



# A Friend in Need

An independent impact evaluation of hospital, health and wellbeing broadcasting in the UK

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Research undertaken by:  **The Researchery** **shortwork**

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### For further information:

A summarised version of this report is available to view and download at [hbauk.com/impact](http://hbauk.com/impact).

*"I received a letter from a family whose father was on one of the wards. He wasn't expected to live for very long... The family knew the music that he liked so they requested a record that was played that evening for him to listen to... the letter said: 'thank you so much for playing the record and it was the first time in several days that we've actually seen him smile and he actually spoke to us... At the end of the record, he took the headphones off and said 'they mentioned my name and they were playing my music' and thanked the rest of the family for requesting the record. That night he passed away. They said it was their lasting memory of him: the smile and the thank you and the excitement he got from listening to the record."*

**(Volunteer, Radio Hillingdon)**

# Executive Summary

Ten years after the first study, the Hospital Broadcasting Association (HBA) commissioned a second independent evaluation of the impact of hospital, health and wellbeing broadcasting in the UK. A UK-wide study was carried out, involving over 270 individuals, including patients and their families, clinical, administrative and management staff in hospital, and with the hospital broadcasting volunteers themselves. The research revealed that:

- **Hospital, health and wellbeing broadcasting is changing:** While the heart of hospital, health and wellbeing broadcasting remains 'hospital radio', the COVID-19 pandemic precipitated several far-reaching changes, from remote broadcasting to expanded ways to listen and broader content. As a result, many stations are making strategic decisions to reposition themselves and their programming to be more appropriate to a wider community audience.
- Hospital, health and wellbeing broadcasting has a **positive impact on psychosocial health outcomes for patients:** **Entertainment** is provided through the variety of music and other broadcast content tailored to listeners; hospital broadcasting creates connections between patients, staff, and volunteers, providing much needed **social interaction**; friendly voices and familiar music provide a sense of **calm and reassurance**, acting as a 'virtual friend'; broadcasting strengthens patients' sense of **connection and belonging** during their stay, with local news and interactive features helping them to maintain a connection with their lives and people outside; it helps people to **feel like an individual** with personalised song requests and conversations with volunteers; and it enhances **health and wellbeing** by reaching audiences at the point they need information most in an accessible way.
- Staff who listen to hospital, health and wellbeing radio **understand its importance for patients**, and also report some **positive benefits for staff**, although there was relatively low awareness and few opportunities to listen in.
- Hospital, health and wellbeing broadcasting has multiple positive benefits for volunteers: from creating a sense of purpose, giving something back, meeting new people and feeling part of a family of volunteers, to learning new skills.
- Hospital, health and wellbeing broadcasting is creating positive impacts in the wider community by supporting the prevention agenda, providing a virtual social lifeline for the elderly, bringing the community together and making local connections, and being a mouthpiece for the community.
- Key to the success of hospital, health and wellbeing broadcasting is the **strength of the relationship between the station and the hospital or healthcare setting:** While some stations have developed great relationships with individuals who champion radio at Trust or Board level, and enjoy a good profile and recognition for their contribution as a result, many stations are feeling undervalued and overlooked.
- The **future of hospital, health and wellbeing broadcasting is not unidirectional:** It is on many different paths, with stations adapting to their different contexts and building on their strengths. Some are deepening their commitment to delivering innovative broadcasting within a hospital setting, while others are taking their stations firmly beyond the hospital walls', onto DAB/AM-FM/Online, and becoming a full community radio station; and many are somewhere in between.
- Stations face a number of **challenges** (including listener engagement and raising awareness, evolving technology, volunteer recruitment and funding), but also have many **opportunities** to explore (including new ways of broadcasting, the increasing appetite for podcasts and other ways of listening, and the advantages of opening up to a community audience).

## Recommendations

Based on this evaluation, we have put forward a number of recommendations for stations:

- Establish regular, structured meetings with volunteer liaison officers and with NHS Trust or Board members.
- Proactively cultivate personal relationships with ward and clinical staff.
- Explore and formalise links with community health, social prescribing and loneliness initiatives
- Undertake basic local audience and stakeholder mapping.
- Showcase and share successful fundraising and community engagement models.
- Regularly collect and share patient, volunteer, and staff feedback.

## Background and Approach

### Background context

The Hospital Broadcasting Association (HBA) is the national charity that supports and represents a network of around 160 independent hospital, community and other health and wellbeing broadcasting organisations across the UK. Most members are independent charitable organisations, often based within NHS hospitals, staffed and managed entirely by volunteers, with the aim of aiding patient recovery and promoting health and wellbeing to all listeners.

In 2016, HBA commissioned its first impact study into hospital broadcasting: a UK-wide study involving over 250 individuals including patients, staff and hospital radio volunteers<sup>1</sup>. Key findings revealed that hospital broadcasting significantly reduced boredom, loneliness, and anxiety among patients, enhanced their sense of belonging, and made them feel like individuals. It also raised health and wellbeing awareness. The report highlighted the potential social value hospital radio generated and offered recommendations for enhancing its impact through awareness and partnerships.

Since 2016, there have been significant changes in the way that hospital, health and wellbeing broadcasting operates in the evolving landscape of the NHS and the wider healthcare ecosystem. With more care being provided in community settings and outside traditional hospital environments, HBA members have expanded their charitable work to include local community impact. Many have ventured into community radio (small-scale DAB or FM, and online broadcasting), or broadcasting to other healthcare settings in the community (e.g. GP surgeries, health centres, dentists waiting rooms, care homes). There have also been further advancements in 'hospital radio' in its traditional form, partly born of necessity as a result of the COVID-19 pandemic.

Due to these changes the HBA commissioned a new independent impact evaluation from *The Researchery and Shortwork* to revisit and reassess the impact of hospital, health, and wellbeing broadcasting in 2024/2025, updating the previous impact study.

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<sup>1</sup> Thomas, J. & S. Coles (2016) Hospital Broadcasting: An impact study. Performance Consultancy & HCL.

## Fit for the Future?

With NHS England, NHS Wales, NHS Scotland, HSC Northern Ireland and devolved governments developing new plans for more integrated healthcare across the UK, it is an appropriate juncture to evaluate where hospital, health and wellbeing broadcasting fits in. These national health plans centre around more community-based and preventative care, better wellbeing and greater digitalisation<sup>2</sup>. These three radical shifts are closely aligned with the very things that hospital radio stations have been doing themselves since the last impact report ten years ago.

Hospital broadcasting across the country had been moving 'from hospital to community' well before the unveiling of the new 'Neighbourhood Health Service' (in England), with many expanding into broadcasting as community radio stations and/or moving into new settings, like care homes, GP surgeries and health centres where they can reach more people outside of hospital walls.

Digital innovations have been rolling out across the hospital, health and wellbeing broadcasting network putting more control in the hands of radio volunteers and patients; from using technology like voice-tracking that allows volunteers to easily record shows from home, to many stations migrating to Small Scale DAB, developing apps and website streaming. Finally, the shift to a focus on prevention, is fully complemented by new hospital broadcasting programming. On our site visits, we spoke to clinicians developing their own podcast series for dissemination on hospital, health and wellbeing radio and for distribution on podcast hosting platforms, and to many presenters running short healthy eating, mobility, smoking cessation, and other health and prevention-related segments on their programmes.

With many stations ambitious to expand their reach – whether that means broadcasting in all appropriate wards, public and staff areas, or broadcasting directly to the wider community and/or other healthcare settings – the potential for preventative health messaging to reach many more people, if sufficiently championed and resourced, is obvious. Hospital, health and wellbeing providers can make better use of these stations' technology, audio studios, and engaged, passionate volunteers to complement their existing communications. Hospital, health and wellbeing broadcasting today is not 'just' live radio, but is a platform for short- and long-form programming, podcasts and on-demand content, that can create a way to listen to programmes for a long time to come.

## Literature update

In the intervening years since the last evaluation, it is increasingly being recognised that health outcomes are affected by various psychosocial factors in the patient experience, including loneliness, boredom, anxiety,

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<sup>2</sup> NHS England 10-year health plan for England 'Fit for the Future' (<https://www.england.nhs.uk/long-term-plan/>); HSC Scotland's 'Health and Social Care Integration' (<https://hscscotland.scot/integration/>); The Welsh Government's 'A healthier Wales' (<https://www.gov.wales/sites/default/files/publications/2021-09/a-healthier-wales-our-plan-for-health-and-social-care.pdf>); and HSC Northern Ireland's 'Towards a more integrated social care system' (<https://www.agendani.com/towards-a-more-integrated-social-care-system/>).

sense of control, sadness, anger and disorientation<sup>3</sup>. Recent evidence confirms that in-hospital psychological stress, loss of control and unmet social needs are associated with poorer outcomes and higher service use<sup>4</sup>, while evidence from Hospital-at-Home models shows equal or better patient outcomes with lower anxiety/depression, relevant to patient experience and length of stay aims<sup>5</sup>.

Other evidence reveals that in wider community settings such as care homes, auditory interventions including music and radio, have been shown to enhance residents' mental health by reducing isolation and promoting cognitive engagement; while reducing ambient noise (e.g. through bedside radio or connected headphones) can improve patient outcomes, aiding in wound healing and reducing rehospitalisation rates due to improved sleep and lower stress levels for patients and staff<sup>6</sup>.

The patient experience is not only about direct clinical interaction but also about the care environment, communication, and access to meaningful occupation and distraction – domains where hospital, health and wellbeing broadcasting contribute. Evidence from recent systematic reviews shows that interventions like healthcare broadcasting can positively influence recovery trajectories, quality of life, and service use.

## Approach

A multi-method approach was adopted including quantitative and qualitative methodologies to gain insight into the impact of Hospital, health and wellbeing Broadcasting. This included:

- An evaluation framework
- Online surveys
- Site visits across Britain (including radio stations and hospitals)
- Telephone interviews
- Workshop session at the annual HBA conference
- Rapid literature review

Insights were gathered from the following people:

- Hospital, health and wellbeing radio station volunteers (59%)
- NHS staff (32%)
- Patients and families (7%)

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<sup>3</sup> E.g. British Medical Association (2011) *The Psychological and Social Needs of Patients*. London: BMA Marketing; Holt-Lunstad J, Smith TB, Baker M, Harris T, Stephenson D. Loneliness and social isolation as risk factors for mortality: a meta-analytic review. *Perspect Psychol Sci*. 2015 Mar;10(2):227-37. doi: 10.1177/1745691614568352. PMID: 25910392; NHS England (2021) *Health Survey for England, 2021 Part 2* (<https://digital.nhs.uk/data-and-information/publications/statistical/health-survey-for-england/2021-part-2/loneliness-and-wellbeing>).

<sup>4</sup> Ford, D.M., Budworth, L., Lawton, R., Teale, E.A., & D.B. O'Connor (2023) *In-hospital stress and patient outcomes: A systematic review and meta-analysis* (<https://doi.org/10.1371/journal.pone.0282789>).

<sup>5</sup> Arsenaault-Lapierre G, Henein M, Gaid D, Le Berre M, Gore G, Vedel I. Hospital-at-Home Interventions vs In-Hospital Stay for Patients With Chronic Disease Who Present to the Emergency Department: A Systematic Review and Meta-analysis. *JAMA Netw Open*. 2021 Jun 1;4(6):e2111568. doi: 10.1001/jamanetworkopen.2021.11568. PMID: 34100939; PMID: PMC8188269 (<https://pmc.ncbi.nlm.nih.gov/articles/PMC8188269/>).

<sup>6</sup> Joseph, A. & R. Ulrich (2007) *Sound Control for Improved Outcomes in Healthcare Settings*. The Center for Health Design (<https://www.healthdesign.org/sites/default/files/Sound%20Control.pdf>).

- HBA trustees (1%)
- Senior representatives of NHS trusts / boards (0.5%)
- Members of the local community working with the radio stations (0.5%)

Hospital, health and wellbeing broadcasting stations in all four nations were involved in the research and site visits took place in Scotland, Wales and across England:

- England: Winchester Radio, Radio Hillingdon, York Hospital Radio, Radio Horton (Oxfordshire), and Torbay Hospital Radio.
- Wales: South Wales (Rookwood Sound), North Wales (Radio Ysbyty Gwynedd).
- Scotland: HBS Glasgow.

Two of the stations we visited hosted other hospital radio stations to take part in a regional focus group. For the South West, we spoke to volunteers from Torbay Hospital Radio, Exeter Hospital Radio, Plymouth Hospital Radio, CHBN, and Life Care Radio. In Glasgow, we spoke to volunteers from HBS Glasgow, Care Sound Radio (Perth), and Ayr Hospital Radio. So, when we reference ‘Glasgow’ and ‘Torbay’ volunteers, especially when attributing quotations, the actual speaker may have been a member of a different local radio station.

Survey responses were received from 80 stations, representing around 50% of all HBA members; while around 90 individuals associated with hospital, health and wellbeing broadcasting stations were engaged directly through visits and follow up interviews. In addition, 71 NHS healthcare staff responded to a separate online survey circulated to NHS staff following our visits to each site, and a small number of patients and families were spoken to on hospital wards<sup>7</sup>. Throughout, when we talk about “stations” or “NHS staff” we are referring only to the stations/staff who responded to the surveys.

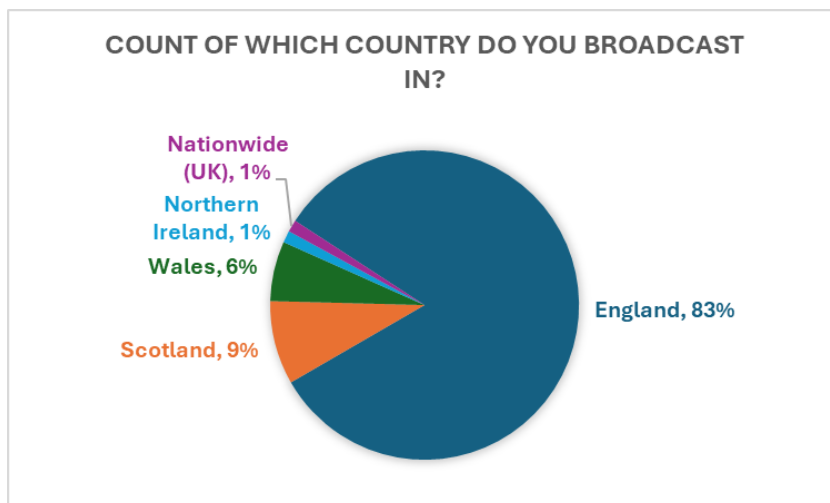


Figure 1: HBA members engaged in this evaluation

<sup>7</sup> Due to ongoing restrictions after the COVID pandemic, the number of patients we were able to speak to was limited. Nevertheless, we were able to access some patient feedback from stations themselves, including one station that gave us access to the responses to a recent listener survey.

# Chapter 1 The changing landscape of hospital, health and wellbeing broadcasting

*“Despite the ubiquity of smartphones and music streaming services today, and a decline in the number of stations over recent decades, hospital broadcasting is reinventing itself, with the COVID-19 pandemic emphasising its value.” (British Medical Journal<sup>8</sup>)*

*“Gone are the days when you have patients in bed for three, four weeks at a time ... and their sole source of entertainment is the little plug-in air tube stethoscopes [headphones] that they used to have.” (Volunteer, Radio Hillingdon)*

## Introduction: The catalysts for change

**Stat: 97% of stations felt that there has been some degree of change over the last five years, with 43% feeling that ‘almost everything has changed’.**

Since 2016, hospital broadcasting has experienced wide scale change driven by technological advances, hospital trust or board policy shifts, and COVID-19 restrictions. The pandemic accelerated the existing trends of declining bedside listening, shorter patient stays for elective procedures, and the move toward streaming and on-demand content, so that changes to hospital broadcasting that might have been taken place gradually over the course of a decade, instead happened much more quickly.

There have been three main catalysts for change in hospital broadcasting in recent years:

1. Overcoming operational challenges in hospitals, mostly brought on by COVID-19 and shifts in healthcare provision and policy;
2. Technological transformations that have introduced new tools and possibilities for stations, as well as competition for audience attention;
3. Increased focus on health and wellbeing messaging to improve the health literacy of both patients in recovery and as part of the prevention agenda.

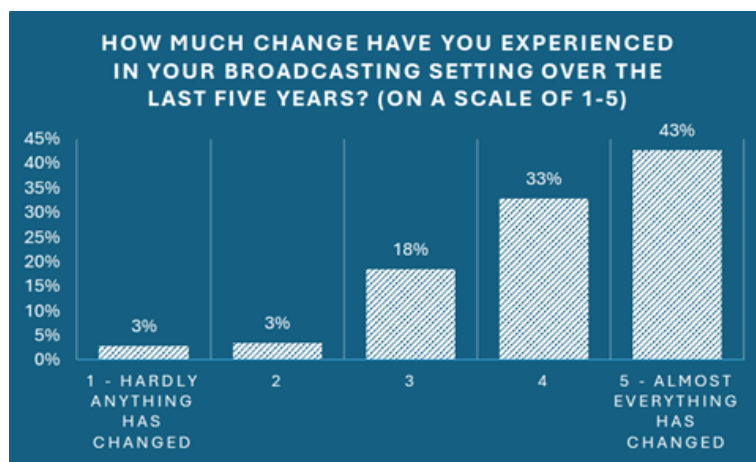


Figure 2: How much change has been experienced in your broadcasting setting over the last five years? (On a scale of 1-5) (Online survey, N=80)

<sup>8</sup> Hurley, R. (2024) From friend at the bedside to health adviser to all: how hospital radio’s ambitions are expanding. BMJ 2024;387:q2788, (<http://doi.org/10.1136/bmj.q2788>).

## 1.1 Changes to hospital operations

### Length of hospital stays

Many of the volunteers we spoke to told us anecdotally that the length of hospital stays in their setting had decreased over the years, meaning that some patients might not have the opportunity to discover hospital broadcasting, or have their song request taken by a volunteer ward-visitor.

The literature shows that during and immediately after the pandemic (comparing 2019 and 2022), the average number of nights for an in-patient elective procedure dropped slightly to 5.1 days, although the average length of stay in hospital overall actually increased 13%, to 8.3 days<sup>9</sup>.

Given that those in hospital for elective procedures are likely to be the main target audience for hospital radio, these changes will be noticeable. In addition, a policy shift towards providing care for people with mental health problems and learning disabilities in the community rather than in institutional settings, has seen overnight beds decrease by 73% and 97% respectively. Medical innovation, including an increase in day-case surgery, has also had an impact by reducing the time that many patients spend in hospital. These changes have resulted in a decrease in the total number of hospital beds of 44% since 1988.<sup>10</sup>

By contrast, among older patients the average length of stay has increased from 10.8 to 12.5 days among those aged 85 years and older<sup>11</sup>. This is the other main demographic for hospital radio listenership, leading to the conclusion that a focus on ensuring that they have access to radio, which isn't reliant on apps or streaming on personal devices, will remain imperative.

### Legacy impacts of the pandemic

**Ward visits ceased and slowed:** A core part of hospital radio volunteering is visiting wards to talk with patients, collect song requests, and promote awareness of the service. As a result of the COVID-19 pandemic, however, Trust-wide protocols paused all volunteer-patient contact to limit the spread of infection. In some hospitals, many such protocols are still in place, resulting in an effective ban on bedside visits. Of those stations not currently visiting wards (18%) over half cite institutional and COVID-era restrictions as the reason. The remaining half cited a shortage of volunteers; onerous administrative, bureaucratic, or safeguarding requirements; or changes in the station's strategic direction or how it is choosing to engage its listeners.

**Stat: One in five stations unable to visit wards.**

**Stat: An average of 5 hours per week are spent visiting wards.**

**Loss of premises:** During COVID, some hospitals repurposed spaces for urgent clinical needs and, as a result, some stations were evicted from their studios with very short notice. This highlights how hospital radio became a low priority when healthcare systems were overwhelmed.

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<sup>9</sup> Ewbank, L., Marszalek, K., Grimm, F. & C. Tallack (2023) Longer hospital stays and fewer admissions. The Health Foundation. (<https://www.health.org.uk/reports-and-analysis/briefings/longer-hospital-stays-and-fewer-admissions>).

<sup>10</sup> Ewbank, L., Thompson, J., McKenna, H., Anandaciva, S. & D. Ward (2021) NHS hospital bed numbers Past, present, future. The King's Fund. (<https://www.kingsfund.org.uk/insight-and-analysis/long-reads/nhs-hospital-bed-numbers>).

<sup>11</sup> Ewbank, L., Marszalek, K., Grimm, F. & C. Tallack (2023) Longer hospital stays and fewer admissions. The Health Foundation. (<https://www.health.org.uk/reports-and-analysis/briefings/longer-hospital-stays-and-fewer-admissions>).

## 1.2 Technological transformation

### Decline of Bedside Systems

Just over half (55%) of stations currently use the bedside entertainment systems (e.g. Hospedia, Hospicom or Spark TSL), while 89% are online and 86% can be listened to through personal devices such as mobile phones and smart speakers. This reflects changes happening at the ward level, as bedside systems in many hospitals are failing, breaking (without being replaced), or being withdrawn entirely. Many more patients are also bringing in their own devices. Combined with the growth in streaming and on-demand services, this means that bedside radios are no longer the default.

Yet while 86% of broadcasts are compatible with personal devices and 89% offer online streaming, patient engagement is relatively low: the median number of song requests across all patients in a hospital is 30 per week, and 30% of stations receive fewer than 10 requests per week. For a typical 500-bed hospital, that's roughly 4 patients per day actively engaging (under 1%). While bedside systems might seem old-fashioned, they do provide an opportunity for patients to passively discover hospital radio. With no bedside systems and restrictions on ward-visiting or putting up posters to promote the service because of infection control, it is likely that many people going into hospital never learn about its existence. At the same time, there is more competition for people's attention. One volunteer perfectly captured the issue: *"If I'm in hospital and I've got a phone, I'm gonna be watching iPlayer, I'm gonna be on YouTube."*

### Remote broadcasting revolution

*"Prior to COVID we had lots of people down here in the evenings, it was fairly active. Then COVID came along and then [...] everybody was remote voice tracking" (Volunteer, Radio Hillingdon)*

Over the past few years, one of the biggest changes in hospital radio has been the shift to remote broadcasting, with many volunteers now presenting or recording shows from home. Driven initially by COVID restrictions, this move to remote tracking allowed stations to keep programmes on air even when studios were closed, protect vulnerable volunteers, and include contributors who might previously have been excluded by travel, health or caring responsibilities. This transition has not only safeguarded continuity of service during the pandemic, it has also permanently reshaped how hospital radio operates. Many stations now run a hybrid model, blending live and pre-recorded shows from home with studio-based content.

### Multi-platform delivery

*"We've expanded the number of streaming platforms we are available on plus introduced a 'Listen Again' option for every show broadcast." (Volunteer, South West)*

**Stat: 53% of surveyed stations told us they had invested 'a lot' in new technologies and capabilities in the last five years, with a further 31% saying they had invested 'somewhat'.**

**Stat: 81% have expanded the ways in which listeners can access the broadcast.**

Many hospital broadcasting services are using new technologies to transform themselves from hospital-only broadcasts to reach not only former patients who continue listening after discharge, but also further into the community. Almost three-quarters (74%) of stations broadcast online, and 43% broadcast on SS-DAB, FM and/or AM radio. Ofcom's latest research shows that online listening continues to grow, and in 2023 overtook AM/FM for the first time, accounting for 28% of all live radio hours. Most listening is through smart speakers,

with the rest coming from other online sources including browsers and mobile radio apps<sup>12</sup>. Online live radio is the most listened-to content on smart speakers, accounting for just over half (55%) of time spent listening<sup>13</sup>.

To help extend their reach, many services are offering simultaneous broadcasting across traditional ward systems, DAB radio, online streaming, and smart speakers, to improve reach and accessibility. Many stations are actively exploring and implementing voice-activated technologies (Alexa, Google Nest), mobile apps and Wi-Fi speakers on wards to make access more intuitive and user-friendly, particularly for song requests and general listening. This is particularly important in light of over-85s now staying longer in hospital: the loss of bedside systems and not being as comfortable with personal devices means they are at risk of not having access to entertainment and company.

Many hospital broadcasting stations also provide on-demand access so patients can listen at their own pace and when they feel most comfortable. The services accommodate patients who may be awake at unusual hours or only feel well enough to listen at specific times. Various formats, such as apps, online links, podcasts, provide different ways for people to access content based on their preferences and technical capabilities.

There are some barriers to entry for stations, including training and licence fees, but the investment pays dividends in reaching more people: *“DAB fees are high, but it’s worth it for the reach beyond the bedside.”* (Volunteer, HBS Glasgow).

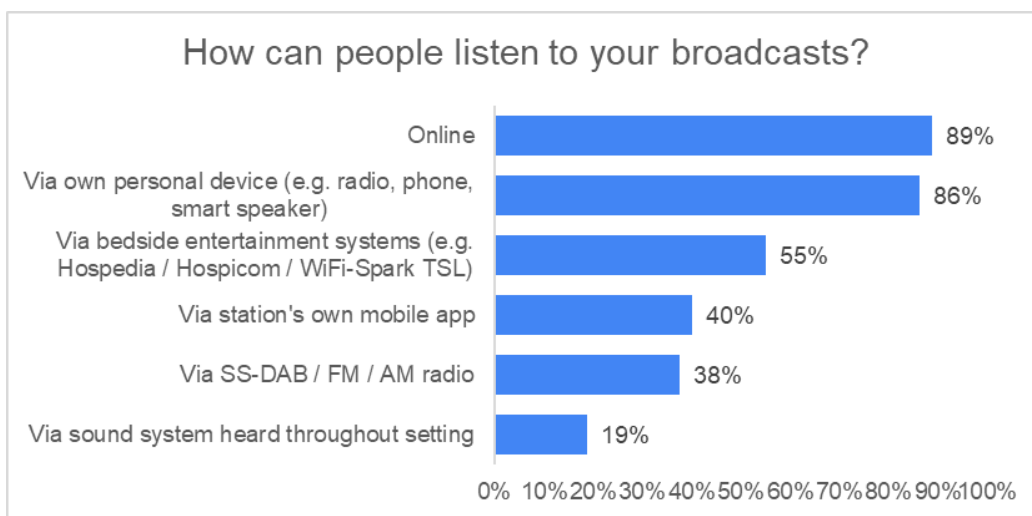


Figure 3: How many people listen to your broadcasts, by source? (Online survey, N=80)

### 1.3 Healthcare messaging

A 2024 article in the British Medical Journal<sup>14</sup> revealed that *“Hospital radio is evolving from offering companionship on the wards to bringing health and wellbeing broadcasting to the community ... By broadcasting beyond the wards to the public, hospital radio can reach increasing numbers of patients in*

<sup>12</sup> Ofcom (2024) Media Nations UK 2024 (<https://www.ofcom.org.uk/media-use-and-attitudes/media-habits-adults/media-nations-2024>).

<sup>13</sup> Ofcom (2024) Audio listening in the UK (<https://www.ofcom.org.uk/siteassets/resources/documents/research-and-data/data/statistics/2024/audio-report-2024/ofcom-audio-report.pdf>).

<sup>14</sup> Hurley, R. (2024) From friend at the bedside to health adviser to all: how hospital radio’s ambitions are expanding. BMJ 2024;387:q2788, (<http://doi.org/10.1136/bmj.q2788>).

*community care or on virtual wards, as well as recently discharged hospital inpatients who could benefit from the connection and health focused messaging."*

In the recent House of Lords debate on the Community Radio Order 2025, Lord Kirkhope highlighted how extending hospital radio services such as Radio Tyneside from serving patients within hospitals to broadcasting more widely enables these stations to pursue *"well-being and health outside of the health service"*, underscoring the valuable role that hospital radio can play in promoting health, wellbeing and social support through community-focused messaging as part of the broader community radio sector.<sup>15</sup>

Over the past decade in Great Britain, the NHS have increasingly recognised that improving health literacy - defined as people's ability to access, understand and act on health information - is crucial for effective prevention and to support recovery. This has included investing in public health information campaigns designed to help people stay well, adopt healthy lifestyles and manage their recovery. The Better Health programme provides accessible tools and advice on how to eat well, get active, quit smoking and drink less. These are supported by digital resources like Couch to 5K, Active10 and Stoptober. It also incorporates mental wellbeing under the 'Every Mind Matters' banner, with practical tips and personalised plans to help people manage stress, anxiety and to sleep better. These campaigns have been promoted widely through TV, radio and online channels to reach a broad audience<sup>16</sup>.

The COVID-19 pandemic highlighted just how important health literacy is. As public-health advice grew more complex (infection numbers, changing guidelines, risk messages), those with limited health literacy struggled more – raising risks of misunderstanding, poor adherence, or exclusion<sup>17</sup>. In response, information producers and health services across Britain renewed focus on clear communication, multiple formats, and accessibility – reinforcing health literacy as a key pillar of public health and recovery.

Hospital, health and wellbeing broadcasting has been playing its part in distributing these messages and many stations have made it an explicit focus to develop new, accessible programming and segments to improve the public's understanding of how to keep themselves healthy.

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<sup>15</sup> House of Lords debate on the Community Radio Order 2025, 3 February 2025. (<https://hansard.parliament.uk/lords/2025-02-03/debates/48AB3B06-73EB-47A1-A2B2-09EC87EF4F08/CommunityRadioOrder2025>)

<sup>16</sup> NHS (2020) Better Health (<https://www.nhs.uk/better-health/>).

<sup>17</sup> House of Lords Library (2020) CovidCOVID-19: Health Literacy and public health information.

## Chapter 2 The impact on patients

An evaluation framework was developed in collaboration with the Hospital Broadcasting Association to decide the domains and outcomes on which to focus. These domains built on the 2016 impact evaluation report, which detailed a number of psychosocial health outcomes for listeners (at that time only hospital patients) which could be improved by hospital radio, notably:

- Boredom reduced by entertainment
- Loneliness reduced by social interaction
- Anxiousness / frustration reduced by calming and reassurance
- Disorientation reduced by creating a sense of belonging
- Depersonalisation reduced by making one feel like an individual
- Health and Wellbeing awareness increased by providing information

The current study has found updated evidence of the continued positive impact of hospital, health and wellbeing broadcasting on such psychosocial factors, particularly in hospital patients. These also line up with hospital, health and wellbeing broadcasters' priorities for content.

### Station priorities

Hospital, health and wellbeing broadcasters were asked to rank their priorities when deciding what to broadcast. The responses emphasised the provision of distraction and entertainment, but also focussed on aiding patient recovery and promoting health and wellbeing. This also tallies with stations' ability to evidence their impact in the various priority areas.

Stations are much more aware of their impact in areas such as helping listeners feel less isolated, giving them the experience of tailored listening, being calming and reassuring, and improving their listeners' health and wellbeing awareness than in 2016.

*Table 1: What are the top priorities of hospital or healthcare broadcasters when deciding what to broadcast? (Online survey, N=80)*

Priority	Weighted average score /6
Providing patients/listeners with a distraction while in a healthcare setting	4.7
Providing entertainment	4.2
Aiding patient recovery	3.5
Giving listeners a choice in what songs are played on the radio	3.5
Promoting health and wellbeing	2.9
Broadcasting health education messages / content to prevent or relieve sickness	2.3

## 2.1 Entertainment

### Impact summary

Long hospital stays can severely impact mental well-being, contributing to feelings of anxiety, depression, and emotional stress. Such prolonged confinement often isolates individuals from their familiar routines, their friends, family, and other support systems, which are important for good mental health. This isolation, combined with the uncertainties of recovery and potential health issues, frequently results in persistent feelings of helplessness and diminished morale.

Hospital broadcasting provides vital and varied entertainment for patients, especially those with longer stays. Music requests help patients connect with happy memories and provide emotional outlets, while other programming provides variety. Volunteers report that patients appreciate having something to "take their mind off" their illness.

*"Music is therapy; it can take their mind off that moment, even if it's only three or four minutes."  
(Volunteer, Radio Hillingdon)*

*"It keeps you sane when perhaps you are in pain or can't sleep" (Patient at Ysbyty Gwynedd Hospital)*

### The stats

- **Entertainment was rated as the number two priority for hospital, health and wellbeing broadcasters when deciding what to broadcast, with 74% of stations rating it as a top three priority.**
- **79% of stations reported having evidence of a positive impact of their activity on the entertainment of listeners.**
- **79% of stations reported having evidence of reducing boredom among listeners.**
- **83% of hospital staff think that the station is good at providing entertainment.**
- **41% of stations report broadcasting interactive content such as competitions and on-air games.**

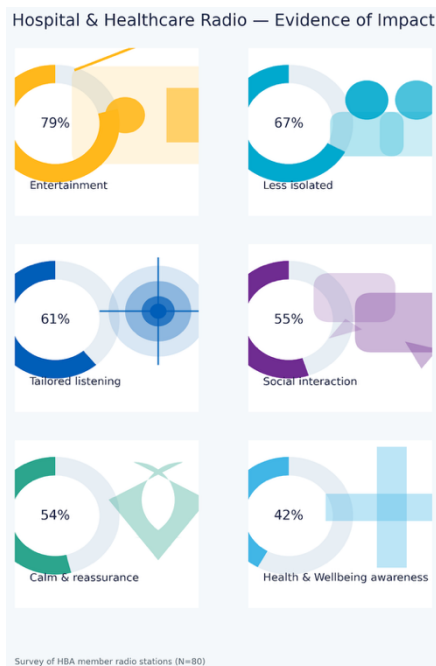


Table 2: What kind of content do you deliver? (Online survey, N=80)

Response	Percentage (%)
Music	100%
National news	69%
Local events	64%
Speech programming	50%
Weather	50%
Local news	40%
Sport (in general)	38%
Comedy	31%
Football commentary	21%

## The need

**Stat: Three-quarters of healthcare staff think that hospital broadcasting benefits patients.**

Patients in hospitals, people in care homes, and people waiting to see a healthcare professional, etc. potentially face long periods of inactivity and boredom, with restricted visiting times. Healthcare professionals we spoke to highlighted the need for entertainment to be available to patients regardless of mobility, technology access, or financial means (especially when television is a paid-for service). In some situations, personal devices become difficult for some patients to use, and hospital broadcasting is passive entertainment that doesn't require effort when patients are especially unwell. They also appreciated that its curated content is reliably sensitive to, and universally appropriate for, the hospital environment and its diverse range of patients and their ailments<sup>18</sup>.

## The impact

The positive impacts of music in healthcare are well-known in managing pain, anxiety and stress<sup>19</sup> while studies have also demonstrated that listening to one's preferred choice of music is most effective<sup>20</sup>.

*"Music which is the type of content listeners say they particularly value (76% of radio listeners, increasing to 84% of local radio listeners)." (Ofcom)<sup>21</sup>*

Hospital, health and wellbeing broadcasting is unique in providing a more tailored and diverse range of music to listeners than many commercial radio stations, with song requests providing a particularly personalised experience. Nearly all (92%) hospital, health and wellbeing radio stations report collecting song requests from listeners, while 41% of stations report broadcasting interactive content such as competitions and on-air games.

*"As I approach my 50th year as a doctor, I become more and more convinced of the power of music for patients irrespective of the type of illness." (Listener feedback, Glasgow)*

*"Thank you to all the team at HBS for keeping me entertained while I was in the Queen Elizabeth. It was wonderful to hear requests from my family and friends being played for me." (Listener feedback, Glasgow)*

*"Musically, hospital radio is always trying to do something that no other radio station tries to do, and that's the appeal from the 'birth to the grave' in terms of musical output. We play everything and anything." (Volunteer, Radio Hillingdon)*

We found that entertainment was not only a means of alleviating boredom or providing distraction from being unwell and in hospital; music was also being used to create and enhance emotional states. Some volunteers

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<sup>18</sup> Nurseline Community Service (ND) Health Risks Associated with Prolonged Hospital Stays (<https://nurselinecs.co.uk/blog/health-risks-associated-with-prolonged-hospital-stays/>).

<sup>19</sup> Mitchell, L. A., MacDonald, R. A., & Brodie, E. E. (2006). A comparison of the effects of preferred music, arithmetic and humour on cold pressor pain. *European Journal of Pain*, 10(4), p343-343; Hole J, Hirsch M, Ball E, Meads C. Music as an aid for postoperative recovery in adults: a systematic review and meta-analysis. *Lancet*. 2015 Oct 24;386(10004):1659-71. doi: 10.1016/S0140-6736(15)60169-6. Epub 2015 Aug 12; Bu F, Philip K, Fancourt D. Social isolation and loneliness as risk factors for hospital admissions for respiratory disease among older adults. *Thorax*. 2020 Jul;75(7):597-599. doi: 10.1136/thoraxjnl-2019-214445. Epub 2020 Apr 21. PMID: 32317268; PMCID: PMC7361022; Becker, A.S., van der Valk Bouman, E.S., Schaap, J., Klimek, M. & J.O. Groeniger(2025) Music in healthcare: Investigating music preferences for pain management across twenty countries, *SSM - Population Health*, Volume 29, 2025, 101758, ISSN 2352-8273, <https://doi.org/10.1016/j.ssmph.2025.101758>. (<https://www.sciencedirect.com/science/article/pii/S2352827325000126>).

<sup>20</sup> Ibid (Mitchell et al, 2005, Becker et al, 2025).

<sup>21</sup> Ofcom (2024) Audio listening in the UK (<https://www.ofcom.org.uk/siteassets/resources/documents/research-and-data/data/statistics/2024/audio-report-2024/ofcom-audio-report.pdf?v=320716>).

described how patients would choose pieces of music or songs that they knew would be uplifting, giving them an immediate mood boost. Conversely, other patients intentionally chose songs that offered catharsis, that is deliberately listening to a 'sad song' so they could "have a good cry and feel better afterwards". While it might seem counterintuitive, this actually aligns with guidance from the NHS helping young people cope with being in hospital (although it is universally applicable, regardless of age): "It is quite normal to feel sad or low at times, particularly when you are having a bad day. When you are feeling sad it is okay to cry; crying is an important way of releasing emotion."<sup>22</sup>

*"[Music] is a medicine in any hospital." (Volunteer, Radio Ysbyty Gwynedd)*

Hospital radio volunteer presenters are sensitive to the hospital context when deciding their playlists, patter, and other content, to make sure that what is broadcast is suitable to everyone inside the hospital, from a terminal patient to a nurse doing paperwork. A good example is how some stations treat news broadcasts, as one Hospital Trust CEO told us:

*"The best thing is their focus on positive stories in this world. Every time you switch on the news normally, it's all doom and gloom and, you know, 'the world is at war!' And yet, actually, the morale boost of knowing that in your community, great things are happening ... they really do focus on the positives"*

For settings like care homes, music can be used as a form of reminiscence therapy for people with dementia. Similarly, the laid-back nature of this broadcasting, sensitive to the anxiety many listeners might be feeling, its focus on wellbeing and requests from an older generation of people, provides gentle mental stimulation alongside familiarity especially suited to those living in care homes and sheltered accommodation. This is particularly important for those patients at a higher risk of feeling isolated, and less able to use other forms of entertainment or distraction like television, computers, or reading.

*"My mother-in-law [with dementia] was non-verbal, but put Sinatra on and she sang every word." (Volunteer, Rookwood Sound)*

*"She was blind, and nobody even thought to tell her that the radio was going. She must have been so isolated. How sad is that?" (Radio Ysbyty Gwynedd)*

## 2.2 Social Interaction

### Impact summary

Hospital broadcasting creates connections between patients, staff, and volunteers. Ward visits create human connections and break the silence in hospital environments. Hospital radio provides virtual companionship, and comfort for those experiencing anxiety or sleeplessness. It also provokes conversations beyond medical issues and helps patients focus on topics other than their illness.

### The need

Having good social interactions in hospitals has been shown to play an important role in how patients experience their care and recover from illness<sup>23</sup>. These interactions can happen between patients and staff, among patients themselves, and between patients and their visitors – including volunteers. When patients

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<sup>22</sup> NHS The Newcastle Upon Tyne Hospitals (ND) Coping with being in hospital (<https://www.newcastle-hospitals.nhs.uk/services/great-north-childrens-hospital/childrens-health-psychology/resources/coping-with-being-in-hospital/>).

<sup>23</sup> Barker HR, Griffiths P, Mesa-Eguiagaray I, Pickering R, Gould L, Bridges J. Quantity and quality of interaction between staff and older patients in UK hospital wards: A descriptive study.

receive social support through these connections, it can reduce stress and anxiety, improve their overall wellbeing, and become a valuable part of their health journey, actively contributing to better patient outcomes and experiences.

## The stats

- **Almost three-quarters (73%) of hospital, health and wellbeing staff believe that hospital, health and wellbeing broadcasting supports patient sociability and reduces loneliness.**
- **55% of stations reported having evidence of a positive impact on social interaction among listeners<sup>24</sup>.**
- **83% of stations report that their radio volunteers go out to meet listeners in situ (e.g. to collect song requests or raise awareness of the service).**
- **6.3 hours per day is the average length of time stations broadcast live programming (with a majority broadcasting between 3 and 4 hours per day).**
- **5 hours per week per station are spent visiting listeners in situ on average in 2025, compared with 9 hours in 2016.**

## The impact

Ward visits and request rounds are more than just collecting songs to play on an upcoming show - they are also social visits, in which volunteers act as friends at the bedside, listening, chatting, and connecting with patients. Often, the social interaction isn't just confined to between song-collectors and patients: Volunteers consistently report that their visits can transform quiet wards into more lively, interactive spaces, thanks to song requests sparking conversation and connections between patients on the same ward.

*"When we walk into a unit... there's total silence. By the time you leave, they're talking and laughing with one another." (Volunteer, South West)*

We heard many stories from volunteers where a simple song request also led to more meaningful social interactions between family members and patients.

*"I received a letter from a family whose father was on one of the wards. He wasn't expected to live for very long... The family knew the music that he liked so they requested a record that was played that evening for him to listen to... the letter basically said thank you so much for playing the record and it was the first time in several days that we've actually seen him smile and he actually spoke to us... At the end of the record, he took the headphones off and said 'they mentioned my name and they were playing my music' and thanked the rest of the family for requesting the record. That night he passed away. They said you know it was their lasting memory of him: the smile and the thank you and the excitement he got from listening to the record"*  
(Volunteer, Radio Hillingdon,)

Social interaction is even created for those who are recovering at home, with broadcasting providing a sense of 'virtual community' with others who are in a similar situation.

*"CHBN has been an absolute lifeline to me... throughout my illness, it has been a real positive boon to be able to listen to the hospital radio... even though I'm sat in my corner of my house by myself, I feel connected."*  
(Former patient of St Michael's Hospital, Bristol)

*"It can be very lonely and I think hospital radio [volunteers] are very good at going out, talking to people, getting requests and that just lifts people in a time that can be really difficult" — Royal Devon University Healthcare NHS Foundation Trust interview*

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<sup>24</sup> This is less than reported in the previous (2016) evaluation, and this is likely a result of COVID restrictions on ward visits.

## 2.3 Calming and Reassuring

### Impact summary

Hospital broadcasting provides crucial emotional support during vulnerable moments, offering comfort through familiar voices and music that reduce patient anxiety and promote better sleep. The service delivers both immediate distraction from hospital stress and practical health education for recovery planning. With friendly presenters creating a sense of "someone being there," hospital broadcasting helps patients, families, and visitors feel less isolated while providing clinical staff with a non-medical tool for calming anxious patients.

### The need

Hospital stays often affect a patient's mood. Many experience worry, anxiety, or feeling overwhelmed, regardless of age. Some mental and emotional difficulties may be temporary, directly resulting from their time in the hospital.<sup>25</sup> Nearby voices and music help hospital radio listeners feel more comfortable and normal during their stay, providing a welcome distraction from the worry and stress that being in hospital often brings. For many, not being in their own bed at night - sharing a space with other unwell strangers, hearing unfamiliar noises, and lack of distractions - contributes to heightened anxiety and inability to sleep. As one nurse put it: *"There's just something comforting about listening to people's voices, isn't there?"*

The educational content serves a practical purpose too - helping patients better understand what's happening to them and giving them useful information and tips for managing their health once they go home. This kind of guidance helps people start thinking about their recovery and future plans, rather than getting stuck worrying about their current situation. Hospital broadcasting provides emotional comfort through familiar, nearby content and practical support through health information, helping patients cope with their immediate experience while preparing them for life after discharge.

### The stats

- **68% of healthcare staff say that hospital, health and wellbeing broadcasting is good at creating a calming and reassuring atmosphere, reducing anxiety.**
- **Providing a distraction was rated as the number one priority for hospital, health and wellbeing radio stations when deciding what to broadcast, with 78% of stations rating it as a top three priority.**
- **54% of stations reported having evidence of a positive impact of their activity on calming and reassuring listeners.**
- **57% of hospital, health and wellbeing staff believe that hospital, health and wellbeing broadcasting creates a calming atmosphere and reduces anxiety.**
- **65% of stations broadcast in hospital waiting rooms, 60% in outpatient areas, and 55% in other hospital areas, potentially reducing anxiety and calming patients in these areas. This is double the number in 2016, indicating a significant expansion into more public hospital areas.**

### The impact

A calm, friendly voice reduces uncertainty and fear, and the live volunteer presenters convey warmth and care. The comfort of hearing a friendly, conversational human voice can offer reassurance and safety when patients feel isolated or overwhelmed. We heard many stories from volunteers on how the station has positively

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<sup>25</sup> National Ageing Research Institute, Victoria State Government Department of Health (ND) Older people in hospital - Mind and mood (Older people in hospital - Mind and mood | Better Health Channel).

impacted listeners simply by providing some much-needed distraction and reassuring, predictable, consistent presence. Clinical staff we spoke to on our visits said that the regularity of shows and familiar presenters provide consistency that can help patients feel grounded, especially through the morning and evening programming that can mirror home routines.

Hospital staff also told us that familiar music and soothing presenting styles give patients a way to shift state from anxious to soothed without clinical intervention. They also reported that it helped patients sleep, settle, and de-escalate anxiety through familiar music. In waiting rooms, hospital broadcasting also provides some privacy to doctor-patient conversations, which are less likely to be overheard if there is some entertaining distraction.

*"We all quite like it in this department. So, if it's available, we tend to put it on, so it tends to make things a bit more peaceful" (Nurse, Horton General Hospital)*

*"Radio Hillingdon was a lifeline; it helped me sleep at night." (Patient letter)*

*"We do have a lot of requests for music that takes them back to a certain place and time, maybe a happy place, their calm place" (Volunteer, Radio Ysbyty Gwynedd)*

*"For someone who's going through a difficult time to hear their favourite song — music is such a powerful thing." — (Staff, Royal Devon and Exeter Hospital)*

At times, it isn't only patients that need calm and reassurance. Families and other visitors can become distressed and anxious seeing their loved one in hospital, especially over a prolonged period of time. Hospital broadcasting can give people an easy way of providing some comfort and distraction for their loved one, by helping them set up hospital radio on Hospedia or an app, requesting a special song, or even – if they can't visit – sending a message via the airways to show they are missed.

Many people pass away in hospital settings, which is understandably difficult for those left behind. Hospital broadcasting can mark these moments, and make them deeply personal and meaningful, by playing a tribute to mark the passing. We also heard of volunteers going above and beyond to provide comfort and distraction to family members visiting their loved ones.

*"These young girls were sort of hovering by there and asking for requests. Their mum was critically ill... So quite often they'd sit in, if we're here. And they were great on air, they weren't that old, like 10 or 11. Sometimes we'd have their cousins in as well, whoever was here visiting, that they'd come in. They were great: they had great knowledge about music, they were really good on air. And we didn't know, but sadly, their mum did pass away. And we just happened to see one of the relatives, a week or so later in the cafe, and they spotted us, came up and said, 'you made such a difference', because it was a good distraction for those children." (Volunteer, Winchester Radio)*

## 2.4 Sense of community, belonging and connection

### Impact summary

Hospital broadcasting strengthens patients' sense of connection and belonging during their stay. Personal song requests and dedications make individuals feel remembered and cared for, while interactive features such as quizzes and local news help them stay mentally stimulated and connected to the world beyond the ward. Requests from relatives — including those overseas — bridge physical distance and remind patients that loved ones are thinking of them. Broadcasting religious services and prayers supports spiritual wellbeing for those unable to attend in person, whether because they are in hospital or ill at home. Marking milestones such as birthdays or weddings with radio requests brings moments of shared joy. Together, these simple but

meaningful interactions contribute to a compassionate healing environment and foster a sense of connection with others.

*"When you're in hospital, you feel lost, until you listen to the radio – then you feel you are part of something"*  
(Patient feedback, Radio Ysbyty Gwynedd)

## The need

Experiencing ill-health, whether in hospital or at home, can be a disquieting experience. For those in hospital, it is often unfamiliar and disorienting, similar to those who may have just moved into a care home or other setting. Individuals may be surrounded by unfamiliar people, and in strange new routines, and experiencing an unsettling loss of control over their environment. Real life, or their life before, may seem a long way away, with diminished contact with family, friends and daily activities. Keeping connected with normal life, people and routines, in whatever small ways possible, is invaluable in helping people to remain calm and aid recovery or settling in.

## The stats

- **84% of stations reported that they have evidence that their broadcasting adds value / is beneficial to their listeners' experience of the setting.**
- **67% of stations reported having evidence of helping listeners to feel less isolated.**
- **55% of stations report broadcasting information about the healthcare setting and its staff.**
- **69% of stations broadcast national news, 64% talk about local events, 40% give local news and sports news (38%), with 21% providing football commentary.**
- **73% of stations broadcast information about local charities and/or support groups.**
- **79% of stations have received positive feedback from staff in their setting about the impact of their broadcasts on listeners.**
- **94% of stations collect song requests from listeners outside of a hospital setting.**
- **85% of stations collect song requests from visitors.**
- **87% of stations collect song requests from staff in the setting.**

## The impact

Hospital broadcasting creates a profound sense of belonging by making patients feel valued, remembered, and part of a wider community during what can be an isolating experience. The simple act of having a song request taken and played on air carries deep emotional significance. As one volunteer shared:

*"A lady not long ago... she thought that she'd been forgotten. And the very fact that somebody had asked for a request, and the request was played on the radio, made her think, 'Gosh, somebody does care about me'."*  
(Volunteer, Radio Ysbyty Gwynedd)

This illustrates how hospital radio volunteers represent the caring community reaching into the hospital setting, transforming what could feel like an impersonal, institutional environment into a space where individuals are seen and valued. As one Glasgow volunteer said: *"We have the ability to make the person feel valued, listened to and wanted."*

Beyond making patients feel individually valued, hospital broadcasting maintains vital connections to normal life and community outside the hospital walls, for example: *"playing local football results helps them keep track of normal life outside"*, providing a connection to the normalcy of everyday activities. Winchester Radio volunteers described how their Sunday service broadcasts enable families to feel they're "worshipping together" even when separated by hospitalisation.

This sense of connection extends even after discharge - a volunteer from Radio Ysbyty Gwynedd observed that patients who have returned home continue to listen, noting: *"they still feel a part, I think that is like a part of the medicine really, towards them getting better, that they still have that contact, you know, and connection."* One Winchester Radio volunteer powerfully described how their father, who had moved from hospital to hospice, was able to share the joy of hearing his requested music with the whole family because it was a community station they could all tune in to: *"honestly the joy that brought him it was immeasurable... so that connection which I'd heard about anecdotally before but you know I saw firsthand just how important it is and how uplifting and yeah you know nice to feel part of the community."* As a Royal Devon University Healthcare NHS Foundation Trust representative summarised: *"I think that sense of connection, connecting to others, bringing joy into those moments"* - hospital broadcasting creates bridges between the clinical environment and normal life, helping patients maintain their identity, social connections, and sense of belonging during vulnerable times.

## 2.5 Feel like an individual / Tailored Listening

### Impact summary

Music requests and personal interactions through hospital broadcasting help combat the isolation and loss of identity that patients often experience during hospital stays. Beyond choosing meaningful songs that connect them to memories and loved ones, the conversations with volunteers - sometimes the only non-clinical human contact patients receive - provide vital emotional support and help people feel like themselves again in an otherwise depersonalising environment.

Recognising the patient's individuality is often equally important to their friends and family, especially when a loved one passes away in hospital after a prolonged stay. Hospital broadcasting is used to pay musical tributes to the deceased, providing end-of-life dignity. For many families, these final musical requests – a song that meant something special to them – have created "a lasting, smiling memory" of their loved one.

*"We get a lot of feedback from families who, when someone hasn't left the hospital alive, have told us that they put in a request and it made a big difference to their loved one." (Volunteer, HBS Glasgow)*

### The need

Long hospital stays can be disorientating and depersonalising<sup>26</sup>. Hospital environments disrupt a patient's daily life, leading to a sense of being unsettled. For some, the hospital environment can be overwhelming and isolating, which may leave patients feeling lonely, anxious, or even depressed. This is especially true for those patients who receive no visitors during their stay. Extended hospitalisation can impact a person's sense of autonomy and identity. Being confined to a structured hospital routine, with limited control over daily activities, can lead to feelings of powerlessness and frustration. This lack of independence may contribute to a diminished sense of self-worth, particularly for older adults or those who are used to being active in their communities.

### The stats

- **61% of stations reported having evidence of listeners feeling as though their listening experience is tailored to them.**

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<sup>26</sup> Patel, K., & A. Rokach (2024) Hospitalization, Surgery and loneliness. Archives of Psychiatry and Mental Health. 2024; 8: 001-007.

- **92% of stations collect song requests from listeners (patients).<sup>27</sup>**
- **Giving listeners a choice in what songs are played on the radio was rated as the fourth highest priority for hospital, health and wellbeing radio stations when deciding what to broadcast, with 91% of stations rating it as a top five priority.**

## The impact

Being able to request music that is deeply personal and significant to them allows people a small way of alleviating their isolation and depersonalisation during long hospital stays. They usually choose something that is uplifting, and reminds them of their friends, family, or of a happy memory. Music can evoke memories and provide comfort to patients, regardless of their age. The eclectic nature of hospital broadcasting allows for a diverse range of music that can connect patients with their past and family.

Family and friends can also make requests. Expanding the hospital radio's reach to involve family members in the music experience for patients can help them feel connected with those who love them, especially those who are in hospital far from family (retired away from family, ill on holiday, etc.) Volunteers told us that these kinds of dedications can make patients feel remembered and cared for during their hospital stay.

But it isn't just about choosing music. Volunteers often serve as the only visitors for patients who may not have family or friends able to visit. Frequently, seemingly small interactions like taking song requests can lead to deeper conversations around the reason for choosing that song, sharing the memories related to it, all helping them reconnect to their identity and feel more like themselves in a setting that can be depersonalising. These 'real conversations' are especially powerful for people with no visitors. In some cases, it might be the only non-clinical interaction that people can have:

*"When we used to do more visits previously, ... we're the only ones on a ward not there to prod them or poke them or move them or do something to them who were non-clinical. So, they were able to have a sit down with somebody and have a conversation. That's the key thing, especially when people may not have visitors"*  
(Volunteer, Rockwood Sound)

## 2.6 Health and Wellbeing

### Impact summary

Hospital broadcasting serves as a crucial health literacy tool, reaching audiences who struggle with written or digital health information. By weaving practical health advice throughout programming rather than in separate segments, stations deliver accessible guidance on basics like sleep, nutrition, and exercise to patients, visitors, and community members. Working with NHS Trusts or Boards to share approved messages, hospital broadcasting demonstrates measurable impact through listener feedback showing real behavioural changes and increased healthcare engagement.

### The need

Health literacy plays a vital role in public health as it empowers individuals to make well-informed decisions about their health. Many in the UK lack the necessary skills and knowledge to effectively find, understand, assess, and use health information and access services. Research undertaken by the Local Government

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<sup>27</sup> This is less than reported in the previous (2016) evaluation, and this is likely a result of COVID restrictions on ward visits.

Association found that half of adults in the UK struggle to access trusted health information, and 80% agree that better access to trusted health information would help them manage their health<sup>28</sup>.

Broadcasting health and wellbeing messages not only to those in hospital, but into the local community, can increase health literacy for those who struggle to engage with written materials like leaflets, or digital information on apps or websites. Across the UK, one in six people struggle with reading<sup>29</sup>, and one in 12 internet users lack confidence online<sup>30</sup>. Listening to healthcare messages and advice can be easier to process for many people, especially as a passive medium people can engage in while doing another task. For those who cannot read, whether through poor literacy, sight impairments or cognitive decline, hearing messages might be one of the only ways they can receive this information.

## The stats

- ***Promoting health and wellbeing and aiding patient recovery were both rated as top five priorities for stations when deciding what to broadcast (by 86% and 89% of stations respectively).***
- ***Broadcasting health education messages / content to prevent or relieve sickness was rated as the number six priority for hospital, health and wellbeing radio stations when deciding what to broadcast.***
- ***85% of stations broadcast general health and wellbeing information (public service announcements); while 61% broadcast specific health and wellbeing messages on behalf of their healthcare setting.***
- ***20% of stations reported that they believe their broadcasting has a 'massive impact' on listeners' awareness of health and wellbeing'.***
- ***Almost double (39%) of healthcare staff think hospital broadcasting significantly benefits patients.***
- ***Just over half of healthcare staff (54%) think that hospital, health and wellbeing broadcasting is good at aiding patient recovery; and 51% say it is good at providing useful information such as hospital updates and health tips.***
- ***42% of stations report having evidence of increasing awareness of health and wellbeing among listeners. This is a large increase on the 2016 figures and likely reflects the move towards greater health and wellbeing broadcasting.***

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<sup>28</sup> Local Government Association (ND) Understanding health literacy: empowering communities with reliable health knowledge (<https://www.local.gov.uk/topics/social-care-health-and-integration/understanding-health-literacy-empowering-communities>).

<sup>29</sup> The Reading Agency (2024) The State of the Nation's Adult Reading: 2024 Report (<https://readingagency.org.uk/adult-reading-research-report-2024/>).

<sup>30</sup> Ofcom (2025) Exploring how people in the UK are affected by 'digital disadvantage'

(<https://www.ofcom.org.uk/internet-based-services/technology/exploring-how-people-in-the-uk-are-affected-by-digital-disadvantage>).

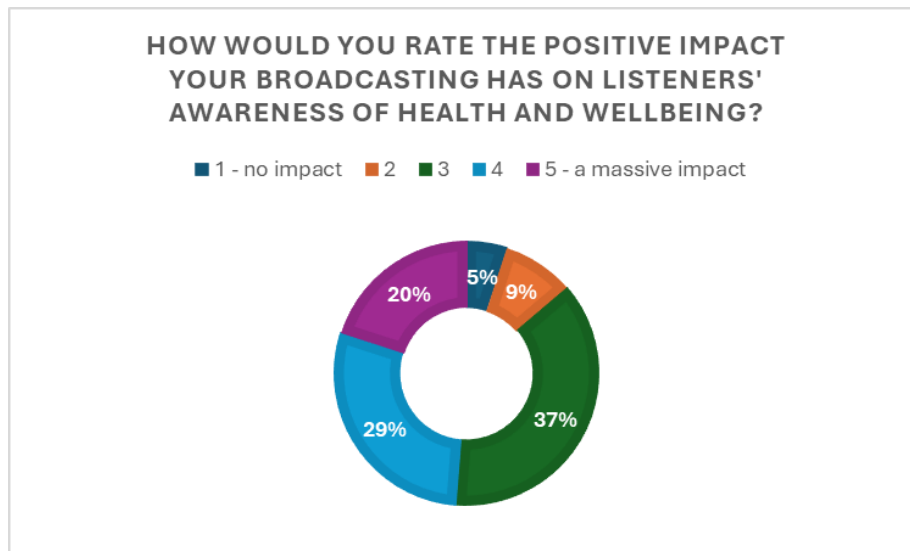


Figure 4: How would you rate the positive impact your broadcasting has on listeners' awareness of health and wellbeing? (Online survey, N=80)

## The impact

*"We are pushing out information on behalf of the hospital as well." (Radio Hillingdon)*

### *Hospital Radio promotes health and wellbeing to all listeners*

Hospital radio stations weave health and wellbeing advice throughout their programming rather than dedicating separate segments. This approach ensures the information reaches all listeners naturally, whether they're patients, visitors, or community members. The health messaging is designed for the entire listening audience making hospital broadcasting a vehicle for general public health education rather than just patient-focused content.

Stations focus on straightforward health tips that anyone can understand and act on - covering basics like sleep hygiene, hydration, nutrition, hand washing, and encouraging gentle movement and exercise. The emphasis is on practical guidance rather than complex medical information. Several stations have established dedicated slots like "Wellbeing Minute" or regular health updates that signpost listeners to NHS resources and advice pages, creating consistent touchpoints for health information.

Many stations work directly with NHS Trusts or Boards and hospital communications teams to share approved health messages, ensuring the information is accurate and aligns with official health guidance. Stations actively support public health campaigns, broadcasting content about flu vaccinations, stop smoking initiatives, falls prevention, and awareness weeks like stress awareness, helping amplify important health messages and campaigns. Many are also broadcasting specialised programming for specific care facilities like care homes, and sports coverage that explicitly promotes post-hospital recovery activities. There's clear attention to mental health, with stations including stress management advice and general wellbeing reminders in their programming, recognising the broader health needs of their audience. The content serves both entertainment and therapeutic purposes, connecting physical activity and community engagement to patient recovery.

### *Volunteers know that these messages are making a difference*

Hospital broadcasting volunteers receive clear evidence that their health messaging is making a real difference in listeners' lives. Patients are taking direct action after hearing advice, including asking nurses about health concerns and successfully implementing practical tips like sleep routines. And the impact extends beyond

individual listeners, with people sharing the health information with their families and requesting repeat broadcasts of useful content. Healthcare staff in settings like care homes have noticed residents benefiting from and enjoying the wellbeing segments.

Volunteers receive specific feedback through emails and messages about how mental health features have helped listeners, and how physiotherapy tips have given people safe self-care ideas to try. The evidence shows that hospital broadcasting's approach of weaving health advice into regular programming is not only reaching diverse audiences but prompting meaningful changes in health behaviours and healthcare engagement.

*"We've had messages saying the wellbeing tips made them ask a nurse about something."  
(Volunteer, HBS Glasgow)*

*"Care home staff told us residents enjoy the segments on keeping active."  
(Volunteer, Rookwood Sound)*

### Hospital Radio Health Programmes Across the UK



Image 1: Examples of health and wellbeing programming happening across the country

## Case Study: York Hospital Radio

York Hospital Radio is working directly with clinical staff at the York and Scarborough Teaching Hospitals NHS Foundation Trust to create bespoke programmes for smoking cessation and mental wellbeing, with aims of expanding to more health and wellbeing topics, presented by experts, in future.

### Smoking Cessation Programme

The health promotion lead at the hospital created a smoking cessation programme that uses hospital broadcasting to promote itself, and to provide quick tips and encouragement to help patients quit smoking. The idea is simple - when people are in hospital dealing with health problems, they're often more motivated to make changes like quitting smoking. Patients are away from their usual smoking routines and often facing health scares that make them want to quit. The programme targets patients who are admitted to hospital and provides them with support, including through radio broadcasts, during their stay.

The programme works by alerting patients to the hospital's tobacco support team. As the interviewee explained, "*there's an opportunity, with radio, to have that conversation.*" Radio is a useful medium to raise awareness of the programme because it's always available and it's free. Throughout the day, there are jingles and reminders giving gentle encouragement and tips on how to distract yourself from cravings.

### Mental Wellbeing Programme

The hospital's mental wellbeing programme uses radio broadcasts to deliver short psychological exercises and mental health support to patients, staff, and the wider community. Presented by a clinical psychologist, the programme offers practical tools for managing difficult emotions, anxiety, and stress. To date, they have "*about 25 recordings... to do with managing difficult emotions or managing fear,*" designed as brief, practical sessions that people can listen to whenever they need to.

The radio format removes barriers to getting mental health support. Instead of having to book an appointment or admit they're struggling, people can listen to pre-recorded segments when it suits them. The programme uses a "find out in five" format, offering quick segments that teach breathing techniques, thought management, and emotional regulation strategies. These short exercises work well in hospital environments where people might be waiting for appointments, lying in bed, or taking breaks from work.

This matters because mental health challenges are common in hospital settings, affecting both patients dealing with illness and staff working in high-pressure environments. The programme recognises that people often need immediate emotional support but may not know how to access it or feel comfortable asking for help directly.

# Chapter 3 The impact on NHS staff

With staff well-being a significant priority for the NHS, stations that actively engage with healthcare staff to promote themselves can meaningfully contribute to the support of those working in hospitals and healthcare environments. Indeed, the volunteers we spoke to recognised the hospital staff as an important audience, and some were actively involved in integrating radio access into hospital IT systems (e.g. staff intranets) for easier workplace listening.

*“And the staff have got to know us really well. We have a laugh with them, you know, over the radio.”  
(Volunteer, Radion Horton)*

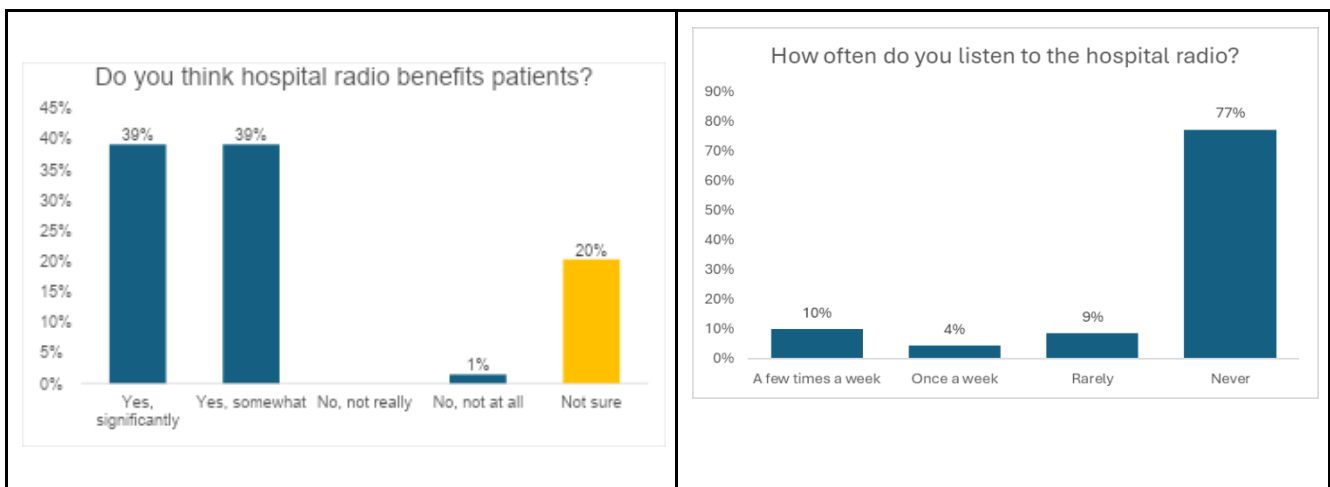
## Key findings

### Awareness of hospital broadcasting

- **49% of surveyed hospital staff were unaware that their hospital had a station. This is in conflict with the volunteer survey, in which over three-quarters (77.5%) said that they thought staff were aware (34% said ‘very much so’).**
- **There was no relationship between how long a member of staff had been working in the setting and whether they were aware of hospital broadcasting.**

### Staff perceptions of hospital, health and wellbeing broadcasting

- **Over two-thirds (71%) of hospital staff feel that hospital broadcasting is important. 36% feel it is very important.**
- **Two in five (42%) think that hospital broadcasting benefits hospital, health and wellbeing staff.**
- **The top three things that staff think hospital, health and wellbeing broadcasting does well is:**
  1. **Provide entertainment (68% agree).**
  2. **Supporting patient sociability and reducing loneliness (60%).**
  3. **Creating a calming atmosphere and reducing anxiety (56%).**



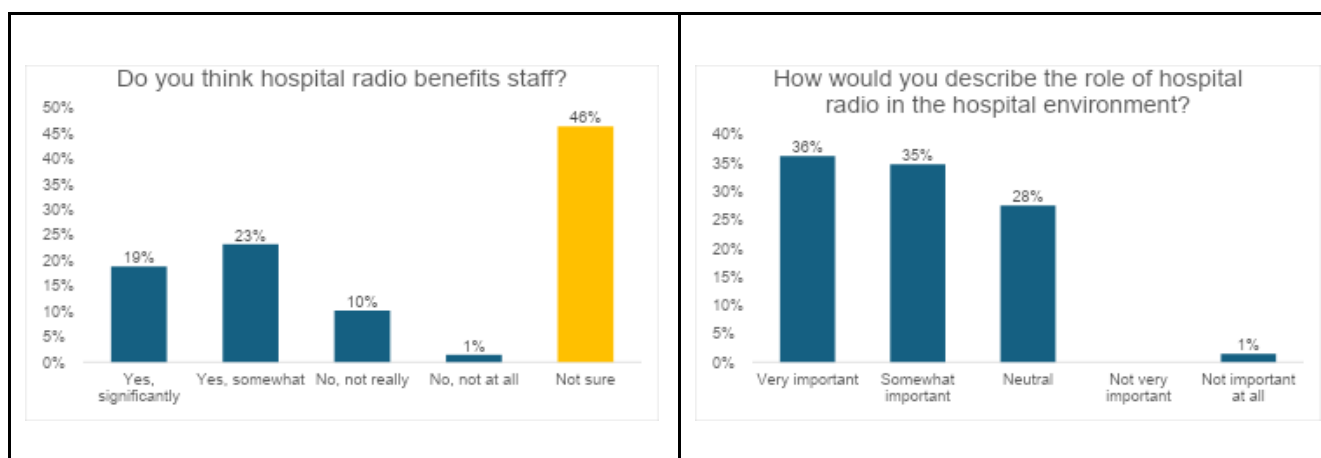


Figure 5: NHS staff perceptions of hospital radio (Online survey, N=71)

### Staff listening

- **17% reported that they have interacted with the radio station by requesting a song, participating in a show, or providing feedback.**
- **Just under a quarter (23%) of staff said that they listen to the hospital radio, and 14% said they listen at least weekly.**
- **Those who do listen are twice as likely to do so via physical radio compared to website/app (16% vs. 8%). So, a broadcast over a physical radio or music system is more likely to be used by staff than a website or app.**

The staff we spoke to on visits told us that they listen to the hospital, health and wellbeing station while they are doing administrative tasks, such as when completing paperwork for the start and end of their shifts. *"[Doing admin work or prepping notes] It's a lot of work, so it's lovely just to have that background [music]."* Others use it to create a calmer and more personable atmosphere in waiting areas. One nurse told us that *"when it's quiet, we'll turn up the volume and have a bit of a sing-along. But it's good to just play in the waiting area, for company and [alleviating] nerves"*

Some staff were grateful to the hospital, health and wellbeing broadcaster at their hospital for providing fun opportunities to get involved, from short 'Desert Island Disc' segments with nurses, to interactive games and quizzes they played with patients, to – in one case – fundraising events like a hog roast and an 80s night to raise funds for the hospital and the station, in a mutually supportive way.

*"I did one of the Desert Island Discs and I found myself feeling quite nervous... I've just never been on the radio before of any kind, but they are very good at making people feel relaxed and comfortable"* (Staff member at Exeter Hospital)

Staff asked for more radios in areas where patients and their families wait, especially since COVID era restrictions required the removal of communally used magazines, books, and toys, meaning that there are fewer distractions and means of entertainment. Some staff noted the added benefits of having a radio playing as (a) they make spaces less awkwardly quiet, where people feel the need to whisper or not talk at all; and (b) if doctors or nurses are talking to a patient, it is less likely that others can 'listen in' (intentionally or not), which can be uncomfortable for everyone.

## Impact of having healthcare broadcasting for the Trust / Board

**Getting messages out across the hospital:** Hospital, health and wellbeing broadcasting is still an effective medium for communicating across the hospital and Trust-wide site. Stations we visited had audio trailers promoting campaigns, like seasonal vaccinations, and upcoming events within the hospital.

**Giving staff more tools:** hospital, health and wellbeing broadcasting can be used as part of an array of tools to support healthcare staff when dealing with patients, both during their stay in hospital and to help them manage their conditions when they return home. Our case study with York Hospital Radio demonstrates how audio versions of various tools, guides, and assets – recorded as short podcasts and uploaded to the hospital website, thanks to the onsite studio and skilled volunteers at the hospital radio station – can be used to by staff members to provide additional and complementary guidance to their patients. This can be especially useful to people who prefer listening over reading.

*"My hope with the [wellbeing on the radio] project that we're doing is that it could help staff in a couple of ways. One, because they're human, and these things are relevant for everybody. And the other one, because it really helps staff to have something they can offer their patients." (Clinical psychologist)*

**Appreciation for staff:** Often, the patients would dedicate songs to a member of staff, as a way of showing their appreciation – and likewise, some staff did the same to raise a patient's morale, to show they were thought of, or to mark a special occasion.

*"There's a morale benefit in terms of feeling cared about and sometimes patients will use the radio to say a particular thank you to the lovely nurses on this ward who are looking after me" (CEO, NHS Foundation Trust)*

## Chapter 4 The impact on volunteers

There are a number of proven benefits to volunteering in general, including enjoyment, making a difference, social benefits, improvements to mental health and wellbeing and even improved employment prospects<sup>31</sup>. In return, volunteers add value to the UK economy, with potential annual productivity gains of more than £4,500 per volunteer<sup>32</sup>.

### What do volunteers get out of volunteering in hospital, health and wellbeing broadcasting?

When asked what motivates people to volunteer in hospital, health and wellbeing broadcasting volunteers responded that the sense of purpose and wanting to help others are the most prominent reasons given (81% and 79% of respondents respectively), followed by socialising and having community, including opportunities to interact with others (78%), for a sense of belonging (61%), and development of new skills and capabilities (59%).

Table 3: What do you get out of volunteering at the radio station? (Online survey, N=80)

Category	Respondents mentioning	% of respondents
A sense of purpose	65	81%
A sense of helping other people through difficult times	63	79%
Opportunities to interact with other volunteers	62	78%
A sense of belonging	49	61%
Development of new skills and capabilities	47	59%

#### *A sense of purpose and making a difference to others*

Volunteers consistently express their belief that their work genuinely impacts patients' hospital experience. Many particularly enjoy the ward visits and direct patient interaction, which seems to be one of the most rewarding aspects of hospital radio volunteering. Some are themselves former patients, who reflect that *"You don't appreciate it [hospital radio] until you've been a patient."* (Volunteer, Radio Horton).

*"I'm there for the patients. That's what I'm there for... I'm there to cheer up that old lady that's sitting in the bed."* (Volunteer, South West)

*"It's like giving back. I've done volunteering all my life with various organisations, but this is the one where I find the most enjoyment."* (Volunteer, Rookwood Sound)

<sup>31</sup> Jochum, V., Davies, J., Dobbs, J. & L. Hornung (2019) Time Well Spent: A national survey on the volunteer experience - Volunteer impacts. NCVO.

<sup>32</sup> Pro Bono Economics (2024) A pro bono bonus: The impact of volunteering on wages and productivity (<https://www.royalvoluntaryservice.org.uk/news/volunteering/productivity-boost-from-volunteering-adds-46-billion-to-uk-economy-each-year/>)

### *The social and communal aspects of volunteering*

Many volunteers described the station as being like a family. Those volunteers we spoke to who go on ward visits and collect song requests liked to describe themselves as chatty, sociable, and enjoying the company of others. This extended beyond interactions with patients, though, with many volunteers enjoying the sense of community and friendship with their volunteer colleagues. As we have seen, the length of service can run into decades, leading to deep, close bonds with people in their hospital, health and wellbeing broadcasting community, which is a huge motivating factor for these volunteers, leading to those high retention and satisfaction rates.

*"I really enjoy it, it's like being part of a big family, I think it's very special, I'm really proud to belong to it"*  
(Volunteer, HBS Glasgow)

*"I'm a people person. I thought I'd love that. I'd love going around the wards meeting patients [and] love getting out chatting to people in the community"* (Volunteer, Radio Horton)

### *Gaining new experiences and developing new skills*

Hospital broadcasting attracts both novice volunteers and those with broadcasting backgrounds and serves as both a training ground for aspiring professionals and a fulfilling outlet for experienced broadcasters who want to give back to their community. Quite a few volunteers get satisfaction from the technical side: working the studio, keeping equipment running, using new technologies, editing, and audio production. These volunteers are drawn by studio work and hands-on problem-solving; maintaining equipment, engineering, supporting outside broadcasts, and editing/production give a clear sense of craft and achievement. For younger volunteers in particular, volunteering with hospital, health and wellbeing broadcasting provides access to work experience and technical and administrative skills that can be quite transferable. In addition to the more obvious 'hard skills' that volunteering for radio might equip a volunteer with, many were able to reflect on softer aspect, such as increased confidence, that people gained: *"You see somebody coming in and they wouldn't say boo to a goose, but by the time they finish their training and they're on here, their confidence increases, and that, in itself, does so much good for that individual."* (Volunteer, Rookwood Sound)

*"I've been helping... the studio manager... I know all the equipment inside out. I'm trying to help with outside broadcasts and ensure equipment's all working."* (Volunteer, HBS Glasgow)

*"I'm passionate about good quality radio, you know, I believe I'm okay at it, having had a job in commercial radio and 25 years at the BBC."* (Volunteer, Radio Hillingdon)

Many volunteers also mentioned that they volunteer in hospital, health and wellbeing broadcasting specifically because of their **love of music, radio and broadcasting**. Many volunteer to 'give back' through something they love: music and broadcasting. Volunteers we spoke to shared direct expressions of love, enjoyment, and enthusiasm, emphasising the real joy they feel in having the opportunity to spend their time choosing and playing music for others. These volunteers often "grew up" on radio and remain passionate about music; programming and requests make music selection meaningful; several describe music as their "happy place. Some volunteers also enjoy the thrill of broadcasting: being live on air, creating and crafting shows they feel proud of, presenting – either live or using voice tracking – and the general "radio-ness" of it, which they see as a core part of their identity.

*"I volunteered because I love music anyway. I have an eclectic taste, I like a bit of everything – old and new"*  
(Volunteer, Rookwood Sound)

## Skills that volunteers bring to hospital, health and wellbeing broadcasting

Volunteers responding to the survey felt that the skills they bring fell into three broad categories:

1. **Broadcasting & Media skills**, including prior broadcasting experience and technical knowledge of broadcasting/IT.
2. **Business and Operations skills**, including admin, marketing, project management, finance skills, and fundraising/event management.
3. **Leadership & Governance**, including management and governance skills.

Table 4: What skills are new volunteers bringing with them? (Online survey, N=80)

Category	Mentions	Percent of respondents (%)
Technical knowledge of broadcasting media / IT	39	51%
Prior experience of broadcasting	36	47%
Management skills	23	30%
Governance skills	19	25%
Finance skills	15	20%

## Who volunteers for hospital, health and wellbeing broadcasting?

While the average age of volunteers is around 46 years old, most volunteers are aged over 55, representing almost seven in ten responses (69%). Younger volunteers, aged under 34, represent a much smaller proportion (8%) of respondents.

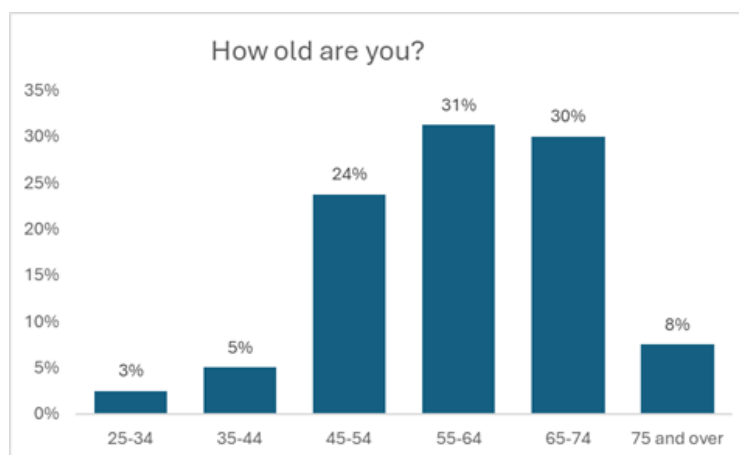


Figure 6: Age of station volunteers (Online survey, N=80)

The average length of service of the responding volunteers was 13 years<sup>33</sup>, which shows very strong volunteer retention. This ranged from under a year, to an astonishing 62 years. The most frequently given responses were 15 years and 40 years.

On average, volunteers contribute between 2 and 4 hours per week – although some give much more than this.

In terms of gender, 86% of survey respondents were male, although this might reflect more the gender breakdown of the volunteers who monitor the email inbox, or who are in more senior-managerial positions at each station, than representative of all volunteers generally<sup>34</sup>.

### Number of volunteers

A third (34%) of stations have between 20 and 30 volunteers, with the average number of volunteers per station being 27. One in ten stations (11%) have over 50 volunteers.

A total of 2,149 volunteers were reported across all respondent stations. As this represents around half of all stations registered with the HBA, then we can make a rough estimate of between 4,000 and 5,000 people volunteering for hospital, health and wellbeing broadcasting nationwide.

## Recruitment

Stations recruited an average of 5.6 new volunteers in the last 12 months, and an average of 3.4 volunteers left per station. This translates to a net growth of 2 volunteers per station, with 60 stations growing, 11 shrinking, and nine remaining stable. For stations that shrank in the last year, about two-thirds (64%) were able to replace at least some of their lost volunteers

45% of stations reported having NHS staff members volunteering. However, the actual numbers are likely to be relatively small, as only 4.3% of staff survey respondents said they had already volunteered when asked in their own survey.

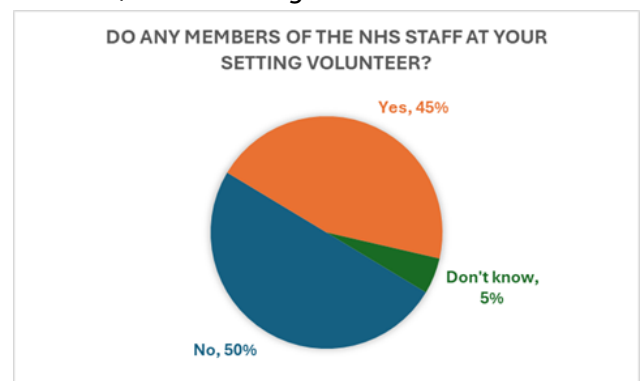


Figure 7: Do any members of the NHS staff at your setting volunteer? (Online survey, N=71)?

Hospital, health and wellbeing broadcasting volunteers are committed and passionate. During their most recent reporting year, HBA issued 362 individual Long Service certificates, recognising a combined 7575 years of service; and 18 station Long Service certificates, recognising a combined 895 years of broadcasting<sup>35</sup>. Some stations reported volunteers with a length of service that exceeded fifty years, and many of those we spoke to had been giving time to their station for decades, navigating new technologies, sweeping changes to the NHS, and continuing to broadcast throughout national crises and the COVID-19 pandemic.

<sup>33</sup> We removed outliers, to account for the highly likely scenario that the most senior, knowledgeable and committed volunteers would be those who were chosen to respond to the survey on behalf of the station. When keeping outliers in, we found the average length of service was 25.5 years.

<sup>34</sup> On our visits we spoke to a fairly equitable gender split (perhaps closer to a 60:40 male to female ratio).

<sup>35</sup> Hospital Broadcasting Association Trustees' Annual Report and Accounts for Year End August 2024.

## Chapter 5 Wider community impacts

One of the most significant shifts in the landscape of hospital, health and wellbeing broadcasting has been the move by many into broadcasting 'beyond the hospital wall' and delivering healthcare messaging. In this chapter, we will discuss some of the emerging benefits to the wider public, although further research needs to be done to understand the actual and potential effects.

### Broadcasting beyond the hospital wall

*The stats:*

- **55% of stations (44/80) are now broadcasting beyond hospital walls:**
  - **43% broadcasting to local community via DAB/FM/AM.**
  - **31% broadcasting to care homes.**
  - **19% have expanded broadcasting to the community, care homes and in hospital.**
- **Among the stations that broadcast to the community, just over a quarter (28%) said that the community is "not very aware" or "not at all aware", which indicates an opportunity for HBA to support their community broadcasters in marketing and promotion.**

This evaluation has revealed that four-fifths (81%) of stations have expanded the ways in which listeners can access their broadcasting in the last five years. While 98% of stations are still broadcasting to hospital wards, many are now also broadcasting to the wider community. COVID-19 pushed stations to expand beyond just hospital patients to serve the wider community - particularly elderly people at home who were isolated. It accelerated the shift from "hospital radio" to "healthcare broadcasting" serving a broader audience. For example, when churches closed over the pandemic, listeners called their hospital radio station in Winchester asking them to broadcast church services.

### New audiences, new locations

*The stats:*

- **31% of stations are broadcasting in care and residential homes.**
- **65% of stations broadcast in hospital waiting rooms, more than double the number in 2016.**

*"We are now accessible 24/7 via digital broadcasting. We have also provided radios to some care homes and hospital wards, so that they can listen directly." (Volunteer, Radio Horton)*

When the COVID-19 pandemic restrictions were introduced in 2020, then health secretary Matt Hancock told the Commons: *"Hospital radio is always important, but at times like this, when visitors have not been able to go into hospitals, it is even more important."*<sup>36</sup> To meet the challenges of broadcasting in a pandemic, many presenters and volunteers bought their own equipment to broadcast from home, and stations actively provided ready-made ways for Trusts or Boards to disseminate official public health information and the latest restrictions to patients.

Over the years, hospital broadcasting has expanded beyond the patients' bedsides and into waiting areas, A&E departments, outpatient clinics, and reception areas – broadcasting in these areas has more than doubled

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<sup>36</sup> Hansard (2020) CovidCOVID-19 Response. Volume 676: debated on Monday 18 May 2020. UK Parliament, House of Commons (<https://hansard.parliament.uk/Commons/2020-05-18/debates/8FA78498-C990-4246-A745-AE0F36F7B948/CovidCOVID-19Response>).

from 30% in 2016 to 55%-65% this year. GP surgeries are also becoming new listening spots (13% of stations are already broadcasting there), giving people something entertaining and reassuring to hear while they wait for appointments.

During the pandemic, some stations started broadcasting to other healthcare settings serving long-term residents who may not have access to personal devices, like care homes and psychiatric hospitals. Such settings are well-suited to the traditional model of hospital radio given their longer stays and reduced access to the internet. For example, ongoing relationships can be built between regular listeners and visiting volunteers, and there are communal spaces (such as day rooms), where it feels natural and homely to play the radio – especially a dedicated station that is sensitive to the requirements of a vulnerable audience, and which the staff can trust to not alarm or upset residents.

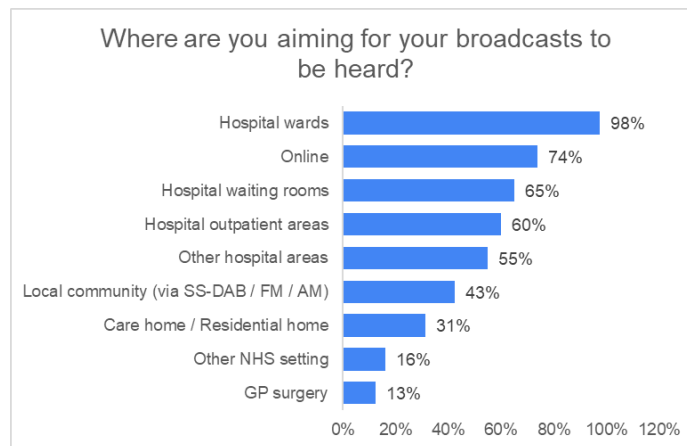


Figure 8: Where are you aiming for your broadcasts to be heard? (Online survey, N=80)

## Supporting the ‘Prevention Agenda’

Hospital, health and wellbeing broadcasting can play a role in providing continued support from hospital to home, by creating a link between (former) patients and healthy events, networks and organisations in their local community that they can tap into. Commercial stations cannot provide this hyper-local listing of activities, and they would not explicitly focus on those which boost socialisation, health and wellbeing. If pursued more intentionally, this kind of health broadcasting could contribute to healthier communities and increased health literacy.

*“The thing is, the folks who are in the beds in the hospital, they’re not going to be in the beds forever. They’re going to go home, and they’re going to need more support, and so all those support things [networks / events / groups] we’re involved with, they’re all things we can talk about on air and share and let them know about these groups that are going to help them and hopefully keep them out of the beds.” (Volunteer, Winchester Radio)*

*“We do still entertain those who are in beds in the hospital, but it’s about dealing with social isolation in the community, but also just keeping people healthy, active, engaged with the local community.” (Volunteer, Winchester Radio)*

## A virtual social lifeline for the elderly

Radio is a companion for many elderly people, especially those who live on their own. Healthcare broadcasting can share positive ageing messages and information about maintaining health and wellbeing, such as how to keep your brain active and healthy, and how to spot the signs of common issues such as dementia. Research

has shown that older listeners (55 and over) are more likely to choose radio, especially live and talk radio, over other types of audio and to be more likely to listen to health and wellbeing content than younger age groups.<sup>37</sup>

*"It's invaluable [having local and health and wellbeing information on the radio]. One thing the elderly don't like doing is going online. They don't like computers. They're suspicious of [being scammed]. So, if they can listen to the information rather than going online it's so much better for them. They won't pick up computers. So there's got to be other avenues of being able to get information and entertainment through to the elderly."*  
(Winchester Radio community partner)

## Bringing the community together, making local connections and being a mouthpiece for the community

By broadcasting into the local community, hospital, health and wellbeing broadcasting can help patients and families maintain links outside of visiting hours and connect hospital patients with events happening in the outside world. A few stations told us they are incorporating local news through partnerships with talking newspapers and covering local activities like live theatre and sports fixtures to broadcast to hospital patients. This represents a shift from purely internal hospital broadcasting to "becoming a bridge" between the hospital and the wider local community. Due to licensing and broadcasting rights, as well as having access to the right technology for outside broadcasting this might still be complicated for many other stations.

## Winchester Radio: Community Impact Case Study

Winchester Radio focusses on the over 50s and aims to be at the heart of the local community, bringing people together under the banner of community health and wellbeing. The station is particularly focussed on ageing positively and helping Winchester to become dementia friendly. Winchester Radio broadcasts to hospital patients at the Royal Hampshire County Hospital (via bedside systems), and the local community, including a number of care homes, (via DAB/FM radio and online), with a potential audience of 76,000 adults in their transmitter area.

### Community Focus

Volunteers are very active in, and linked into, the local community, acting very much as community connectors. This focus includes:

- Face-to-face engagement at community events, stalls, and stands.
- A Community Diary service - collecting and broadcasting local "what's on" information.
- "Winchester Now" weekly local news programme also available as a podcast.
- Song request collection from hospital patients and community members.
- Weekly local church service broadcasts.

The station is very active in the local network of voluntary and community sector organisations, helping to promote local events and amplify community messaging, acting as a mouthpiece for local organisations and groups, as well as hospital health and wellbeing messaging. Some volunteers engage exclusively with the community events and visiting local places where potential listeners may be. For a hard-to-reach community (over 50s and more elderly people), the radio provides information, social opportunities and vital messaging.

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<sup>37</sup> Ofcom (2024) Audio listening in the UK (<https://www.ofcom.org.uk/siteassets/resources/documents/research-and-data/data/statistics/2024/audio-report-2024/ofcom-audio-report.pdf?v=320716>).

*"We had a care company who did a free Christmas party at one of the outlying community centres in the city, and they asked everyone: 'How did you hear about it?' And nearly everyone who came through the door, because it was older people, said: 'Oh, I heard about it on Winchester Radio.'"*

### **COVID-19 Community Response**

When churches were closed during the pandemic, Winchester Radio broadcast 69 consecutive weeks of different local church services, providing a sense of connection, solidarity and spiritual support for the local community.

*"Having a service of worship that was available for people to listen to on a local radio station [during the pandemic], was important. [Not just] hospital patients (because hospital chapels were not functioning in the same way), and whether people are of a religious persuasion or not, lots of people ... needed some kind of solace, some kind of spirituality... In times of adversity, people seek solace, they seek guidance." (Winchester Radio community partner)*

### **Ageing Positively and Dementia Focus**

Broadcasting specifically targets over-50s (although the station welcomes all ages) and aims to keep older people engaged with their local community, reduce social isolation, and encourage active lifestyles. The focus is on helping people live better, healthier lives for longer, with the knock-on effect that this reduces pressure on the NHS by promoting healthy decision-making before crisis-point is reached. Volunteering with Winchester Radio is also aimed at positive ageing as it offers volunteers a number of social and mental benefits.

Winchester Radio is very active in chairing the Dementia Friendly Winchester network, involving local businesses, charitable and community organisations and churches, and in helping to create new initiatives such as Dementia Action Week, which comprises around two dozen events

*"I think community wise, it's got a lot stronger, reaching out to the community, getting the community involved, etc, and getting people, for example, getting the Mayor involved with things. Being the Mayor's charity [of the year], highlighted exactly what a valuable resource it is." (Winchester Radio community partner)*

## Chapter 6 The relationship between hospital, health and wellbeing broadcasting and the setting

Strong relationships with healthcare staff, especially senior leadership and board members, can help secure a station's long-term future and boost patient and staff awareness. Strong relationships with key decision-makers in particular can provide the platform for stations to advocate for the service and ask for what they need to sustain and improve their service to patients: volunteers need hospital approval to operate on hospital premises, use equipment, and access wards. Relationships with liaison roles, frontline clinical staff and administrators can help build awareness of the radio, remove administrative and logistical barriers, and enable volunteers to do their work well.

### *The stats:*

- ***Almost all stations (76%) say they have a positive relationship with their NHS Trust or Board.***
- ***When asked how often they spoke to key decision-makers, over half (56%) meet at least annually with Trust representatives; and a further 36% meet more than twice per year. A full quarter of stations (25%) have no regular meetings at all.***
- ***Our survey revealed that engagement with staff varies by level, with a quarter (24%) of volunteers saying that ward staff are 'very engaged', compared to only 17% of senior and middle management, and only 16% of Chief Executives.***

There have been a number of challenges in this area, including some of the changes to the healthcare sector, restrictions brought about by the pandemic and the long-term impact of austerity measures, which have led to cutbacks in many hospitals. These have led to negative consequences for some hospital stations: losing their premises, feeling undervalued and unable to promote their service, not able to visit patients, and rigid internal processes that increase administrative burdens and hinder volunteer recruitment.

It is salutary to note that almost four in five NHS staff members (78%) think that hospital broadcasting benefits patients – and two-fifths (39%) think it does so “significantly”, which signals a disconnect between recognising its value, and processes that actively undermine its viability and effectiveness, pointing to a lack of understanding in some settings around what it takes to keep radio hospital going.

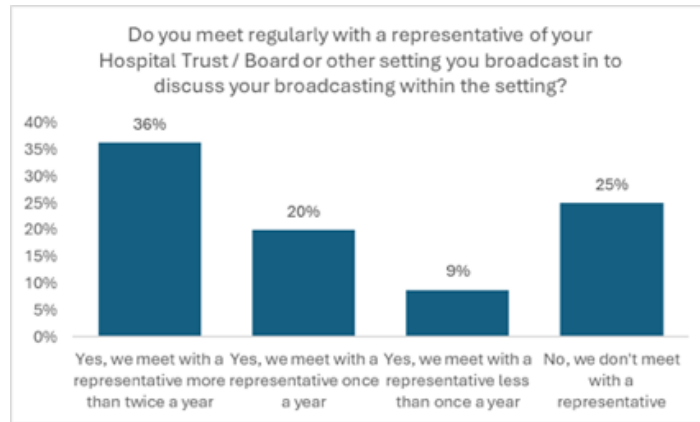


Figure 9: Regularity of meetings between Trust/Board and broadcaster (Online survey, N=80)

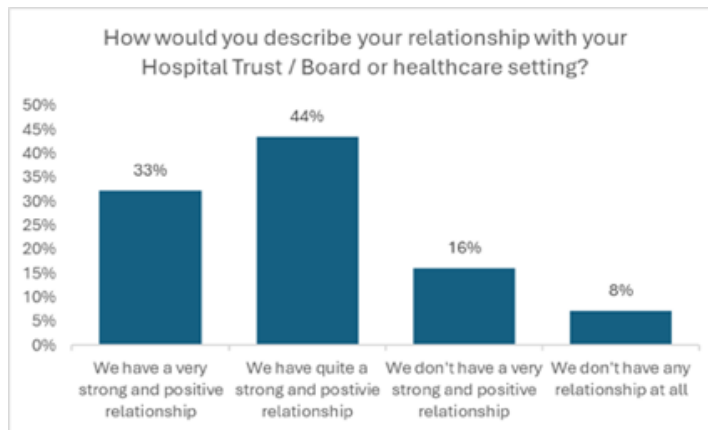


Figure 10: Quality of relationship between the hospital, health and wellbeing station and the setting (Online survey, N=80)

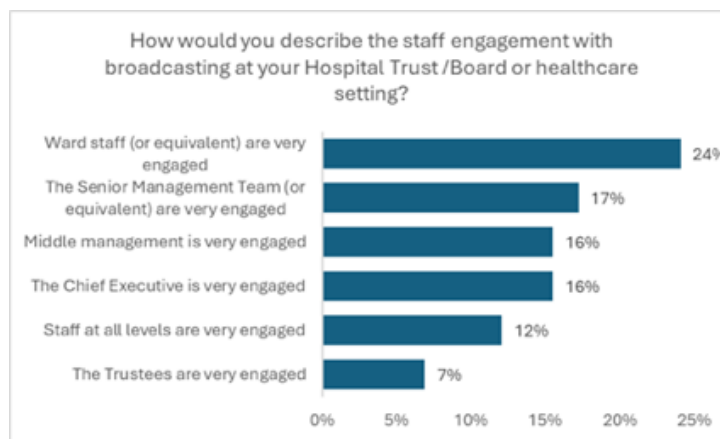


Figure 11: Staff engagement with the hospital, health and wellbeing station (Online survey, N=80)

## NHS Trust/Board influence on broadcasting content

There was an almost 50:50 split between those stations who reported their NHS Trust or Board had influence on content (49%), and those who had none (51%). Only one station out of 80 reported a "great deal" of input, meaning that almost all stations maintain editorial independence from their Trust.

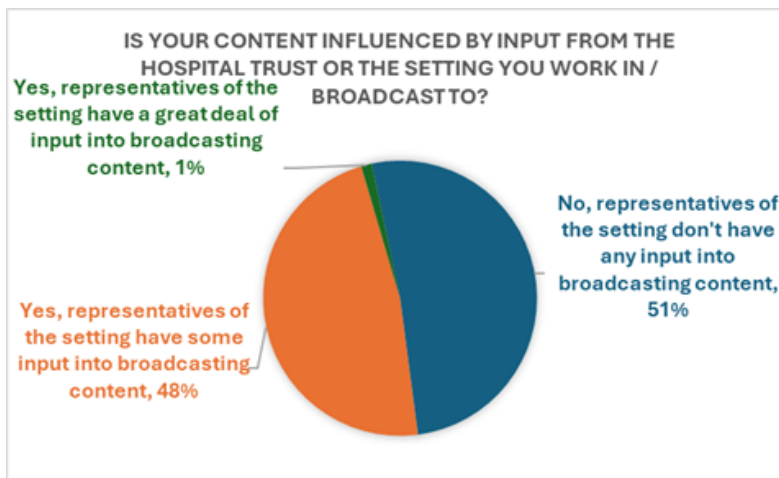


Figure 12: Is your content influenced by input from the hospital trust / board or the setting you work in or broadcast to? (Online survey, N=80)

## Frontline staff awareness and valuing of hospital, health and wellbeing broadcasting

Perhaps one of the more important indicators of a strong relationship between hospital broadcasting and its setting are the levels of awareness and positive affect towards the broadcaster by frontline staff. These can be taken as an indicator of the value of the station to the Trust (how much they have promoted it internally) as well as the effectiveness of the stations' own marketing within the healthcare setting. In our visits, we found that staff knowledge ranges from moderate to limited awareness, with significant inconsistencies across departments and roles. As one staff member noted:

*"There probably are a lot of members of staff that do recommend it but I just don't know if that would be across the board...There is some awareness, but it could be increased as to what hospital radio does" (Royal Devon University Healthcare NHS Foundation Trust Staff).*

From the survey findings, we can see that there's a progressive drop-off from awareness → engagement → understanding: most staff know the service exists, but fewer actively engage, and even fewer truly understand the mission. The data suggests even those broadcasters with good institutional relationships but could benefit from better communicating their mission and value to frontline staff. We found that non-clinical staff are twice as aware as clinical staff (66% aware versus 35% aware). While administrative and support staff are likely to be able to orient patients and their families on admission, clinical staff are the ones most likely to interact with patients who could benefit from the hospital, health and wellbeing broadcasting. Staff members who did listen were twice as likely to do so via a physical radio than via the website or app, likely a reflection of listening passively on the wards or in waiting rooms.

There is a discrepancy between radio volunteer *perceptions* of staff awareness and engagement, and what is actually reported by the healthcare staff themselves according to our surveys. Volunteers may be overestimating how aware and engaged staff actually are, but among staff who do know about hospital, health and wellbeing radio, there's genuine appreciation for its value for patients, and they value it even more than

volunteers think. So, the challenge isn't convincing staff that hospital, health and wellbeing broadcasting is worthwhile; it's making them aware it exists in the first place.

**The stats:**

**Awareness Gap: -27%. Volunteers claimed that 78% of staff are aware, but in the stations we visited, only 51% were actually aware – representing a significant overestimation by volunteers.**

**Engagement Gap: -46%. Even more noticeable was the disparity between what volunteers said in terms of engagement (that 63% of staff engage with them), and the staff reality which showed:**

- Only 14% listen weekly or more.
- Only 17% have ever interacted.
- 76% never listen at all.
- 83% have never interacted.

**Value Recognition: +10%. The importance of hospital, health and wellbeing broadcasting was confirmed very strongly by the staff survey. Volunteers estimated: 59% of staff understand their aims, but actually almost seven in ten staff respondents (69%) see hospital radio as important (very or somewhat) and 76% believe hospital radio benefits patients.**

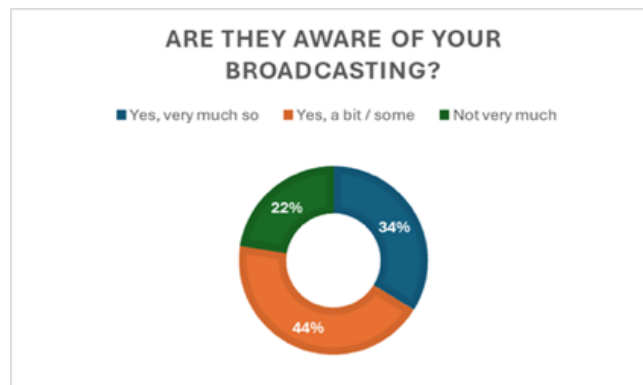


Figure 13: Volunteer's perceptions of staff's awareness of broadcasting (Online survey, N=80)

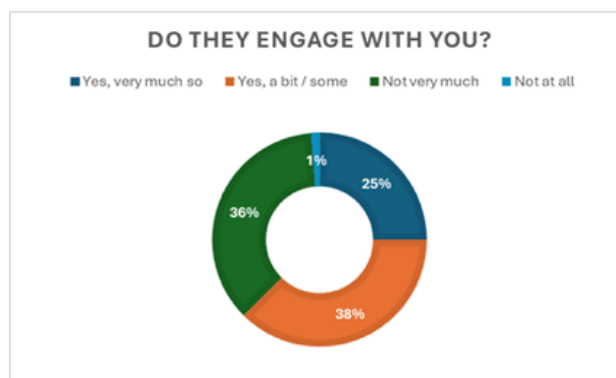


Figure 14: Volunteer's perceptions of staff's engagement with the station (Online survey)

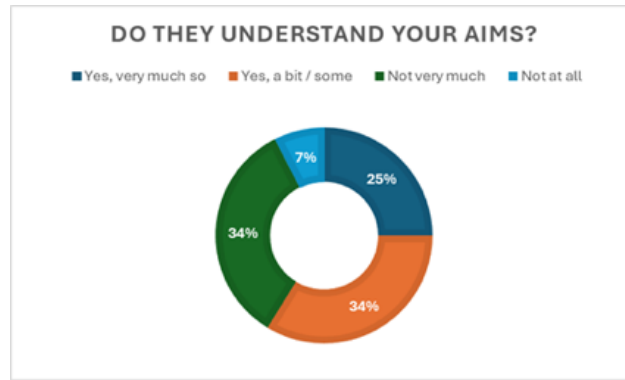


Figure 15: Volunteer's perceptions of staff's understanding of hospital, health and wellbeing broadcasting's aims

## Barriers to awareness

In some cases, physical and policy barriers significantly limit hospital radio's visibility, while traditional promotional methods have been discontinued or restricted. This creates a "hidden service" problem where valuable resources remain largely unknown to those who could benefit most. Some stations reported that infection control measures following COVID-19 restricted the use of promotional posters, and bedside leaflets.

*"You can shout about it all you like, but when you're in the hospital, there's nothing here to tell you that there's a hospital radio service for you" (Staff member at Ysbyty Gwynedd Hospital).*

To mitigate, many hospital radio stations are moving their promotional strategies online but need further publicity via their NHS Trust / Health Board's website. Generally speaking, we found that hospitals tend not to promote healthcare broadcasting as part of their formal offer to patients and is perceived as something being offered by an external team of volunteers – rather than in partnership *with* them. This is certainly not uniformly the case, and some had their stations featured in official hospital literature and on their website.

Many of the staff we spoke to, including volunteer liaison roles and management, did actively support their stations, but had to do so within budget and time constraints. Clearly, hospital staff have primary clinical responsibilities that overshadow promotional activities for ancillary services like hospital, health and wellbeing broadcasting. Staff acknowledge that promotion requires dedicated time and resources that are often limited in healthcare settings. And without clear metrics for awareness or impact, it's challenging to justify resource allocation for promotional activities. Nevertheless, for hospital broadcasting to survive and make an impact on patients, much more active promotion needs to take place during admission and on the wards, by healthcare staff.

*"Hospital Radio have been in the same spot for quite a while, but very recently conversations have just started to happen about them moving because they are in like a prime medical area" (Staff member at Royal Devon University Healthcare NHS Foundation Trust)*

Some hospital radio station's relationships with the hospital Trust / Board are characterised as more of a struggle. In these settings, the volunteers perceived a decline from a "golden age" of hospital-radio station cooperation, feeling increasingly marginalised within modern hospital environments. Some volunteers feel they have to work harder to maintain relevance and access than they used to.

*"We've had really good relationships with our site directors. And then the trouble with NHS [Local Area] is it's a bit like moving all the pieces around sometimes, because you have a really good relationship, and then the*

*next week, you go in and they've moved [to different hospitals] or that are somewhere else, and you have no idea who the replacement is" (Volunteer, HBS Glasgow)*

*"Once I could solve a problem and go to their office with a cake... There's been a whole shift in terms of how it's viewed within hospitals, the support that stations get from their NHS boards and things, and sometimes it can, it can feel very much like a losing battle." (Volunteer, HBS Glasgow)*

Aligning with Hospital Trusts or Boards on their priorities, and bringing the potential of hospital and community-wide broadcasting to the awareness of the communications department – suggesting opportunities for mutual benefits, and fun ways of getting messages to staff, patients, and locals – might be a good starting point for many stations that are currently underappreciated and underused.

## Opportunities for better relationships through shared messaging

Looking to the future, and to secure their continued relevance, some stations are partnering more closely with healthcare staff – with individual doctors and specialists, with departments, and with communications teams – to provide a platform for the hospital to deliver health campaigns via the radio.

*"You need to move out, and one of the ways we've looked at doing that is to become more of a mouthpiece for the hospital in the community... We've done campaigns for various departments which really helps us in our mission, and helps the hospital along as well." (Volunteer, Radio Hillingdon)*

*"We are here to help people, and these messages can potentially prevent people from going back into hospital or prevent people from even coming into hospital in the first place" (Volunteer, Torbay Hospital Radio)*

Many stations are already broadcasting healthcare radio beyond the hospital walls or are looking to. Those we spoke to told us that partnering with those in healthcare roles, including GPs, care home nurses, clinical staff at hospitals, was crucial to getting health and wellbeing messaging into the wider community. Some of the NHS teams that were more actively involved in hospital broadcasting provided their own scripts, ensuring evidence-backed advice and safe messaging, especially for seasonal campaigns like vaccinations. Some even had their own regular slots on the programme as presenters. In care homes, staff have helped to shape the programming with hospital radio volunteers to create reminiscence hours, movement-and-music sessions, and hydration prompts. This provides more visibility for hospital, health and wellbeing broadcasting and incentivises staff to tune in instead of listening to other commercial stations.

*"Partnerships with NHS and community organisations are crucial for sustainable outreach... Engaging staff and community leaders can be a game-changer" (Volunteer, HBS Glasgow)*

*"[People are in hospitals for shorter stays] which is why we've looked outside the hospital as much as possible to places like care homes, to hospitals that are perhaps homes like psychiatric hospitals, where people are living in longer term, then looking at the elderly, lonely, perhaps in the community." (Volunteer, HBS Glasgow)*

## Chapter 7 The future of hospital, health and wellbeing broadcasting

The future of hospital, health and wellbeing broadcasting is not unidirectional but on a number of different paths and journeys. While some stations are deepening their commitment to delivering focussed broadcasting within hospital settings, others are taking their stations firmly beyond the hospital walls into the community, and many different blended versions in between.

Volunteers diverge in their opinions on the purpose and future of hospital broadcasting. Some resist the trend towards community health broadcasting, saying it shouldn't become the 'standard model' for all. Instead, they want to commit more fully to hospital patients, their family and friends, and to staff, bringing all the benefits detailed in this evaluation. As one volunteer told us: *"[Hospital Radio] is about the relief of the sickness and all the things that come with it during a stay in hospital, or while you're receiving care in the community, or whatever it will be. And if you forget that, you may as well just go and do a podcast somewhere or go and become an internet radio station [...] HBA many years ago had a slogan "the friend at the bedside" – yeah, very cheesy but it's that idea."* (Volunteer, HBS Glasgow).

For some, shifting from hospital to community broadcasting is a way of ensuring the sustainability and continued relevance of the radio station into the future: *"I would like us to be a community health and wellbeing station, I think that's the only way we can survive as a radio station ... gone are the days of truly local radio and that's something in the future we would like to emulate: move out of the hospital and into the community."* (Volunteer, Radio Hillingdon).

Those in favour of expanding beyond the hospital point to fundamental changes in the modern in-patient experience that have reduced the very problems hospital broadcasting hopes to address– long hospital stays, no contact with the outside, and lack of entertainment. In line with NHS policy, patients for elective procedures spend less time in hospital and recover at home instead<sup>38</sup>, they can bring personal devices with on-demand entertainment and even visits from friends and family can happen remotely via video link. This means that the core activities of traditional hospital broadcasting – reducing boredom, providing entertainment, and reducing social isolation – may be less urgently needed and affect fewer patients than in previous decades.

In response, many broadcasters have identified two unique selling points that justify expansion: health and wellbeing messaging (content that mainstream broadcasting doesn't provide) and broadcasting to the wider local community (filling the gap left by ongoing closures of local independent radio stations). For these broadcasters, shifting focus from hospital-only to community healthcare makes strategic sense.

The stations we visited, who were focused on remaining, first and foremost, a hospital radio station, were being equally as pragmatic as those who were expanding into new domains. One such station had collaborations with clinicians and supporting service providers (e.g., outreach programmes like smoking cessation, social care, other VCSEs affiliated with the hospital) that made their broadcasting very tailored and bespoke to their listeners (more broadly defined as anyone who comes into contact with the hospital, even if only visiting the website). Another had a dependable volunteer base, strong sense of mission, and good relationships with hospital staff, meaning they didn't need to invest effort or resources into expanding or changing to sustain

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<sup>38</sup> NHS England News (2023) Millions of patients to benefit from care at home thanks to NHS community response teams (<https://www.england.nhs.uk/2023/03/millions-of-patients-to-benefit-from-care-at-home-thanks-to-nhs-community-response-teams/>).

themselves. Another direction being taken is to rebrand and expand the station across all hospitals covered by the Trust or Board; still focussing on serving the needs of the patient population, but at a larger scale.

We encountered a number of different models during this evaluation, for example:

- Focussing on securing their place/ improving their service for hospital patients.
- Expanding into new locations (GP surgeries, care homes, etc.)
- Shift focus to health and wellbeing messaging that goes beyond hospital stays.
- Becoming a community radio station (transition to FM / Small Scale DAB).

Besides this, many stations were also wrangling with technological advances for better broadcasting (e.g. working from home, or on location) and developing new platforms for improving reach (e.g. online streaming, apps, podcasts). Stations are generally evolving and innovating by adapting to their different contexts and building on their strengths. But stations face a number of challenges as well as opportunities on their journeys into the future.

### Challenges

1. Limited direct engagement with listeners.
2. Inefficient feedback loop.
3. Limited awareness.
4. Technology – investment and barriers.
5. Regulatory and Broadcast Licence Issues.
6. Recruitment of volunteers.
7. Relationship with the setting(s).
8. Funding and long-term security/ sustainability.

## 1. Limited direct engagement with listeners

As noted in the introduction, post-pandemic restrictions, and increased infection control measures in hospitals has made ward visits and direct patient interaction more difficult for many stations. For stations broadcasting to the community there are limited options for face-to-face engagement, and broadcasters have to rely more heavily on interactive content and listener feedback if they want to understand listeners' likes and wants better.

*"[We] currently have zero [song requests per week], as we have lost our two ward visitors and find this very difficult to recruit." (Volunteer, Highland Hospital Radio)*

*Question in survey: If you do not currently go out to visit listeners, what is the primary reason for this? Are there any barriers to you being able to do this?*

1. *Trust or Board restrictions / COVID-era policy – 6 (43%)*  
*e.g. "Health Trust forbids it since COVID...", "Hospital Trust does not permit us to visit wards", "Restrictions in place from the health board".*
2. *Volunteer shortage – 4 (29%)*  
*e.g. "We don't have the volunteer numbers...", "We have not recovered our ward teams since COVID".*
3. *DBS / admin barriers – 1 (7%)*  
*e.g. "DBS checks... extra paperwork."*

4. *Operational barriers (wards busy / comms) – 1 (7%)*  
e.g. “Wards are normally very busy, lack of communication [with healthcare staff].”
5. *Alternative engagement instead of visits – 1 (7%)*  
e.g. “We tried and found better engagement via staff email feedback.”
6. *Working to resume ward visits – 1 (7.1%)*  
e.g. “we [are] working with the staff to make this happen... after COVID.”

*(Note: Several “Trust or Board restriction” comments explicitly cite COVID-era policies that have not yet been lifted. The “volunteer shortage” thread includes both recruitment gaps and post-COVID team depletion.)*

## 2. Inefficient feedback loop

**The stats:**

- **Track listener numbers: 51%.**
- **Collect content feedback: 71%.**
- **Collect impact feedback: 60%.**

While over two-thirds (71%) of stations collect content feedback, only three-fifths (60%) collect impact feedback and just half (51%) track listener numbers (although this is partly due to how they broadcast). Without good and consistent feedback from listeners it is very hard for broadcasters to monitor whether they are doing the right things and having the impact they intend. During our station visits, volunteers told us that their aspirations for expanding listenership and improving outreach were being hindered by not having an effective website, consistent social media presence, or marketing more generally.

## 3. Reaching listeners - limited awareness

There is limited patient awareness of hospital radio, due to a number of factors:

- the increased competition from patient’s own handheld devices;
- loss of, or malfunctioning, bedside devices (fewer than one in five stations (19%) can be heard via a sound system throughout their setting);
- reduced ward visits and shorter stays in hospital for those undergoing more routine elective procedures.

Awareness is even more difficult to raise outside of the hospital in the community, and stations generally feel that there is only partial awareness, with 60% of stations feeling that the community is “somewhat aware” of them, and 31% feeling the community is not very aware of them. Some stations have tried to raise awareness by creating their own apps, and by having a bigger presence in the hospital (e.g. screens or audio within the hospital’s public areas), but more needs to be done, and preferably by healthcare staff by recommending it themselves, and by allowing posters and ward visits to resume.

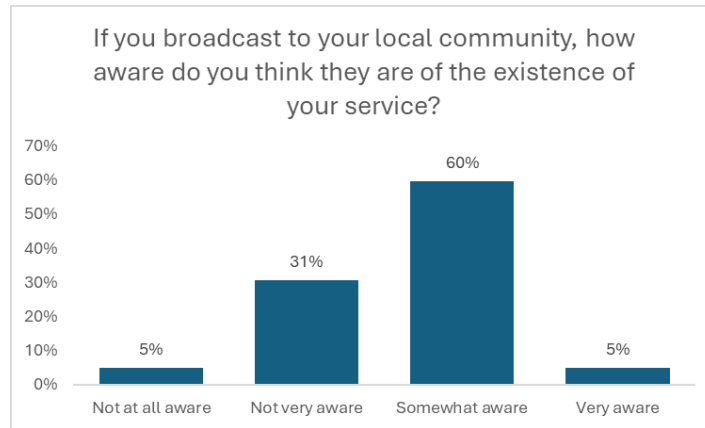


Figure 16: If you broadcast to your local community, how aware do you think they are of the existence of your service? (Online survey, N=80)

*“We have launched an app which received good external and internal press coverage. We are making ongoing efforts to make patients and staff better aware that we are there and what we offer.” (Hospital Radio Ipswich)*

#### 4. Technology – investment and barriers

Technology poses both opportunities and barriers. For example, not all patients have access to devices to listen, especially since ‘Hospedia’ and other listening devices have been removed from bedsides in some hospitals. While younger listeners are much more likely to be listening online, through their own devices, older patients struggle to listen to radio online. And with older patients still being a primary audience for hospital radio, this is an issue.

While 84% of stations have invested in new technology over the last five years, 16% have not. This will likely continue to be the case: technology is always evolving, so stations will need to keep up.

While some hospital NHS Trusts / Boards have been very good at working with the hospital radio stations to increase their coverage through Alexa or Amazon Echo speakers, Wi-Fi speakers and bedside radios, others have been less supportive around this.

*“Finally going online in 2022 but having missed the curve we are way behind in terms of awareness of the service.” (Volunteer)*

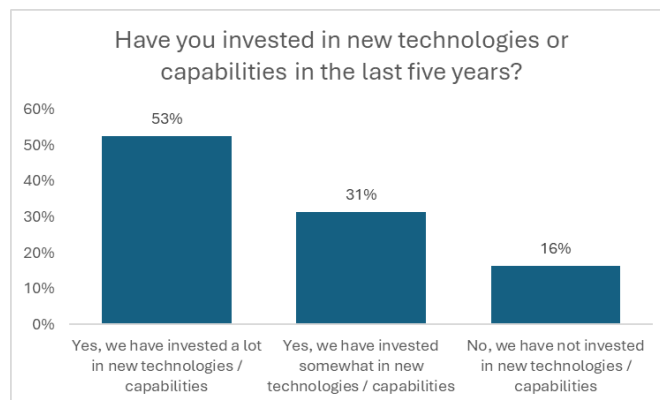


Figure 17: Have you invested in new technologies or capabilities in the last five years? (Online survey, N=80)

## 5. Regulatory and Broadcast Licence Issues

Most Hospital Radio Stations need to comply with a number of different regulations, for example, the relevant Charities Act<sup>39</sup> if they are, or are part of, a registered charity, and the PPL and PRS for Music. Those with Ofcom licenses (typically those who are on SS-DAB, FM, or AM) also need to comply with Ofcom regulation. In addition, HBA members need to demonstrate that their objects broadly align with those of HBA's objects. HBA encourages stations to be compliant with the code as 'best practice', which also helps if a station decides at some point in the future to adopt the 'community' route. Licensing requirements may change if a station starts to broadcast on different media (e.g. DAB, online). These incur both expense and an administrative burden.

*"Many of the hospital radio stations are unincorporated entities. So, there's a disconnect between what the regulators for broadcasting, etc, might expect... there's a problem of not understanding really what hospital radio stations are" (Volunteer, HBS Glasgow)*

## 6. Volunteer recruitment

Although there is an overall net gain in volunteer numbers across all stations, recruitment remains a significant challenge for many stations, and some are still trying to fill gaps left during COVID when volunteering dropped off. It's not just about numbers, but about recruiting people with the right aptitude, attitude and skills - particularly with new technology.

There are often additional administrative and safeguarding issues around recruitment in hospital environments, where NHS bureaucracy may overburden volunteers. Many stations shared this frustration, telling us that the paperwork, application processing time, criminal record checks, mandated training and occupational health assessments can be disproportionate, and present a much higher barrier to entry compared with similar volunteering opportunities available to potential new recruits.

One NHS Chief Executive we spoke to acknowledged the problem: *"I've had to say to a couple of my teams, please do understand, these are volunteers. You cannot just click your fingers and expect them to fill in your paperwork tomorrow because that's not how this works."* This reveals a fundamental mismatch between NHS bureaucracy and volunteer capacity or motivation.

## 7. Relationship with the setting(s)

Despite many stations reporting a strong and positive relationship with their NHS Trust or Board, this is such a crucial enabling factor for success that more could still be done here. Having senior management team members onsite can be transformational in terms of buy-in, leading to better facility-provision, raised awareness and a true two-way partnership. Challenges exist in both brokering new relationships and maintaining existing ones, and regular communication with the setting is likely to be key to partnership working.

Challenges also exist in brokering new relationships with community-based healthcare settings, e.g. care homes, GP surgeries, dental practices, where the advantage of Hospital, health and wellbeing Broadcasting may not be as obvious.

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<sup>39</sup> Charities Act (England and Wales) 2022; Charities (Regulation and Administration) Act (Scotland) 2023; and the Charities Act (Northern Ireland), 2022.

## 8. Funding and long-term security/ sustainability

Stations need funding to maintain their service, raise awareness and to evolve, such as investing in new technology and licensing, or to move into a new area of broadcasting. Hospital, health and wellbeing broadcasting is not paid for by the setting and stations raise money in different ways, including donations, sponsorship and grant funding. Raising money takes time and effort on the part of already-busy volunteers.

*"We're not there to make money, but at the same time, we still need to keep the station running, because there are costs associated with it." (Volunteer, Winchester Radio)*

Table 5: How do you cover your costs? (Online survey, N=80)

	Mentions	Percentage (%)
Donations	74	24%
Community fundraising	63	20%
Sponsorship	50	16%
Grant funding	49	16%
Volunteers pay for things out of their own pockets	43	14%
Paid-for advertising	17	5%
Paid-for services	8	3%
Other* <sup>40</sup>	8	3%

In the current economy, all sources of voluntary funding are being squeezed, making fundraising more challenging, while commercial sponsorship and advertising are also being reduced<sup>41</sup>. With one sixth (14%) of stations relying on volunteers paying for things out of their own pockets, this financial squeeze is a hard mountain for stations to climb, with ongoing sustainability becoming an increasing worry for some.

## Opportunities for hospital, health and wellbeing stations

Some challenges are also opportunities. For example, while the COVID-19 pandemic presented a number of difficulties and barriers, it also pushed many stations into innovative adaptations that changed the way they operated for good.

*"When we faced COVID and the impossibility of connecting with the wards and patients, we ... rebranded, moving away from naming a precise hospital to become something that was more holistic and encompassing on health, well-being, etc, so we could open up to a number of other opportunities we were discussing before: GP surgeries, dentists, care homes, not just the hospital."*  
(Volunteer, HBS Glasgow)

Table 6: Opportunities for hospital, health and wellbeing radio to consider

<sup>40</sup> 'Other' includes membership subscriptions, gifts in kind, and investments.

<sup>41</sup> Ofcom (2024) Media Nations UK 2024 (<https://www.ofcom.org.uk/media-use-and-attitudes/media-habits-adults/media-nations-2024>).

People still love radio	Music radio is still the most popular form of audio content in terms of weekly reach of adults, according to recent Ofcom research <sup>42</sup> . While music is the priority for a majority of people, speech radio is the second most popular audio type for the over 55s, who mainly use it to catch up on news (46%) and to learn something new (42%).
There are more forms of audio content, and ways to listen	Although RAJAR data shows that most radio listening is still through analogue or DAB radio sets, Spotify is the most commonly used service for podcasts, reaching 37% of listeners who listen to podcasts <sup>43</sup> .
Different age groups can be targeted with different content and ways to listen	Younger listeners (16-34) are more likely to listen to online music and music video services, while older listeners are more likely to tune in to music radio <sup>44</sup> .
Health and Wellbeing broadcasting is important to older age groups	One fifth of adults listen to podcasts each week, with one quarter (27%) of over 55s listening to Health and Wellbeing podcasts, according to Ofcom (more than younger age groups) <sup>45</sup> . Health and Wellbeing is the fourth most listened to podcast topic after news, politics and general talk shows).
Two-way working relationship with the setting	There are opportunities for hospital, health and wellbeing providers to make better use of hospital, health and wellbeing broadcasting stations' technology, audio studios, and engaged, passionate volunteers to complement their existing communications <sup>46</sup> .
Be the default setting	Recent Ofcom research found that the majority of smart speakers have never been changed from their default settings for news updates (73%) or music (68%) <sup>47</sup> . Particularly for those stations broadcasting through smart speakers in their settings, this is a huge opportunity, and a no-brainer, to become the default station.

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<sup>42</sup> Ofcom (2024) Audio listening in the UK (<https://www.ofcom.org.uk/siteassets/resources/documents/research-and-data/data/statistics/2024/audio-report-2024/ofcom-audio-report.pdf?v=320716>).

<sup>43</sup> Ibid.

<sup>44</sup> Ibid.

<sup>45</sup> Ibid.

<sup>46</sup> Ibid.

<sup>47</sup> Ibid.

## Chapter 8 Conclusions and Recommendations

Hospital, health and wellbeing Broadcasting remains a uniquely beneficial tool for improving patient and listener wellbeing. Broadcasting reduces negative psychosocial health outcomes such as boredom, isolation and anxiety by providing entertainment, and a calming and reassuring presence. It provides social interaction, an improved sense of community and improves people's understanding and awareness of health and wellbeing issues. Not only does this improve patients' wellbeing and health outcomes, but hospital, health and wellbeing broadcasting also has many positive effects on staff at the setting, as well as for volunteers at the stations.

In the last ten years, since the first evaluation of the HBA member network, hospital, health and wellbeing broadcasting has evolved dramatically to adapt to a changing environment, including more restricted access to listeners, technological advances in broadcasting and changed listening habits. In response, stations have embraced remote broadcasting, broadcasting via different media and to wider audiences.

What is clear is that while there is a growing range of personal entertainment media available to people, hospital, health and wellbeing broadcasting should not position itself in competition with these, but as its own, special and unique entity that everyone can engage with, for free and at any time. The ambition should be that as many people as possible are aware of it and have the opportunity to listen to it for as long as they'd like. Efforts should be prioritised on growing awareness of hospital, health and wellbeing radio's existence, inside and outside the hospital, learning what local people would like but are missing from other radio stations (e.g. a truly local focus, regionally specific or niche programming, local accents and languages, or broadcasts from community events) and promoting the station based on those unique selling points.

*"The hospitals are actively giving people access to the internet, so once they've got that, they've got Spotify, Apple music, they've got everything that they want. So, you have to have a unique selling point to your station and I think if you try to stay just purely for the patients in the hospital, then be prepared to fail" (Volunteer, Radio Hillingdon)*

*"I'm not a patient, I just love listening from my work/home, the presenters are local, engaging and knowledgeable and great interviews and music" (Patient, Radio Ysbyty Gwynedd)*

### Recommendations: Quick wins and longer-term ambitions

A number of very practical recommendations arose from the evaluation:

- Promote greater awareness of the station, e.g.
  - Advertise the programme schedule so that people can tune in at an optimal time for them - let staff know so they can put on and recommend shows.
  - Have screens / speakers put into communal areas.
  - Ask to be on air by default in communal areas where radio / audio is played.
  - Ask community partners to promote on your behalf.
  - Create small, useful, awareness raising prompts e.g. bookmarks.
- Invest in technology, e.g.
  - Increase the range of ways people can listen so that a wider range of listeners can tune in using their preferred methods.
  - Provide on-demand access so patients/listeners can listen at their own pace and when they feel most comfortable.
  - Use social media to create multiple touchpoints for audiences to discover and engage with programming.

- Invest in training and recruitment, e.g.
  - Advances in technology will require ongoing training and recruitment of volunteers with the relevant digital skills.

## Recommendations: What HBA could do for its members

In summary:

- Create a “Working with your Trust or healthcare setting” relationship toolkit.
- Develop guidance for engaging senior leadership and “champions”.
- Produce model agreements / MOUs between stations and Trusts.
- Commission and share simple impact evidence tools (patient & volunteer).
- Develop a central advocacy narrative and briefing pack for commissioners and funders.
- Provide tailored support and guidance for community facing broadcasting.
- Continue to monitor, measure and promote the impact of the member network.
- Promote what the HBA does for stations.

More detailed recommendations have been made to the HBA.

## Recommendations: What individual stations can do

*Establish regular, structured meetings with volunteer liaison officers, NHS Trust (or Board) members, or senior managers in external settings*

Establish regular meetings with key contacts such as senior management, volunteer services, communications and patient experience teams. Quarterly or bi-annual liaison meetings can be used to align programming with upcoming campaigns, resolve access issues, and keep the service visible to hospital/setting leaders as part of the wider patient/resident/user experience and communication offer.

Many hospitals may benefit (and, indeed, many do) from using hospital radio to deliver public service announcements (PSAs) on behalf of the hospitals administration. If stations are not already providing this service, and who are looking to strengthen their relationship, this may be a good place to start and an attractive offer for the hospital administration. Meetings would need to be regular, to ensure that news and messages stay up-to-date and relevant, and this regularity will incidentally also foster better relationships – and showcase the utility and indispensability of hospital radio over time.

*Proactively cultivate personal relationships with ward and clinical staff in hospitals, and/or staff in wider healthcare settings*

Invest time in building informal, trusting relationships with ward level staff, especially nurses and clinicians, within formal access rules. These relationships not only enable smoother access and cooperation but also create opportunities for staff to contribute to shows, request shoutouts, and see hospital radio as an ally in supporting patient and staff wellbeing.

Stations could develop regular staff-facing segments such as shoutouts, thankyou messages and celebration of milestones to support staff morale. With hospital agreement, these can be promoted as part of wider staff wellbeing efforts, using staff voices and stories to strengthen connection between patients, families and the teams caring for them.

Build personal relationships with ward staff (nurses, clinicians, and healthcare assistants) who can champion the service at the bedside. Ward staff can facilitate access, encourage patient requests, and participate in short

segments that patients enjoy hearing. Small gestures like staff shout-outs, birthday announcements, and recognition of milestones can strengthen these relationships and boost staff morale.

### *Explore and formalise links with community health, social prescribing and loneliness initiatives*

Stations, especially those with community reach, should actively seek partnerships with social prescribing link workers, community health teams and local voluntary groups. This can position hospital, health and wellbeing radio as part of the local ecosystem addressing loneliness, recovery, and long-term conditions, including advertising local events, groups and services of relevance to discharged patients and isolated listeners. Having more listeners not only increases the visibility of stations, increasing the likelihood of sponsorship and other sustainable funding, but also gets important preventative health and well-being messaging to the public before they need to go to hospital.

### *Undertake basic local audience and stakeholder mapping*

Use simple tools (that should be supplied by HBA) to identify who their current and potential listeners and stakeholders are – in hospital and in the community. This might include mapping key wards, local care homes, community groups, and digital platforms, so that limited volunteer time and programming effort are targeted where they can have the most impact.

### *Showcase and share successful fundraising and community engagement models*

Share examples of successful fundraising events, community partnerships, and volunteer recruitment drives through HBA networks. Examples like Radio Horton's hog roast and disco, or stations that have built strong relationships with hospital charity teams, can inspire and guide others. HBA could facilitate peer learning through webinars, a shared resource library, or regional meet-ups.

### *Regularly collect and share patient/listener, volunteer, and staff feedback*

Use simple, ongoing feedback mechanisms (e.g. bedside cards, online forms – with guidance/ tools provided by HBA) to understand what's working and what could improve. This feedback can inform programming decisions, demonstrate impact to hospital partners, fundraising and grant applications, and help volunteers feel their work is valued and effective. HBA's evaluation toolkit can provide templates and guidance. The outputs from this can be combined with data around stations' fundraising activities, their limited resources, and total hours of volunteering, to tell the compelling story of how hospital broadcasters do so much with so little – while asking the hospital itself for very little.



# HBA

Research undertaken by:



shortwork

For more information and for a summary version of this report, visit [hbauk.com/impact](https://hbauk.com/impact)  
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