flourish 2
		Group facilitator / tutor	<ul style="list-style-type: none"> • The artists ability to cultivate a caring atmosphere was viewed as fundamental to the success of Flourish • Participants perceived the group facilitator as motivating and inspirational, skilled and knowledgeable, patient and 	<ul style="list-style-type: none"> • In Flourish 1 the artist was only acknowledged in combination with other people-noting their need to be empathetic and person-centred • In Flourish 2 the group facilitator represented one of the most significant influences on the

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
			understanding, inclusive and sensitive; all of which made individuals feel better	participants experience; the artist and their approach was viewed as crucial to the success of the course
		The art itself / being creative	<ul style="list-style-type: none"> • The creative process / doing art acted as a welcome distraction from the participants problems • Irrespective of the individuals previous artistic experience doing art was viewed as interesting, enjoyable and engrossing 	<ul style="list-style-type: none"> • In Flourish 1 being creative did not contribute a significant theme, rather the participants were anxious at the thought of doing art • In Flourish 2 the participants were able to see values beyond art; it was viewed as something that could help distract them from their worries and that they could enjoy for themselves
		Enhanced wellbeing	<ul style="list-style-type: none"> • Individuals reported feeling better as a result of attending Flourish • Flourish not only got people out of the house, but it also encouraged them to socialise, to feel more energetic and to sleep better 	<ul style="list-style-type: none"> • Although inferences were made towards enhanced wellbeing in both Flourish 1 and Flourish 2 participants in Flourish 2 explicitly identified that the course contributed towards specific aspects of their health (i.e. their social, physical and mental wellbeing)
		Concluding/celebration event	<ul style="list-style-type: none"> • The concluding / celebration event was perceived to be important to the participants because it enabled them to acknowledge, and reflect on, their cancer journey • It offered them a sense of self validation and worthiness 	<ul style="list-style-type: none"> • There was a dearth of discussion regarding a concluding event in Flourish 1 (possibly because it was not a question that was asked in the interview schedule) • In Flourish 2 however, there was discussion prompted by the participants who concluded that

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
				the celebration event to close Flourish 2 was viewed favourably
		Flourish coming to an end	<ul style="list-style-type: none"> • The thought of Flourish coming to an end was horrible • Individuals feared letting go of the positive momentum (i.e. motivation for, and engagement in life) that the course had stimulated 	<ul style="list-style-type: none"> • The course coming to an end was met with more anxiety by the participants of Flourish 2 than the attendees of Flourish 1 • This may be, in part, a consequence of the concluding event (i.e. sense of validation) and the more prevalent social bonds (i.e. sense of belonging) that were representative in Flourish 2 and the fear of letting these go
Move-on Groups (MOGs)	<ul style="list-style-type: none"> • MOGs need support in the early stages to get up and running, and require a proactive group member to lead it. • A tool-kit would be useful to collate learning from current MOGs that exist elsewhere, to facilitate setting up, funding, sustainability etc. 	Move-on Groups (MOGs)	<ul style="list-style-type: none"> • Individuals wanted to continue with similar courses to Flourish but did not know how to get involved • On the rare occasion that individuals did manage to attend a move-on group they were deemed to be non-viable and unsustainable • Move-on groups were too generalised and lacked the intricate values that were significant for this population group (i.e. shared understanding, appreciation of each other's illness and struggles) • After finishing Flourish individuals felt inspired to 	<ul style="list-style-type: none"> • MOGs are a recommended route following Flourish • In both Flourish 1 and Flourish 2 participants expressed concerns at their ability to find, access, and attend appropriate MOGs • More needs to be done to help participants attend similar courses once Flourish comes to an end • This would help to reassure and enable individuals to live a more fulfilling life following their cancer treatment

Topics Flourish 1	What participants said	Topics Flourish 2	What participants said	Comparison/contrast
			pursue similar group activities and portrayed a number of recommendations of how they could do so	
Experiences of project	<ul style="list-style-type: none"> • Participants have developed strong bonds and friendships • The project has provided participants with a safe space to discuss their shared experiences • Participants reported feelings of increased wellbeing as a result of participating in the project and MOG 			<ul style="list-style-type: none"> • Overall attending Flourish provided many benefits for the participants including enhanced health and wellbeing • However more needs to be done to facilitate the participants confidence, motivation and ability to attend similar groups once Flourish has come to an end

Conclusion

A number of key findings have emerged from this evaluation. These are summarized below:

- There was a statistically significant increase in wellbeing when comparing pre and post wellbeing scores, using WEMWBS, overall for participants on the Flourish course.
- There were statistically significant decreases in levels of anxiety and depression for participants on the Flourish course.
- As with previous findings Flourish provided the opportunity for social interaction with similar others, where talking and sharing experiences was welcomed, and for these participants, created a sense of belonging.
- Furthermore, the group provided a source of social support, which was received from the artist and the cancer support worker. The artist was seen as a critical component of these positive experiences.
- Participants reported that the Flourish course provided them with an enhanced health and wellbeing, and enables them to have some distraction from their worries and provided them with enjoyment.
- Once again, being able to continue art once Flourish has been completed, was of concern to participants. There is an important role for the MOG but a mechanism to support and advice about what this could be for participants, needs some consideration in the future.
- The celebration event was seen as something valued and special for participants, providing them with validation of their art and recognition of the intervention in health services.

These findings support previous evaluations of arts on prescription programmes regarding a positive change on wellbeing, post intervention (1-3). Moreover, it adds to the broader literature by providing support for reductions in levels of anxiety and depression within these patients. It also supports previous studies with patients with cancer (4, 5). Completion rate is higher than reported in larger studies, however this is likely due to the modest sample size. In summary, from the quantitative findings, whilst participant numbers are low in this pilot project, results demonstrate that this is a

promising intervention for wellbeing change, as well as addressing clinically meaningful measures of anxiety and depression for people living with and beyond cancer.

Findings from the qualitative aspect of the mixed method evaluation support previous findings from such programmes (1-5). The findings from this study identified that being referred to Flourish provided individuals with the motivation and energy that they needed to reengage with life following their diagnosis of, and treatment for, cancer. Being easy to access and located in familiar surroundings supported people's decision to attend the course. Flourish presented the participants with an opportunity to meet new people who shared similar experiences to them; this engendered a sense of belonging within the group. The artist contributed significantly to the individuals experience of the course; her ability to cultivate a sensitive and caring atmosphere helped the participants to feel supported and understood. The process of doing art was viewed as therapeutic and had the ability to distract people from their worries. On the whole, the participants reported a perceived increase in wellbeing (physically, socially and mentally) as a result of attending the course. The addition of a celebration event at the end of Flourish 2 enabled the participants to acknowledge, and to reflect on, their cancer journey. This offered individuals a sense of validation and worthiness that enable them to live a more fulfilling life as they continued their journey of living with and beyond cancer.

However, the fact that Flourish was limited to 8 sessions distressed the participants. They feared losing their motivation for, and engagement in life that had been stimulated as a result of attending the course. This concern increased furthered as individuals struggled to find, access, and attend appropriate MOGs.

Thus, although attending Flourish provided many benefits for the participants, more needs to be done to facilitate individual's confidence, motivation and ability to attend similar groups once Flourish has come to an end.

Recommendations

1. Continue to include the celebration event at the end of the programme due to its value in supporting self-validation and worthiness, and credibility to the Flourish programme
2. Ensure that Flourish courses are located in accessible and local venues for ease and familiarity, of patient attendance.

3. Consider targeted and strategic recruitment of participants from lower socio-economic groups, and consider the location of Flourish courses in locations where patients from this group would be more likely to attend.
4. Practices and health centre personnel to be more active at promoting Flourish, and through the targeted location of leaflets, such as radiotherapy suites.
5. Ensure that the choice of artist has the necessary skills and competencies to work with people living with and beyond, cancer. Consideration of this should be assured if Flourish is to develop further and employ other artists than at present.
6. Consider how the MOGs can be developed for this programme, to ensure that they are suitable, accessible, viable, sustainable and significant to the participants of Flourish.

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Appendices

Appendix 1 Referral form



Referral form for the *Flourish* project

Flourish is a pilot arts and health project that will bring together people living with and beyond cancer and an experienced artist over a course of 8 weekly two hour sessions. The sessions will run simultaneously at Stroud Subscription Rooms and GL11 Community Hub, Cam from September to November 2016. The objective of the Project is to improve the confidence and well-being of participants. *Flourish* is delivered by Artlift, a registered charity with a 10-year track record of designing and delivering arts projects, in partnership with the NHS and other health organisations. *Flourish* is being designed and delivered in partnership with Macmillan Cancer Support (Learning & Development team).

PART A: Patient details	
Patient NHS Number	<input type="text"/>
Name.....	Male..... Female..... (please tick)
Address.....	
Postcode (please complete).....	Date of Birth.....
Preferred contact number or email.....	
Occupation: retired/in education/part-time employment/full-time employment	

PART B: Relevant medical and personal information (TO BE COMPLETED BY REFERRER)	
Patients to be referred to the <i>Flourish</i> pilot must be those that are living with and beyond cancer. Please note any additional (or connected) reasons for referral below	
1. Reduce stress/anxiety/depression	5. Distraction from behaviour-related health issues
2. Improve self-esteem/confidence	6. Improve overall well-being
3. Improve social networks.....	7. Support following loss or major life change
4. Help alleviate symptoms of chronic pain or illness	
Please give any further relevant information that the artist may need to be aware of to ensure the safety and well-being of this patient and all patients taking part in the art activity (please continue overleaf if necessary)	
.....	
.....	
.....	
Name of patient's GP and practice	
.....	
Name and profession of referring health professional (if different from above)	
.....	
Tel.....Email.....	
PLEASE NOTE WE REQUIRE ALL REFERRING PROFESSIONALS TO PROVIDE ALL CONTACT DETAILS	

PLEASE NOTE THAT ARTLIFT IS NOT CLINICALLY RESPONSIBLE FOR THE REFERRED PATIENT, AND THAT BY SIGNING THIS FORM YOU CONFIRM THAT THE PATIENT HAS BEEN RISK ASSESSED BY YOU/THEIR GP TO BE SUITABLE TO ATTEND THE FLOURISH PROGRAMME.

I recommend that the above patient is suitable to attend the Flourish Programme and I understand that Artlift is a non-clinical intervention in a community setting.

► Signed (by referring Health Professional)..... Date

PART C: Patient consent (MUST be completed by the patient before attending the art activity**)**

I consent to participation in the Flourish project, in which I will have the opportunity to work with an artist in a group setting over 8 sessions (+ a taster session if so desired). I consent to the release of relevant medical and personal information about myself to be shared with the artist. I understand that this project is being evaluated and that my personal details will not be passed on to a third party, though my records will be used anonymously for statistical and research purposes. Artlift abides by data protection safeguards, and while I am referred to the project, I may be contacted by Artlift by mobile phone to send text reminders about sessions, or for any other relevant reason.

► **Signed (by patient) Date.....**

Thank you for filling in this form which is both a risk assessment and evaluation data collection tool.

Referral instructions:

Please either:

- (i) Complete and email (if password protected) this form to referrals@artlift.org
- (ii) Complete and post to: Referrals at Artlift, PO Box 1217, GL50 9WQ
- (iii) Complete and email the form to s.burling@nhs.net (nhs.net to nhs.net)

UPON RECEIPT OF THIS FORM the Artlift Referrals Officer or the artist will call the referred patient to introduce the Flourish programme, discuss any access or other additional needs and will provide information about the dates and venue for the programme.

For further information about the work of Artlift, please see www.artlift.org, call 03000 200 102 or email referrals@artlift.org

Appendix 2 Interview schedule

1. What activity did you do when you took part in Flourish?
2. Can you tell us why you decided to take part in Flourish?
3. How did you hear about it?
4. How did you get referred?
 - a. Was the referral to Flourish simple?
 - b. Is there anything that could be improved about the referral process?
5. What did you think the experience of taking part in Flourish would do for you?
(prompts: physically? Emotionally? Socially?)
6. How do you feel it has actually helped?
7. What do you think about it now, that you have taken part?
8. What have you have experienced over this time of your involvement in Flourish?
9. What do your family and friends think about you taking part in Flourish?
10. Has there been anything that you have experienced that you didn't expect?
 - a. What was this?
11. Can you tell me about your experience of the following:
 - a. The venue of Flourish?
 - b. Any issues with transportation?
 - c. The facilities?
 - d. The way the class was run?
 - e. The other people?
 - f. The artist?
 - g. The support worker from Macmillan
 - h. How do you feel about Flourish sessions being held here? Anything else?
12. Did you enjoy participating in this programme?
 - a. What are the things that you enjoyed most?
 - b. What are the things that you least enjoyed?
 - c. Why didn't you enjoy them?

- d. Did this change at all during your time on the programme?
- 13. Now that you have been through Flourish, what do you think will happen going forward? (individually and as a group) Prompts as below if necessary..
 - a. Do you think you will keep in contact with people?
 - b. Do you think you might continue with the art? Individually or with a group?
- 14. Would you like to continue doing Arts? Why? And what type of Art?
 - a. What could support you to do this?
- 15. To help us improve this programme, what changes for the future would you suggest?
- 16. How would you have felt if you had been asked to contribute financially?
 - a. Would being asked to make a contribution acted as a barrier to participating?
 - b. If so how much, per session? £1 † £2 † £3 † £4 £5