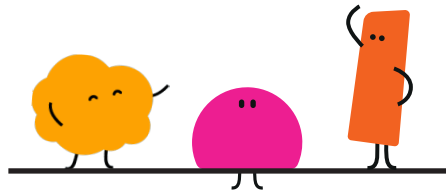


'just' play?



A symposium on play in
children's healthcare

23rd March 2023

Summary of proceedings

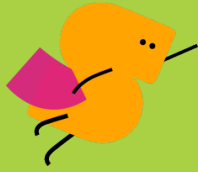
STARLIGHT



UNIVERSITY OF
CAMBRIDGE
Faculty of Education



PLAY IN EDUCATION DEVELOPMENT AND LEARNING

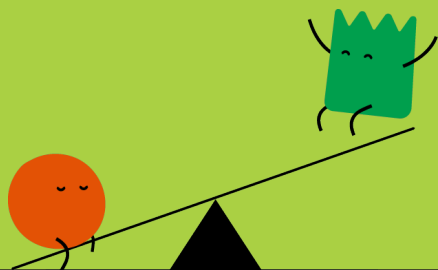


“To play it out is the most natural
auto-therapeutic measure
childhood affords”

Erik Erikson

“Playing is itself a therapy”

DW Winnicott



Welcome and introduction

Symposium Chair

Professor Paul Ramchandani



It was a pleasure to host this joint symposium on Play in Health Care here at the University of Cambridge. Both organisations, Starlight and the PEDAL Centre, share a passion for understanding and promoting the role of play in children's lives.

I've spent most of my career working in and around hospitals and clinics in the NHS with children and families. These places are full of hard-working people trying their best to provide the best possible services for children, in often challenging circumstances. But we can do more to make them places that feel welcoming, safe and good places for children.

A few years ago I worked at Amersham hospital. At that time it was a relatively small hospital, but it has a special place in the history of children in hospital in the UK, because it was there, in the 1950s, that Joyce and James Robertson filmed their short documentary, 'A Two Year-Old Goes To Hospital'. This, coupled with campaigning by a dedicated group, led to huge change in healthcare and paved the way for parents to be allowed to stay in hospital with their children. Something that had previously been discouraged. I think it's hard to overstate the benefits that this change had for children and their experience of hospital stays.

In many ways the drive to improve the environment of hospitals further, to improve opportunities for play for children and to train staff to engage with children in playful ways, continues that mission that the Robertsons' started many years ago. It is all about trying to improve the experience for children during what is always going to be a challenging time for them and their families.

ABOUT THE SPEAKER



Paul is LEGO Professor of Play in Education, Development and Learning, and the Director of the PEDAL Centre.

Paul leads a research team investigating the role of play in children's early development. He also works as a Consultant Child and Adolescent Psychiatrist in the UK National Health Service.

His research is focused on early child development with a particular interest in how we give children the best start in life, including the prevention of emotional and behavioural difficulties.

KEYNOTE PRESENTATION



'Somewhere over the rainbow'

Supporting children's agency in their own treatment

Professor Imelda Coyne

SUMMARY

Professor Coyne drew on her many years of professional practice and academic research in the field of children's healthcare to suggest a re-positioning of play at the forefront of practice, research, and policy.

Her talk addressed the following topics, drawing on her own and others' research evidence:

- The effects of hospitalisation on children.
- Children's participation in communication and shared decision-making.
- The importance of taking a child-centred approach and how play is essential in this.
- How play can support children's agency and participation.
- How play enhances children's experiences of healthcare, wellbeing and quality care provision.
- The benefits of, and challenges to play within hospitals.
- Suggestions on how policy for children's healthcare can better respond to research findings in this area.

ABOUT THE SPEAKER



Professor Imelda Coyne PhD, MA(Jure), BSc (Hons), HDip N (Hons), RSCN, RGN, RNT, FTCD, FEANS, FAAN is Professor in Children's Nursing and Director of Trinity Research in Childhood Centre.

Imelda's research focuses on understanding and highlighting children's agency, preferences and needs within healthcare. A central theme includes the promotion of children's participation through participatory techniques, play and creative co-designed interventions. Previous studies have focused on child and family-centred care, shared decision-making, interventions, chronic illness support and transition for youth with chronic conditions. She believes it is essential that we find ways to elicit children's voices. She is the co-author of 'Being participatory: Co-constructing knowledge using creative techniques' (2018)



SHORT PRESENTATIONS



The 'state of play' in hospital

What new mapping data reveals about the provision of play services in UK healthcare

Dr Sandra Cabrita Gulyurtlu

SUMMARY

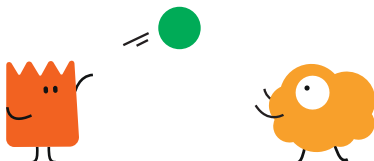
The importance and impact of play in healthcare is well documented in the literature and also highlighted in NICE guidance (2021). This presentation shone a light on the nature and extent of play services in hospitals in the UK. Following an extensive FOI request to every NHS Trust and Health Board across the UK, Starlight has been able to start mapping the 'state of play'. The emerging findings of this exercise were presented, showcasing the resourcing of play in hospitals and other settings, levels of staffing and the prevalence of guidance for play in healthcare across the country. The research highlights disparities in provision as well as significant gaps in protocols and guidance for play in healthcare settings. The mapping data is an important source of information for the taskforce on children's play in healthcare and all those interested in the quality and equity of children's experience.

ABOUT THE SPEAKER



Dr. 'Sandy' Gulyurtlu FRSA, is Head of Insights and Impact at Starlight Children's Foundation. She has a PhD in Social Policy, MSc in Childhood Studies, and a BSc (Hons) in Psychology and Physiology.

Sandy has long worked for the voluntary sector and academia, conducting research into rights, welfare, safeguarding and well-being to create better outcomes for children and young people. Throughout her career she has developed pioneering research on policy, innovation, and civic action, understanding vulnerability and inequality and how people across society are working to make change happen which has led to changes in legislation, policy, and practice. She was previously Head of Research for the Office of the Children's Commissioner for England.



Working for change in health play

An overview of the Taskforce on Children's Play in Healthcare

Kate Pye

SUMMARY

The presentation provided an overview and current progress report of the Taskforce, which was jointly convened by Starlight and NHS England in October 2022. The taskforce has an executive group comprising the royal colleges of nursing and paediatrics, the national association and educational trust for health play specialists, the Care Quality Commission and the independent charity, Sophie's Legacy. Reporting to this group, chaired by NHSE and Starlight, are three distinct workstreams, each comprising 15-20 sector specialists working on the following themes and outputs:

1. National guidance on children's play in healthcare for commissioners and service providers.
2. National standards for health play services.
3. Accreditation and workforce development.

Good progress is being made in each of these areas and the taskforce will report its key findings and recommendations at the NAHPS (National Association of Health Play Specialists) conference on 23rd June 2023, with a full report following later in the year.

ABOUT THE SPEAKER



Kate Pye, RN Child, BSc Child Health, MSc Advanced practice, is Deputy Director for Children and Young People's Nursing at NHS England.

Kate is a qualified children's nurse with thirty years' experience in the field of Children and Young People's (CYP) Nursing, she is currently the Deputy Chair for the Association of Chief Children's Nurses. Kate works for the Chief Nursing Officer for England, Dame Ruth May, and acts as the CYP nursing advocate in many differing arenas and across systems. She also works across the CYP Transformation team on some of the NHS Long-Term Plan workstreams including mental health and reducing inequalities.



Where have we come from and where are we going?



An historical perspective on play in healthcare
Julia Whitaker

SUMMARY

Over the past 150 years, the care of sick children has evolved to a point where play is recognised as a key element of paediatric provision in the UK and in many nations of the world. Julia took us on a whistlestop tour from the harsh conditions of children's healthcare during the first half of the 20th Century, through the reforms of the Platt Report of 1959 and the first hospital play schemes, to the aspirations of the Hogg Report (1990) and the National Service Framework for Children (2003). What have we learned and where do we go from here?

ABOUT THE SPEAKER



Julia is the Registration Coordinator for the Healthcare Play Specialist Education Trust (HPSET) and an independent researcher and writer. She has a background in social work, family therapy and healthcare play specialism with over 35 years' practice and teaching experience in both public and private sectors.

In 2013, she stepped aside from clinical practice to focus on research and writing and, together with Alison Tonkin of Stanmore College, she has co-written and co-edited three books exploring how play and playfulness impact health and wellbeing across the lifespan (Routledge, 2016, 2019, 2021). Their latest book, *Play and Health in Childhood: A Rights-based Approach* will be published in September 2023. Julia has contributed to various journals and her chapter, *Defining Play in the Healthcare Context*, appears in *Handbook on Play Specialism Strategies to Prevent Paediatric Hospitalization Trauma*, edited by Perasso and Ozturk (IGI Global, 2022).

Julia lives with her family in Edinburgh where she practises ballet and yoga and enjoys walking in the hills.

What play specialists mean to children in hospital

A parent and child perspective on the people who support them through play

Charlotte Fairall

SUMMARY

Charlotte related the moving personal story of her daughter Sophie's experience of being diagnosed with aggressive cancer and her subsequent care, treatment, and death. She spoke about Sophie's spirit and character and how playing, and the support of play specialists, was so important to her while she was in hospital. She could not understand why this support was not available to all children in healthcare seven days a week. She spoke of the inspiring legacy that Sophie left, and her determination to campaign for other children and families to be better supported through their healthcare journeys.

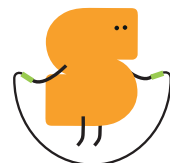
ABOUT THE SPEAKER



Charlotte is the CEO of Sophie's Legacy, an independent children's charity. Charlotte was a children's social worker for 16 years, working for two charities before being employed with Hampshire and Southampton local authorities in child protection and then adoption.

When her 9-year-old daughter Sophie was diagnosed with cancer (rhabdomyosarcoma) in September 2020, Charlotte gave up work to care for her daughter. Sophie sadly died on 18th September 2021, aged 10.

Charlotte and her husband set up the charity, Sophie's Legacy, to try and achieve the national changes that Sophie wanted to make as part of her 'bucket list', including play specialists being available 7 days a week in hospitals.



Childhood in the hospital

Children's perspectives on play during hospitalisation

Kelsey Graber

SUMMARY

In this presentation Kelsey described a qualitative research study which utilises ethnographic observations and semi-structured interviews to gain insight into children's own views and experiences of what it is like to play in hospital.

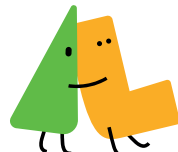
Video clips and quotes were shared to elucidate ways in which children's perspectives can contribute to our understanding of the role and value of play in hospital environments.

ABOUT THE SPEAKER



Kelsey is a final year PhD student at the University of Cambridge's PEDAL centre, supervised by Prof Paul Ramchandani and Dr. Christine O'Farrelly. Her background is in developmental psychology and neuroscience.

Prior to joining PEDAL, Kelsey worked as a researcher at the Yale Child Study Centre and Boston Children's Hospital. Kelsey's doctoral research focuses on play and children's healthcare, looking at children's own perspectives on play during the COVID-19 pandemic and play amidst paediatric hospitalisation.



Supporting neurodivergent children through play

Dr Margaret Holmes Laurie

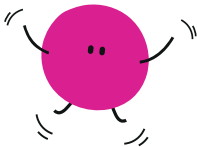
SUMMARY

All children learn best through play, including neurodivergent children, who experience and interact with the world differently. In this presentation, Dr Laurie explained what neurodiversity is and the intersection of play and neurodiversity. She then shared some of her research on how we can support neurodivergent children to learn through playing with manipulatives – both digital and non-digital. She introduced the Brick-by-Brick programme, the most up to date and neurodiversity-affirmative version of LEGO-based therapy for neurodivergent children.

ABOUT THE SPEAKER



Margaret Laurie is the Research and Evaluation Lead at Play Included, the leading organisation in play-based programmes for supporting neurodivergent children. Before joining Play Included, she did a PhD at the University of Edinburgh focusing on how technologies can facilitate socially interactive play in autistic children, and then worked at the LEGO Foundation on developing measures of quality learning through play experiences through children's eyes.



Can you integrate play in the design of a children's hospital?

Dr Thomas Leth Frandsen, MD

SUMMARY

Dr Frandsen described how Mary Elizabeths Hospital in Copenhagen, Denmark, is focusing on integrating play into its overall design: building, environment, organisational culture, workflows, and research. The centrality of play arises from the holistic view of the patient which underpins the hospital's ethos. User needs and user involvement have been the key priority of the project from the beginning.

Patients and staff in children's hospitals around the world already use play actively during procedures, treatment, patient education and through adaptation processes. Dr Frandsen highlighted how the aim of this project is to demonstrate how this can be more systematic and integrated into the daily life of the hospital.

ABOUT THE SPEAKER



Dr Thomas Leth Frandsen, M.D., PhD is the Chief Medical Project Officer at Mary Elizabeths Hospital, Rigshospitalet, Copenhagen. He is an active clinical researcher in Childhood Leukaemia as well as in the use of play in hospitals. Previously he was head of the Paediatric Haematology and Oncology Department at Rigshospitalet, Copenhagen.



Visualising the position inhabited by health play specialists within the multidisciplinary team

Catherine Hubbuck

SUMMARY

Health play specialists (HPSs) are a uniquely trained group of healthcare professionals working within MDT's (multidisciplinary teams) in healthcare in the UK and Ireland, and beyond. This leads to them having an approach and method that is also unique, although often complimentary to the therapeutic input of other colleagues - nursing, medical and allied health professionals – who are also involved in a child's care.

This presentation explored and visualised the theoretical base for this unique role, providing a lens through which the rationale for HPSs' work with babies, children and young people and their families can be viewed.

ABOUT THE SPEAKER



Cath is a registered health play specialist, qualified since 2001, after the completion of a degree in Early Childhood Studies at Bristol University. She is currently employed by Starlight as Health Play Specialist Programme Manager. Prior to this position Cath was a consultant to the Taskforce on Children's Play in Healthcare, working to produce guidance to NHS commissioners and providers.

Cath has worked in hospitals around the UK, gaining experience of working with children in various clinical settings. Over many years, Cath has written about play for children and young people in hospital, taught and mentored students training to be health play specialists and spoken at conferences in the UK and internationally.

Cath was selected as a representative of the HPS profession in the development of the current NICE guideline on Babies, Children and Young People's Experiences of Healthcare.

Her favourite dinosaur is an ankylosaurus which – it turns out – is actually the most important thing about her.





CALLS FOR ACTION

Session led by Dr Christine O'Farrelly,
UKRI Leaders Fellow and Senior Research Associate,
PEDAL.



What children need from national policy for play in healthcare

Group A

Facilitated by Kelsey Graber, PEDAL

Broad-scale education

This group commented that in healthcare there is a general understanding of what a doctor does, what a nurse does, what a physiotherapist does; but that this does not tend to apply to those working in the play sector. We discussed the need for educational curricula on two levels:

- a. **The role and value of play in healthcare:** ensuring that people within healthcare networks and at the policy level recognise play as part of healthcare delivery for children; from all backgrounds, in all settings, and should not be solely dependent on health play specialists.
- b. **The role and value of play teams/play specialists:** what integration of these teams can look like in practice and how it might benefit children's care, time spent on each patient, etc.

Communication

The group discussed the importance of knowing the goals and values of your audience when advocating for more play in hospitals. For example, policy makers may need higher-level, broadly-applicable information about play in childhood and paediatric healthcare than those who work in the NHS

The discussion also covered the value of change makers who can model good practice within their own hospital setting, as well as advocating for wider cultural change. The group recognised the value of this simultaneously bottom-up and top-down approach to advocacy.

Children's perspectives

Finally, the group spoke about the importance of integrating the voices, perspectives, and ideas of children and young people. It agreed that there is great value in sharing case studies and hearing individual's experiences (such as Charlotte's moving presentation about Sophie) to elucidate real-life scenarios of the value, applicability, and desire for play in hospital experiences.

Group B

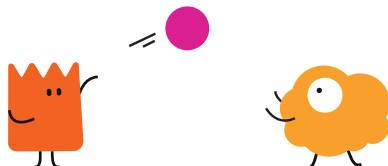
Facilitated by Adrian Voce, Head of Policy and Public Affairs, Starlight; and Paulina Pérez-Duarte, PEDAL

This group highlighted the wide disparities that exist in the status and reach of HPS's throughout the UK and its different regions. Resources are not distributed equally across the country, and there are also disparities between Community Play Specialists, Hospital Play Specialists and Hospice Play Specialists (depending on their individual charities). Funding is a constant challenge.

One of the problems identified was the constant necessity to justify the role of HPS's and the benefits they bring to healthcare settings. This was strongly linked to the lack of 'Play Policies'. Information that play teams might use to rectify this is often either unavailable, not up-to-date or very difficult to find. "I looked everywhere" is a common complaint.

Another problem is the lack or limited time that health play teams have to look for evidence. This occurs mainly when they need to prove the benefits of their profession within diverse working settings (e.g., hospital hierarchies). A possible solution suggested was to equip the profession with documents (e.g., policies, guidelines, and high-quality research evidence) to share with MDT colleagues and service managers. A central hub, reference point or platform where high-quality information is accessible to those in need to 'prove a point', would be very valuable. Some of the topics should include: scientific evidence (e.g., cost-benefit of play services); policy context; guidelines to improve clinical practices; play standards; academic literature and research evidence.

It is also necessary to provide support for HPSs interested in getting involved in research, including guidance on methodology and the steps required to go through the NHS ethics rollercoaster. In the long-term, advocacy should be aimed at increasing the ratios of HPSs to children.



What children need from local policy and practice for play in healthcare

Group C

Facilitated by Dr Krutika Pau, Director of Children's Services, Starlight and Sarah Owen, Policy and Public Affairs Coordinator, Starlight

This group believed advocacy was needed for several changes and improvements to local healthcare for children.

The voices of parents / carers and families should be given more space and be better listened to. Inspired by the example of Mary Elizabeths Hospital, there should be more holistic support for the whole child and its family.

There should be mandatory training for the MDT, on the role, value and impact of play and this should be integrated into paediatric competencies. There should be more systematic, play-based processes for ensuring children's voices are heard and responded to (Dr Frandsen's team will report soon on further work they are doing on this). Children's healthcare should adopt more trauma-informed ways of working, with appropriate communication to reduce long term trauma. This can have cost-benefits for the NHS.

Again, taking inspiration from the Mary Elizabeths Hospital, children's healthcare settings should ensure that the whole family has space to be with their child, with appropriate facilities, including sufficient beds for parents and siblings. Health play specialists (HPS) need better standards and accreditation, to be recognised and regulated by the government. The views of children and families already voiced should be better acted upon. The unique role of the HPS should be more valued and respected, and better resourced.

The human right of children to play when they are receiving healthcare should be an issue for children's commissioners who should be lobbied to advocate for improving the state of play in hospital. Clear and simple standards for health play services should be developed and adopted by all relevant healthcare providers. Advocates should highlight the economic benefits of play for the NHS: reduction of long-term trauma and services needed to support this; time-saving for procedures; and lessening the need for sedation. Health play provision should not be confined to children's hospitals but also available in district general hospitals and in all community healthcare settings, hospices and other settings used by children and families.

Group D

Facilitated by Laura Walsh, Head of Play, Starlight

This group made several suggestions for raising the status and recognition of health play provision:

The integration of play should be led by the whole MDT working with children, including clinicians and consultants. Strong leadership models and leadership roles for the play team should be adopted. Hospitals and other settings should develop and implement policies for play setting out the providers commitments on play in healthcare. These could draw on common principles but need to be owned and adopted locally. Settings should appoint play champions from within MDTs.

Training in play principles and practice should be mandatory as part of clinical induction for all children's settings. Sample business cases, citing cost-benefit evidence, would be helpful in securing resources for health play services. Guidelines on play advocacy and championing the voices of children would also be helpful.

Play practitioners and advocates should network at the MDT level, sharing information about training, research and practice developments. Play teams should aim to find time out of immediate practice needs for strategic development and advocacy; and be willing to resist incessant urgent demands for a service that is poorly resourced, insufficiently integrated and therefore unsustainable.



Closing Reflection

Cathy Gilman

In 2019, in response to numerous requests from play and health professionals, we introduced a new insights and impact team at Starlight, led by Dr. Sandy Gulyurtlu. Our aim was to help map and understand the state of play in UK healthcare. We wanted to surface inequalities and build a strong evidence base for the integral role of play in children's care and treatment. We found a real paucity of research.

Fast forward 4 years and it has been goose-pimply to co-host this inspirational symposium with Paul and his brilliant team at PEDAL. Our research has been transformed in that time, and it has been inspiring to see and hear about other great work from health, play and academic sectors. We have built on Sandy's early findings with experienced health play specialists to develop our services and a policy and public affairs team to lead a new advocacy role.

This symposium was a validation of these decisions. The involvement of NHS England, the excitement of our audience, and the reverberating power of the theme – that playing is vital to children's wellbeing and integral to their healthcare – all point to an important moment for this sector, with the promise of real, lasting change.

As much as the expertise and learning so evident in Cambridge, there was also a sense of the culture of the health play community. Playing is arguably the most authentic expression of our identity, the essence of who we are. We must believe this for ourselves if we are to fully serve the children and families we care for.

The 'Just' Play? symposium buzzed with the power of that culture and shone a bright light on the future of this important work, as we strive, in the words of Dr. Frandsen, "to ensure that children live every day, even when they are sick".

ABOUT THE SPEAKER



Cathy joined Starlight in September 2017 having been CEO of Blood Cancer UK for 10 years and a Director at the Willow Foundation. She joined the charity sector as a volunteer in 1999 following the death of her 8-year-old cousin from leukaemia. She is on a mission to help improve the lives of families affected by serious illness, ensuring children experience a good childhood despite really challenging circumstances.

The symposium team

The programme was curated by a joint committee comprising:

Professor Paul Ramchandani, PEDAL

Kelsey Graber, PEDAL

Dr Krutika Pau, Starlight

Adrian Voce, Starlight

Dr Sandy Gulyurtlu, Starlight

The event organising team was led by Liberty Valance, Starlight, and Kelsey Graber, PEDAL; and the overall symposium project was managed by Adrian Voce, Starlight.

For further information

To follow the progress of Starlight's advocacy work for change in children's play within the healthcare system, please visit our website or follow us on social media.

www.starlight.org.uk



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ABOUT STARLIGHT

Starlight is the national charity for children's play in healthcare. We support children to enjoy the power of play to boost their wellbeing and resilience during treatment, care and recovery from illness.

Our mission is to enable all children in the UK to have their right to play protected and provided for when they are receiving healthcare – in or out of hospital. Driven by our research and insights into what works best for them, we provide direct support to many of these children and their families; and to the health professionals working with them.

We also advocate for more and better health play services and promote the full recognition of health play practitioners as an integral component of the children's health workforce.



ABOUT PEDAL

The Centre for Research on Play in Education, Development and Learning (PEDAL) is based in the Faculty of Education at the University of Cambridge. The PEDAL team conducts evidence-based research to understand how play benefits children, families, and communities.

By investigating the nature and power of play, and by learning from those who engage in play, PEDAL research aims to inform both policy and practice to improve children's lives around the world.

PEDAL's work is supported by its founding funder, the LEGO Foundation, as well as additional funding bodies including NIHR, Nuffield Foundation, UKRI, The British Academy, and The Cambridge Trust.

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