

**SEATTLE PACIFIC UNIVERSITY**  
**MUSIC THERAPY PROGRAM HANDBOOK**  
**2018 – 2019**

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## SPU MUSIC THERAPY PROGRAM FACULTY

**Dr. Carlene J. Brown, MT-BC**

Associate Professor, Music Department  
Director, Music Therapy Program  
Crawford Hall, Rm 206  
[browncj@spu.edu](mailto:browncj@spu.edu)  
206.281-2920 (o)

**Patti Catalano, MM, MT-BC**

Adjunct Faculty  
Crawford Hall, Rm 102  
[catalanop@spu.edu](mailto:catalanop@spu.edu)  
206.281.2205 (o)

**Wendy Woolsey, M.A., MT-BC**

Adjunct Faculty  
Crawford Hall, Rm 102  
[woolseyw@spu.edu](mailto:woolseyw@spu.edu)  
206.281.2205 (o)

## Seattle Pacific University Music Therapy Program Introduction & Overview

We welcome your interest in the Music Therapy Program at SPU! We are proud that in July 2009 Seattle Pacific University became the first academic institution in the state of Washington to offer the undergraduate music therapy degree program accredited by the national American Music Therapy Association (AMTA). The Bachelor of Arts in Music Therapy program is now well established, and many opportunities await those who seek to use their gift of music to serve others. The program draws upon your musicianship, empathy, patience, persistence, creativity, dedication and personal commitment to become a board-certified music therapist. Our goal is to provide you with a personalized education of classroom and practical clinical experiences that will allow the music therapist within you to develop in a manner that is appropriate for you. In this shared journey, you will become increasingly aware of who you are as a musician and why you have chosen music therapy as your profession.

The program is designed for you to develop entry-level competencies required as a professional music therapist, prepare you for a clinical internship and ultimately pass the national board certification exam. We encourage you to think critically so that you can learn to participate and serve as a clinician, treatment team member, and active professional. We hope to inspire you with a passion to continue learning about music therapy and yourself – a passion that will propel you into the profession and sustain you throughout your professional career.

### What is Music Therapy?

AMTA defines Music Therapy as: the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program.

Music Therapy is an established allied health profession in which structured music interventions are used within a therapeutic relationship to address physical, emotional, cognitive, and social needs of individuals or groups of individuals. Research supports the effectiveness of music therapy in a wide variety of healthcare and educational settings. Music therapists **assess** emotional well-being, physical health, social functioning, communication abilities, and cognitive skills through musical responses; **design music sessions** for individuals and groups based on client needs using music (e.g., improvisation, receptive music listening, song writing, lyric discussion, music and imagery, music performance, and learning through music); participate in interdisciplinary **treatment planning** (e.g., physicians, nurses, teachers, psychologists, etc.); ongoing **evaluation** and follow-up. Music therapists work with all age groups, from the newborn's entry into our world to seniors with aging related conditions, providing services for those with developmental and physical disabilities, psychiatric disorders, chronic or terminal illness, speech and hearing impairments, neurological impairments, or for those in need of an environment of healing and peace.

To practice music therapy persons must complete an approved college music therapy curriculum, including a full-time, six-month internship, to become eligible to take the national examination offered by the Certification Board for Music Therapists. Upon successful completion, music therapists obtain the credential of MT-BC (Music Therapist-Board Certified). This Handbook outlines the curriculum for obtaining a Bachelor of Arts in Music Therapy degree at Seattle Pacific University.

## **Pursuing the mission....**

The SPU music department mission states the following:

The Music Department at Seattle Pacific University seeks to be an exemplary music community committed to helping students to develop their talents and abilities fully, to engage cultural heritage, and to integrate music knowledge and skills in a life characterized by Christian faith, wholeness, and service.

A direct outcome of this shared commitment is the Music Therapy Program. We understand that as Christians we often seek to define our lives by utilizing and fully embracing the gifts God has bestowed upon us. As Christian musicians, we seek to define ourselves, our purpose through the art of music. Performance is one way to realize our gifts. Music therapy is yet another means of pursuing a vocational focus, allowing musicians to offer their gifts in a community setting to specialized populations. The music department at SPU offers music therapy students a strong community of trained music professionals within a Christian setting. In addition, a unique emphasis of the SPU's music therapy program, through coursework and modeled clinical practice, is the encouragement of wellness – one's physical, emotional, and spiritual well-being - for both the student and client.

Music therapy students will have opportunities to learn how to apply their musical skills in a variety of community facilities, e.g., hospitals, special education classrooms, mental health facilities, rehabilitation centers, senior centers, nursing homes, and hospice programs. Students will be able to follow their calling to serve specialized populations in nearby neighborhoods or across the globe.

How does a music therapist “engage the culture, and change the world?” By fully understanding the power of music, of how music may be used to alter an individual's state of being, that music is a medium that can affect the individual as well as the masses, that there are no limits or boundaries to how one's musicianship can be used around the globe for the purpose of affecting health and well-being. The academic and clinical requirements and standards of the American Music Therapy Association united with the global perspective and strong academic programs and faculty on the SPU campus offers a truly rigorous, unique discipline, rooted in the ideals of Christian outreach and service.

## Admission to the Music Therapy Program

Upon matriculation to the University, first year and transfer students must enroll in Introduction to Music Therapy, MUS 2560 and Music Therapy Skills & Repertoire, MUS 2561. These courses are designed to introduce students to the field of music therapy to determine interest and commitment to music therapy as a career. In addition, intended majors should enroll in Music Theory, Aural Skills, and Keyboard classes for the academic year; students are also expected each term to take private music lessons on their primary instrument and join one of the SPU ensembles.

Intended majors are expected to apply to the music department to declare Music Therapy as a degree major by spring term, freshman year, or for transfer students, upon completing both MUS 2560 & MUS 2561. See the Music Department Handbook for requirements for all music majors, regardless of program. Applicants will be eligible for enrollment in the Music Therapy program based upon the following requirements:

- Complete an interview with the Music Therapy faculty.
- Play a musical selection of your choice on your primary instrument.
- Demonstrate your ability to sing, play the piano and guitar, if not your primary instrument.
- Submit a one-page statement that speaks to your interest in the field.
- A minimum GPA of 3.0 is required for admission to the music department, as well as the Music Therapy Program.

Please note that gaining acceptance to the Music Therapy Program is a competitive process. Currently, there are a finite number of spots available each year. A strong candidate for the program will demonstrate musicianship, time management skills, an ability to be both independent as well as a contributing member of a community, and a passion for pursuing this career.

Upon recommendation of the Director of Music Therapy (DMT), the music department will evaluate the student's formal application and collectively determine whether the student will be accepted into the major, accepted with some conditions, or denied admittance.

### **Academic / Musical Deficiencies**

Applicants must meet baseline requirements for admission to the music department, as well as to the Music Therapy Program. If an intended music therapy student demonstrates an academic or musical deficiency in the freshman year the student will be advised to pursue a number of support options, e.g., consult with the SPU Center for Learning for tutorial assistance, receive mentorship from an advanced music student, or pursue remedial courses.

## **Academic Status**

Upon admittance to the Music Therapy Program, the Director of Music Therapy will advise students. Students will meet with the DMT quarterly to track competencies achieved, grades, and academic planning. Most important, this one-to-one time will offer the student an opportunity to reflect on personal growth and state any concerns or offer feedback on the program.

While the DMT is the primary academic advisor for all music therapy students, you are also strongly encouraged to interact and develop professional relationships with Board-Certified Music Therapists on the faculty and in the community. These allies can also provide support, advice, and opportunities to further your understanding of the field and help launch your career.

**All music therapy students are required to obtain student membership in the American Music Therapy Association each year.** Student membership in AMTA will automatically enroll you as a member of the Western Region Chapter of AMTA for Students (WRAMTAS). Membership in AMTA/WRAMTAS provides the privilege of participation in the activities of both organizations, receive the Journal of Music Therapy, Music Therapy Perspectives and other publications of the Association. Student membership also **offers a number of scholarships** through both national and regional levels. The membership year is 12 months, from January 1 through December 31. See [www.musictherapy.org](http://www.musictherapy.org) or [www.wramtas.org](http://www.wramtas.org) for information and the application to join.

Students must receive a C- or better in all music therapy classes in order to be eligible for internship. Academic probation – students receiving more than one C or C- in music therapy courses, may necessitate a student to re-enroll in a course. Students must maintain a minimum 3.1 overall grade point average for all music courses. Repeatedly receiving low grades, or written concerns from clinical supervisors, is cause for concern and a discussion of 'fit' for the student would be important.

## **Conditions for dismissal**

Music therapy students must abide by the AMTA Code of Ethics and all SPU policies, rules, regulations, and standards. Failure to do so will result in an immediate review of the student's status and potential removal from the practicum site, course, or program. Any behavior which is deemed inappropriate by faculty, site supervisor or other personnel at the practicum site constitutes grounds for removal.

## The SPU Music Therapy Program Training Plan

The SPU Music Therapy Program Training Plan is intended to state clear expectations for SPU music therapy students on the requirements needed for graduation and earning the MT-BC designation. Included in the Training Plan is an outline of the roles and responsibilities of the music therapy student as well as music therapy faculty. The Training Plan must be reviewed and signed by the music therapy student and Director of Music Therapy once the student has been admitted to the SPU Music Therapy Program.

### Minimum Grade Requirements

- Student must maintain a minimum 2.0 overall grade point average for all coursework.
- Student must maintain a minimum 3.0 overall grade point average for all music courses, including music therapy courses.

### Musicianship

- A Music Therapy student is first and foremost an accomplished musician. Therefore, we expect the student to take private lessons on their primary instrument as well as participate in large and small group ensembles for most of their undergraduate training.
- A junior recital (30 minutes of performance) is expected before the last quarter of matriculation. Please see the Music Department Handbook for detailed instructions on preparing for the recital. In rare circumstances, a student may petition for an alternative means to demonstrate musical skill level, as approved by the Director of Music Therapy.

### Proficiency Exams

- Students must pass a piano, guitar and voice proficiency exam at the beginning of the senior year (see Music Therapy Student Handbook for details).
- It is the responsibility of the student to work on areas of deficiency that will meet the expectations of the program and internship sites.

### Clinical Hour Requirements

- Practicum hours must equal a minimum of 180 hours.
- Minimum 80% client contact hours; 20% for planning sessions, conferences/workshops.
- Internship hours must equal a minimum of 1020 hours.
- Total minimum requirement for all clinical training hours will equal 1200 hours.
- Students are responsible for keeping accurate logs of practicum hours earned each quarter, obtaining signature from clinical supervisor(s) and submitting to music therapy faculty at the end of each quarter.

### Practicum Placement

- Student will complete fieldwork with at least three different client populations.
- Student will have experience in leading both individual and group sessions during pre- internship training.
- Student will work with both adults and children in practicum placements.
- Music therapy faculty will place student in facility or with population of interest in addition to required populations, as available.

Note: Music Therapy faculty will make every attempt to fulfill these goals, however, because of the changes that can occur within practicum sites, we cannot guarantee the availability of sites each academic term.

### **Internship**

- The Internship site is chosen by the music therapy student with the support of music therapy faculty. Student can refer to the listings of AMTA national roster internship programs, as well as SPU university affiliated sites.
- The SPU Internship Contract Agreement and the SPU Internship Plan and Evaluation of Intern Competencies must be completed by all parties prior to beginning any internship.
- Most applications to an internship program require a letter from the Director of Music Therapy to verify completion of all academic and pre-internship (practicum) hour requirements as stated in this document.

### **Graduation**

- To be eligible to walk for Graduation the student is expected to complete all academic requirements by spring term of the graduating year AND successfully earn an Internship placement.
- If a student chooses to delay the start of an Internship, students will be required to re-apply to SPU if she or he is away from the University for four or more quarters (including summer quarter).
- Upon receiving the final Internship Evaluation from the Internship Supervisor, the Director of Music Therapy contacts SPU Student Academic Services to verify completion of all degree requirements for the B.A. in Music Therapy.
- Upon receiving notification of degree completion, the MT student is eligible to contact the Certification Board for Music Therapists to sit for the music therapy board certification examination.

### **Student Roles & Responsibilities**

- To be aware of and adhere to the AMTA Code of Ethics and AMTA Standards of Clinical Practice.
- To participate in an annual review of individual achievements toward AMTA Professional Competencies.
- To be an active student member in AMTA and the SPU Music Therapy Club each quarter.
- To be responsible for completing all proficiency exams as required.
- To notify music therapy faculty immediately if changes in life circumstances alter any part of the Training Plan.
- To demonstrate proper use and care of MT instruments and materials.
- To seek to be an accomplished musician who demonstrates the discipline required for the field, who understands the power of music and embraces the use of music to serve others.

### **Music Therapy Faculty Roles & Responsibilities**

- Meet with each music therapy student individually to review the Training Plan to take into consideration and/or make appropriate adjustments to fit personal and clinical needs of the student.
- To assist the music therapy student in moving through the Music Therapy Program in a timely manner.
- To strive to create Practicum opportunities that will fulfill expectations of at least three different client populations.
- To assist the music therapy student in successfully gaining an Internship placement.

**By signing below, I understand:**

- To be eligible to graduate or complete an equivalency program I must meet all entry-level competencies as prescribed by AMTA, meet all SPU coursework requirements, complete and document requirements for clinical training hours, and fulfill the Music Therapy Program Training Plan and Internship Agreement. All facets are required for graduation from the SPU Music Therapy Program.
- Successful completion of the Internship Program and passing the national Board Certification exam will permit me to use the designation Board-Certified Music Therapist (MT-BC).

\_\_\_\_\_  
Student Name (Print)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Music Therapy

\_\_\_\_\_  
Date

# THE CURRICULUM

## The B.A. in Music Therapy Curriculum (114/185 cr.)

### Course Requirement List

114 credits Program Credits; 185 Total Degree Credits

#### MUSICIANSHIP CORE (58 cr.)

MUS 1110	Music Theory I	3 credits
MUS 1111	Music Theory II	3 credits
MUS 1051	Aural Skills Fundamentals	2 credits
MUS 1113	Aural Skills I	2 credits
MUS 1114	Aural Skills II	2 credits
MUS 1800	Music History Timeline	5 credits
MUS 2215	Lifelong Musicianship	4 credits
MUS 2570	Basic Music Technology	2 credits
MUS 3712	Choral Conducting	2 credits*
Or		
MUS 3713	Instrumental Conducting	2 credits*

Core: Creative Engagement (CE) choose 3 (9 credits) minimum

MUS 3102	Composition	3 credits
MUS 3105	Counterpoint	3 credits
MUS 3110	Jazz Theory	3 credits
	MUS 3111	20 <sup>th</sup> Century

Composition Techniques

		3 credits
MUS 3112	Form and Analysis	3 credits
MUS 3113	Voice Leading	3 credits
MUS 3114	Advanced Chromatic Harmony	3 credits
MUS 3200	Songwriting	3 credits
MUS 4101	Instrumentation and Orchestration	3 credits
MUS 4103	Arranging	3 credits

Core: Critical Listening and Cultural Reflections (CLCR) choose 2 (6 credits) minimum

MUS 4230	Music of Renaissance & Baroque	3 credits
MUS 4231	Music of Classical & Romantic	3 credits
MUS 4232	Music of the 20 <sup>th</sup> Century	3 credits
MUS 4233	Music of Black America	3 credits
MUS 4234	Music of the Spice Route	3 credits
MUS 4235	Music of the Pacific Rim	3 credits
MUS 4236	Jazz History for Music Majors	3 credits
MUS 4237	American Popular Music: Majors	3 credits

#### Other Proficiencies

MUS 1270	Beginning Guitar*	(1) credit
MUS 1260	Voice Class*	(2) credits
MUS 2502	Percussion Techniques*	(1) credit

\*Students may test out; these credits are not factored in

Individual Instruction on Primary Instrument	9 credits
Ensemble(s)	9 credits
Junior Recital	0 credits
Piano Proficiency	0 credits

**MUSIC THERAPY FOUNDATIONS (32 cr.)**

MUS 2000 Clinical Improvisation (2)  
MUS 2560 Introduction to Music Therapy (3)  
MUS 2561 Music Therapy Skills Repertoire (3)  
MUS 3502 Music in Special Education (3)  
MUS 4654 Psychology of Music (3) W  
MUS 4802 Music Therapy in Mental Health (3) W  
MUS 4803 Music and Medicine (3) W  
MUS 4898 Current Issues in MT – Senior Capstone (1)  
MUS 2930 Practicum I (1-3)  
MUS 3931 Practicum II (1-3)  
MUS 4931 Practicum III (1-3)  
MUS 4944: Music Therapy Internship (2)

**CLINICAL FOUNDATIONS (24 cr.)**

PES 2128 Functional Anatomy (3)  
PSY 3360 Psychological Disorders (5)  
PES 3545 Programs for Special Populations (3)  
PSY 1180 General Psychology (5)  
Electives from Music Therapy Track (8)

**GENERAL EDUCATION: Common Curriculum (36 cr.)**

UCOL 1000 University Colloquium (1)  
WRI 1000 Academic Inquiry & Writing (5)  
WRI 1100 Disciplinary Research & Writing Seminar (5)  
UCOR 2000 The Emergence of the Modern Global System (5)  
UCOR 3000 Faith, Philosophy & Science (5)  
UFDN 1000 The Christian Faith (5)  
UFDN 2000 Christian Scripture (5)  
UFDN 3100 Christian Theology (5)

**GENERAL EDUCATION: Exploratory Curriculum (35 cr.)****Ways of Knowing in the Arts (5)**

Ways of Knowing in the Humanities (5)  
Ways of Knowing in Quantitative Reasoning (5)  
Ways of Knowing in the Fundamental Sciences (5)  
Ways of Knowing in the Applied Sciences (5)  
Ways of Knowing in the Social Sciences (5)  
Ways of Engaging (5)

**B.A. in MUSIC THERAPY PROGRAM**  
**2018- 2019**

**(suggested course sequence)**

Year 1 – Fall Term	Year 1 – Winter Term	Year 1 – Spring Term
UCOL 1000 University Colloquium (1) MUS 1050 Fund. of Music (3)* MUS 1051 Aural Skills Fund (2) MUS 2560 Introduction to MT (3) MUS 1250 Beginning Keyboard (2)* MUS 2XX Ind. Instr/Ens (2)  N = 8 credits	WRI 1000 Academic Inquiry (5) MUS 1110 Theory I (3) MUS 1113 Aural Skills I (2) MUS 2561 MT Skills Repertoire (3) MUS 1254 Beginning Key Prof. (1)* MUS 2XX Ind. Instr/Ens (2)  N = 15 credits	WRI 1100 Disciplinary Res (5) MUS 1111 Theory II (3) MUS. 1114 Aural Skills II (2) MUS 2930 MT Practicum I (1) PSY 1180 Gen Psych WK-SS (5) MUS 1254 Beginning Keyboard (1)* MUS 2XX Ind. Instr/Ens (2)  N = 18 credits
Year 2 – Fall Term	Year 2 – Winter Term	Year 2 – Spring Term
UFDN 1000 Christian Faith (5) MUS 2215 Lifelong Musicianship (2) MUS 3113 Voice Leading (3) MUS 2570 Basic Mus Tech (2) MUS 2930 MT Practicum I (1) MUS 2200 Piano Proficiency (1)* MUS 2XX Ind. Instr/Ens (2)  N = 15 credits	UFDN 2000 Christian Scripture (5) MUS 2215 Lifelong Musicianship (2) MUS 3112 Form & Analysis (3) MUS 2000 Clinical Improv (2) MUS 2930 MT Practicum I (1) MUS 2200 Piano Prof. (1)* MUS 2XX Ind. Instr/Ens (2)  N = 15 credits	WK – Quantitative Reasoning (5) MUS 3XX Creative Eng. (3) MUS 2930 MT Practicum II (1) PES 2128 Functional Anatomy (3) MUS 2200 Piano Prof. (1)* MUS 1260 Beg. Voice Class (2)* MUS 2XX Ind. Instr/Ens (2)  N = 14 credits
Year 3 – Fall Term	Year 3 – Winter Term	Year 3 – Spring Term
MUS 1800 Music History Time-Line (5) MUS 3711 Conducting (2) MUS 4654 Psychology of Mus (3) MUS 3931 MT Practicum II (1) MUS 4XX Ind. Instr/Ens (2) MUS 1270 Guitar (1)*  N = 13 credits	MUS 4XX Cultural Reflections (3) MUS 4803 Music & Medicine (3) MUS 3931 MT Practicum II (1) MUS 4XX Ind. Instr/Ens (2) MUS 1270 Guitar (1)* WK – Fundamental Sciences (5)  N = 14 credits	MUS 4XX Cultural Reflections (3) MUS 3502 Music in Special Ed (3) MUS 4802 MT in Mental Health (3) MUS 3931 MT Practicum III (1) MUS 4XX Ind. Instr/Ens (2) WK – Applied Sciences (5)  N = 17 credits
Year 4 – Fall Term	Year 4 – Winter Term	Year 4 – Spring Term
UCOR 2000 Modern Global System (5) HHP 3545 Progs for Sp Pop. (3) PSY 3360 Psych. Disorders (5) MUS 4931 MT Practicum III (1) MUS 4XX Ind. Instr/Ens (2)*  N = 14 credits	UFDN 3100 Christian Theology (5) MUS 4931 MT Practicum III (1) MUS 4XX Ind. Instr/Ens (2)* Electives from MT Track (3) ^ WE Elective (5) Recital (0)  N = 14 credits	UCOR 3000 Faith, Phil., Science (5) MUS 4898 Current Issues in MT (1) MUS 4931 MT Practicum III (1)* MUS 4XX Ens (2)* Electives from MT Track (5) ^ WK – Humanities (5)  N = 16 credits
Post Academic Coursework MUS 4944 Internship (2)		

114 credits minimum; including 40 Upper Division credits

**Notes to Music Therapy Curriculum:**

- ^Choose from the Special Education, Psychology, or Health and Human Performance Tracks.
- \*To meet proficiency in Piano, Voice, Guitar and/or Percussion, students may waive by passing proficiency exam, take a class or private instruction as needed, e.g., MUS 1260 Beg. Voice Class (2); MUS 1270 Beg. Guitar (1); MUS 2340 Ethnic Drum Ens. (1).
- Voice students: Singer's Art I is a prerequisite for Upper Division voice instruction.
- Recital: a 30-minute solo performance, repertoire and date determined in consultation with private instructor.
- Several courses fulfill the Ways of Knowing in the Arts; PSY 1180 fulfills Ways of Knowing in the Social Sciences

## MUSIC THERAPY TRACKS

**THESE ARE SUGGESTED COURSES, CHECK TIME SCHEDULE FOR ADDITIONAL OPTIONS. SOME COURSES MAY NEED PERMISSION BY DEPARTMENT. NOTE: DEPARTMENTS MAKE CHANGES OFTEN– SUBSTITUTIONS, DELETIONS, NOT OFFERING FOR THE ACADEMIC YEAR – BE SURE TO CHECK CURRENT COURSE TERM OFFERINGS FOR EACH DEPARTMENT. YOU MAY ALSO REQUEST TO TAKE A CLASS OUTSIDE OF THESE DEPARTMENTS THAT WOULD BEST FULFILL YOUR CAREER GOALS.**

### ***SPECIAL EDUCATION***

- EDSP 3107 Exceptionality in the Classroom (3)
- EDSP 4642 Individual Education Programs (3)
- EDSP 4646 Severe Disabilities (3)
- EDSP 4648 Teaching Students w Emotional & Behavioral Disorders (3)
- EDSP 4652 Disabilities of Learning & Attention (3)
- EDSP 4657 Behavior Management (3)

### ***PSYCHOLOGY EMPHASIS***

- PSY 2470 Life Span Developmental Psychology (5)
- PSY 3360 Psychological Disorders (5)
- PSY 3442 Psychology of Personality (5)
- PSY 3475 Adolescent Developmental Psychology (5)
- PSY 3480 Adult Developmental Psychology (5)
- SOC 3370 Sociology of Deviance (5)
- SOC 3440 Small Group Dynamics (5)
- SOC 3862 Race and Ethnicity (5)
- SOC 4210 Gender in the Global Context (5)
- COM 1101 Introduction to Interpersonal Communication (5)
- COM 2227 Small Group Discussion and Leadership (5)
- COM 3700 Health Communication (3)
- COM 4180 Cultural Communication (5)

### ***HEALTH AND HUMAN PERFORMANCE EMPHASIS***

- HHP 1301 Wellness and Physical Activity (3)
- HHP 2128 Functional Anatomy (3)
- HHP 2617 Teaching Health and Fitness (2)
- HHP 3545 Programs for Special Populations (3)
- HHP 3555 Methods of Teaching Health (5)
- HHP 3575 Motor Learning & Development (4)
- HHP 4555 Community Health Promotion (3)
- COM 3700 Health Communication (3)

# PROFICIENCY EXAMS

## Music Therapy Program Keyboard, Guitar and Vocal Skills Exam

### AMTA Entry-level Professional Competencies:

#### 4. Functional Music Skills

##### 4.1 Demonstrate a basic foundation on voice, piano, guitar, and percussion.

- 4.1.1 Lead and accompany proficiently on instruments including, but not limited to, voice, piano, guitar, and percussion.
- 4.1.2 Play basic chord progressions in several major and minor keys with varied accompaniment patterns.
- 4.1.3 Play and sing a basic repertoire of traditional, folk, and popular songs with and without printed music.
- 4.1.4 Sing in tune with a pleasing quality and adequate volume both with accompaniment and *a capella*.
- 4.1.5 Sight-read simple compositions and song accompaniments.
- 4.1.6 Harmonize and transpose simple compositions in several keys.
- 4.1.7 Tune stringed instruments using standard and other tunings.
- 4.1.8 Utilize basic percussion techniques on several standard and ethnic instruments.

##### 4.2 Develop original melodies, simple accompaniments, and short pieces

extemporaneously in a variety of moods and styles, vocally and instrumentally.

##### 4.3 Improvise on pitched and unpitched instruments, and vocally in a variety of settings

including individual, dyad, small or large group.

To demonstrate above competencies, students will sit for Music Therapy faculty and be prepared with and for the following:

- Bring your own guitar; a piano will be provided.
- Bring **a list and the music of 15 memorized** clinical repertoire pieces. The songs should span a variety of music suitable for adults or children across traditional, folk and popular genres. **Required on the list:** a version of 'Happy Birthday' and 'Amazing Grace'.
- Be prepared to sight read vocal, guitar and/or piano scores.

Students are expected to pass the piano, guitar and keyboard exam by the beginning of the senior year. It is preferable to do this exam in one sitting. Do not schedule your proficiency exams unless you are confident in passing them. Be prepared. It's possible the exam won't be entirely completed during the first test period; however, it must be completed within two periods.

## Keyboard, Guitar and Vocal Skills Exam

Student name: \_\_\_\_\_

### I. Keyboard

- \_\_\_ Play basic chord progression I-IV-V-I in 3 keys chosen by examiner.
- \_\_\_ Sight read simple composition\*.
- \_\_\_ Sight read and accompany self on song with chord chart\*.
- \_\_\_ Perform prepared, memorized piece of your choice with/without voice.
- \_\_\_ Transpose simple song with chord chart\*

### II. Guitar

- \_\_\_ Play basic chord progression I-IV-V-I in 3 keys chosen by examiner
- \_\_\_ Sight read and accompany self on song with chords\*
- \_\_\_ Perform prepared, memorized piece of your choice with/without voice.
- \_\_\_ Transpose simple song with chord chart. \*
- \_\_\_ Demonstrate variety of finger-picking and strumming styles

### III. Vocal

- \_\_\_ Provide a list of 15 memorized clinical repertoire pieces in the following styles. Faculty will choose from the list. While you may choose one main instrument for accompanying (guitar or piano), at least one piece must be performed on the non-dominant instrument.

- Children's song
- Sacred song (include *Amazing Grace*)
- Folk/easy listening song
- Old standard
- Special occasion (include *Happy Birthday*)
- Cross-cultural

- \_\_\_ Vocal technique demonstrated in above:

- Accuracy of intonation
- Vocal projection
- Breath management and volume control
- Ability to accompany and sing accurate melody

\*will be provided during exam

Faculty Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Comments:

**Music Therapy Clinical Training Program**

**Practicum**

## **PRACTICUM**

### **Music Therapy Practicum Overview:**

Each music therapy student will complete 180 hours of pre-internship (practicum) clinical training hours. The practica are organized in a developmental sequence. Students will be assigned an on-site supervisor in a variety of clinical settings. All students will complete at least one quarter with children, one with adults, and one with older adults, preferably in settings with different clinical emphases. Senior students may have the opportunity to select settings in line with their clinical preferences, and to align with a practicum site for more than one quarter. The student has the primary responsibility for tracking hours.

The music therapy practicum at SPU will follow developmentally progressive foci.

### **Music Therapy Practicum I (MUS 2930), 1 -3 credits**

Observation, Assisting and Entry level terms: Students will observe the MT-BC, other staff, music therapy interventions, and specific clients. The students will have specific observation tasks, including focus on the music therapy process (Assessment/Treatment Planning/Implementation/Evaluation), ethics, and professional conduct. Students will have opportunities to reflect on their own level of comfort and interest in the different populations.

Students will be assigned to a variety of sites at which they will serve as assistant to the MT-BC. They will not be responsible for planning and implementing any interventions. However, they may be involved in helping with set-up, participating, and offering assistance as deemed appropriate by the MT-BC. Students in the second and third quarters of this year may be asked to lead a portion of a session, such as a greeting or closing activity/song. Foci during this year are: assessment, treatment planning, supervisory relationships, documentation, ethics and safety, and proper use of cleaning and maintaining MT instruments.

### **Music Therapy Practicum II (MUS 3931), 1 – 3 credits**

Developing level terms: Students will develop their clinical skills with the guidance of the MT-BC and will become increasingly responsible for planning and implementation of sessions. During this year foci will be: leadership styles, skill development, dual relationships, and further understanding of the music therapy process. Students will be working on understanding their own relationship to music, client populations, and supervisory issues in preparation for their senior year internship applications.

### **Music Therapy Practicum III (MUS 4931), 1 – 3 credits**

Proficiency level: Students will have greater choice in practicum sites during these three quarters as they assess their individual goals in music therapy. Foci this year will be: planning and running an entire music therapy session, skill development, clinical issues of transference and countertransference, group dynamics, internship preparation, professional development, research and presentation.

## Music Therapy Summer Practicum

### Student Responsibilities:

- **Students must sign up for 1 credit of Practicum (summer term) to have clinical hours included in overall earned clinical hours.**
- Have the training agreement reviewed and signed by On-Site Supervisor; provide a copy of signed document to MT-BC Supervisor.
- Give MT-BC and On-Site Supervisor a copy of your Student Profile with personal goals and objectives.
- Complete a literature review of the population you will be working with. This can include required or suggested readings from your MT-BC Supervisor or On-Site Supervisor.
- Complete session plan and documentation by due dates defined by On-Site Supervisor.
- Track all clinical hours and have it signed by your On-Site Supervisor.
- Complete Supervisor Evaluation Form at the end of your summer practicum and submit it to SPU Practicum Supervisor.

## WHAT I NEED TO KNOW FOR MY MT PRACTICUM

- Where am I doing my practicum?
- What is the population?
- Who is my primary contact...on site supervisor?
- What is the BEST way to contact my on-site music therapy supervisor?
- Who are my practicum teammates? What term are they in?
- When do I start?
- What dates do I attend my practicum through the term?
- What do I need to bring to my practicum (instruments, etc.)?
- What can I expect the first day?
- **What do I do should I need to miss a class or practicum session due to vacation/illness/etc.?**
- What is the BEST way to contact my supervisors?
- When are assignments due?
- How do I turn in my assignments?
- How often do I log in my practicum hours?



## Notes on MUSIC THERAPY STUDENT CLINICAL HOURS TRACKING FORM

- A total of 180 hours of clinical pre-internship training is required by AMTA.
- **A minimum 80% of time documented must be in client contact hours.**

Please specify how your time was spent. What was I doing?

- Observation: specify Group (G) or Individual (I)
- Planning sessions
- Documenting
- Supervision (with on-site supervisor or with clinical training faculty)
- Professional development (conferences, workshops etc.)
- Direct client contact (time spent interacting verbally, musically, etc. with clients (this can include MT assessment, MT sessions, co-leading). Please note Group (G) or Individual (I)

## SPU Music Therapy Program Practicum Training Agreement

Student Name: \_\_\_\_\_ Term \_\_\_\_\_

Facility Name: \_\_\_\_\_

On-Site Supervisor: \_\_\_\_\_

SPU Clinical Training Supervisor: \_\_\_\_\_

### The Music Therapy Student agrees to the following:

- Will arrive on time and be prepared with the necessary materials.
- Will notify On-Site Supervisor and Clinical Training Supervisor in advance if they must miss a session due to illness, death in the family, school holidays, etc.
- Will arrange a make-up session as scheduling permits.
- Will complete assignments from On-Site Supervisor in the allotted timeframe.
- Will adhere to a professional dress code appropriate for the setting. This includes modest, respectful clothing (no short skirts, low-cut tops, torn or dirty clothing). Jeans may be worn with the approval of the On-Site Supervisor depending on the facility. No flip-flops or open toed shoes are allowed. Other dress codes may be requested by On-Site Supervisor as needed.
- Will adhere to a professional code of conduct that includes confidentiality and respect for all staff, co-workers and clients.
- Will willingly follow instructions given by On-Site Supervisor.
- Will willingly listen to feedback and attempt to incorporate in fieldwork.
- Will communicate any concerns or issues with the Clinical Training Supervisor.

### The On-Site Supervisor agrees to the following:

- Will notify the Music Therapy Student and Clinical Training Supervisor of any changes or cancellations in schedule. An alternate time will be arranged to make up missed sessions if time permits.
- Will communicate regularly with Student and Clinical Training Supervisor in regard to student performance and/or concerns.
- Will complete mid-term and end-of-term evaluations in a timely manner.
- Will provide meaningful feedback to improve student learning.
- Will work with students at the appropriate phase of development based on their prior fieldwork experiences and expertise.
- Will notify Clinical Training Supervisor immediately of any concerns regarding conduct, ethics, skills, confidentiality etc.

### The SPU Clinical Training Supervisor agrees to the following:

- Will act as a liaison between the Student and the On-Site Supervisor.
- Will meet regularly with Student to provide feedback and assist in skill development.
- Will furnish materials as necessary including student evaluations and student evaluations of supervisor.

Additional considerations or special circumstances concerning the student or facility:

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The signatures below signify that the above is understood and agreed upon by the following parties:

\_\_\_\_\_  
SPU music therapy student: Date:

\_\_\_\_\_  
On-site supervisor: Date:

\_\_\_\_\_  
SPU Clinical Supervisor: Date:

**Seattle Pacific University Music Therapy Program**  
**Student Goals for Current Clinical Pre-Internship Training Placement**

**Name: Term:**

**Clinical Training site:**

**Goals should be SMART: Specific:** What are you going to do?

- **Measurable:** How will you evaluate success?
- **Achievable:** Goal must stretch you but also be realistic and do-able.
- **Relevant:** Will achieving this goal contribute to your personal or professional development?
- **Time Frame:** When will this goal be achieved?

Name three goals for this term's training:

1)

2)

3)

How will you measure these goals?

1)

2)

3)

What kind of support will I need to achieve these goals?

1)

2)

**Seattle Pacific University Music Therapy Student Profile**

Date: \_\_\_\_\_

MT Student: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date Entered Program: \_\_\_\_\_

Date projected to complete coursework: \_\_\_\_\_

Date projected to complete fieldwork: \_\_\_\_\_

Date projected to start internship: \_\_\_\_\_

Completed Fieldwork experience:

<u>Date</u>	<u>Placement</u>	<u>Supervisor</u>	<u>Population</u>

Names & dates of music therapy courses taken:

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Goals for my clinical growth this term include:

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Relevant Job / Life Experience

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**SPU Music Therapy Program Practicum Training Evaluation**  
**Midterm Evaluation - Practicum I & II**

**Student** \_\_\_\_\_

**Term** \_\_\_\_\_

**Evaluator** \_\_\_\_\_

**Clinical Setting** \_\_\_\_\_

**The student I am supervising...**

1	Dresses appropriately for the clinical setting.	1 No	2 Sometimes	3 Yes	4 NA
2	Arrives on-site early enough to set up the environment and start the session on time.	1 No	2 Sometimes	3 Yes	4 NA
3	Arrives prepared for the session as evidenced by submission of the session plan to me no less than 24 hours prior.	1 No	2 Sometimes	3 Yes	4 NA
4	Notifies me of any absences or changes as soon as possible.	1 No	2 Sometimes	3 Yes	4 NA
5	Demonstrates a professional relationship with all clients as evidenced by behaviors such as unconditional acceptance.	1 No	2 Sometimes	3 Yes	4 NA
6	Demonstrates appropriate and professional interactions with staff and other individuals, such as client family members.	1 No	2 Sometimes	3 Yes	4 NA
7	Demonstrates appropriate interactions with on-site supervisor.	1 No	2 Sometimes	3 Yes	4 NA
8	Demonstrates increased verbal processing of the music therapy process for client(s).	1 No	2 Sometimes	3 Yes	4 NA
9	Demonstrates musical sensitivity to the client(s).	1 No	2 Sometimes	3 Yes	4 NA
10	Offers ideas or demonstrates creative music interventions to meet client(s) goals.	1 No	2 Sometimes	3 Yes	4 NA

**Please add your comments about this student:**

**SPU Music Therapy Program Practicum Training Evaluation**  
**Final Evaluation - Practicum I**

**Student:** \_\_\_\_\_ **Term:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Clinical Setting:** \_\_\_\_\_

**Throughout this quarter, the student I am supervising consistently...**

1. Arrives on-site early enough to set up the environment and start the session on time.	1 No	2 Sometimes	3 Yes	4 NA
2. Arrives prepared for the session as evidenced by submission of the session plan to me no less than 24 hours prior.	1 No	2 Sometimes	3 Yes	4 NA
3. Notifies me of any absences or changes as soon as possible.	1 No	2 Sometimes	3 Yes	4 NA
a. If applicable, how many sessions were missed?				
4. Demonstrates an understanding of the specific client population they are working with and its related target areas, challenges, etc. through the following ways:				
a. <b>Theory:</b> Demonstrates an understanding of the client population through written material, such as literature review, article summaries, description of best practice, etc.	1 No	2 Sometimes	3 Yes	4 NA
b. <b>Practice:</b> Demonstrates an understanding of the client population in practice, such as appropriate interaction with clients, appropriate facilitation of selected music, interventions, etc.	1 No	2 Sometimes	3 Yes	4 NA
5. Receives feedback from on-site supervisor on <u>at least 3 occasions</u> , as evidenced by behaviors such as: verbal or written acknowledgment and/or follow-up questions.	1 No	2 Sometimes	3 Yes	4 NA
6. Demonstrates attentiveness to on-site supervisor feedback as evidenced by behaviors such as: eye contact, verbal and/or written acknowledgement, asking follow-up questions during debrief and/or via email.	1 No	2 Sometimes	3 Yes	4 NA

7. Demonstrates appropriate ethics in regard to confidentiality when discussing the session in debrief and/or writing about the session through e-mail, documentation, etc.	1 No	2 Sometimes	3 Yes	4 NA
8. Demonstrates increased verbal processing of the music therapy process for client(s).	1 No	2 Sometimes	3 Yes	4 NA
9. Demonstrates developing musical skills to meet client(s) goals.	1 No	2 Sometimes	3 Yes	4 NA
10. Demonstrates overall integration of knowledge and skills as a beginning level music therapy student.	1 No	2 Sometimes	3 Yes	4 NA

**Please add your comments about this student:**

**SPU Music Therapy Program Practicum Training Evaluation**  
**Final Evaluation - Practicum II**

**Student:** \_\_\_\_\_ **Term:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Clinical Setting:** \_\_\_\_\_

**Throughout this quarter, the student I am supervising consistently...**

1. Attends all sessions.	1 No	2 Sometimes	3 Yes	4 NA
a. If you did not answer "Yes," how many sessions were missed?				
2. Receives feedback on <u>at least 3 occasions</u> from on-site supervisor, as evidenced by behaviors such as: verbal or written acknowledgment and/or follow-up questions.	1 No	2 Sometimes	3 Yes	4 NA
3. Assimilates feedback on <u>at least 3 occasions</u> , as evidenced by behaviors in subsequent sessions such as: enacting suggested changes or variations.	1 No	2 Sometimes	3 Yes	4 NA
4. Demonstrates appropriate ethics in regard to confidentiality when discussing the session in debrief and/or writing about the session through e-mail, documentation, etc.	1 No	2 Sometimes	3 Yes	4 NA
5. Demonstrates an understanding of the specific client population they are working with and its related target areas, challenges, etc. through the following ways:				
a. <b>Theory:</b> Demonstrates an understanding of the client population through written material, such as literature review, article summaries, description of best practice, etc.	1 No	2 Sometimes	3 Yes	4 NA
b. <b>Practice:</b> Demonstrates an understanding of the client population in practice, such as appropriate interaction with clients, appropriate facilitation of selected music, interventions, etc.	1 No	2 Sometimes	3 Yes	4 NA
6. Creates weekly session plans and submits them to on-site supervisor no later than 24 hours prior to the session.	1 No	2 Sometimes	3 Yes	4 NA
7. Demonstrates use of 1 identified new skill, shared with supervisor, during at least two sessions in which the supervisor is present.	1 No	2 Sometimes	3 Yes	4 NA

8. Assists in required tasks during the session, such as passing out and/or collecting instruments, sanitizing instruments, following through with planned interventions, etc.	1 No	2 Sometimes	3 Yes	4 NA
9. Demonstrates effective session introduction, as evidenced by appropriate client greeting and hello song for client population.	1 No	2 Sometimes	3 Yes	4 NA
10. Delivers quality musical product, as evidenced by elements such as: accurate tempo and rhythm, accurate vocal pitch, accurate chord progressions, etc.	1 No	2 Sometimes	3 Yes	4 NA
11. Demonstrates appropriate pacing when delivering verbal direction and/or instruction.	1 No	2 Sometimes	3 Yes	4 NA
12. Demonstrates appropriate pacing when delivering music.	1 No	2 Sometimes	3 Yes	4 NA
13. Demonstrates active listening of client statements, musical outputs, etc. as evidenced by subsequent appropriate response (verbal or musical).	1 No	2 Sometimes	3 Yes	4 NA
14. Demonstrates appropriate use of instruments for specific client population in at least 3 different interventions.	1 No	2 Sometimes	3 Yes	4 NA
15. Maintains poised, confident appearance as evidenced by posture, facial affect, etc.	1 No	2 Sometimes	3 Yes	4 NA
16. Demonstrates improvement of baseline skills from first supervised session to final supervised session as an intermediate level music therapy student.	1 No	2 Sometimes	3 Yes	4 NA

**Please add your comments about this student:**

**SPU Music Therapy Program Practicum Training Evaluation**  
**Mid-Term Evaluation – Practicum III**

**Student:** \_\_\_\_\_ **Term:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Clinical Setting:** \_\_\_\_\_

**The student I am supervising...**

1. Arrives on-site early enough to set up the environment and start the session on time.	1 No	2 Sometimes	3 Yes	4 NA
2. Arrives prepared for the session as evidenced by submission of the session plan to me no less than 24 hours prior.	1 No	2 Sometimes	3 Yes	4 NA
3. Notifies me of any absences or changes as soon as possible.	1 No	2 Sometimes	3 Yes	4 NA
4. Demonstrates a professional relationship with all clients as evidenced by behaviors such as unconditional acceptance.	1 No	2 Sometimes	3 Yes	4 NA
5. Demonstrates appropriate and professional interactions with staff and other individuals, such as client family members.	1 No	2 Sometimes	3 Yes	4 NA
6. Demonstrates appropriate interactions with on-site supervisor.	1 No	2 Sometimes	3 Yes	4 NA
7. Submitted an initial client assessment.	1 No	2 Sometimes	3 Yes	4 NA
8. Submitted a first draft of treatment goals.	1 No	2 Sometimes	3 Yes	4 NA
9. Submitted a task analysis or rationale for planned interventions.	1 No	2 Sometimes	3 Yes	4 NA
10. Incorporated feedback from me.	1 No	2 Sometimes	3 Yes	4 NA
11. Asked at least one follow-up question regarding the assessment, goals, planned interventions, or session.	1 No	2 Sometimes	3 Yes	4 NA
12. Demonstrates at minimum a functional use of musicianship to meet client's goals.	1 No	2 Sometimes	3 Yes	4 NA
13. Creates music interventions that consistently are engaging and meaningful to the client and his/her/their goals.	1 No	2 Sometimes	3 Yes	4 NA

**Please add your comments about this student on the back of this form:**

**SPU Music Therapy Program Practicum Training Evaluation**  
**Final Evaluation – Practicum III**

**Student:** \_\_\_\_\_ **Term:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_

**Clinical Setting:** \_\_\_\_\_

**Throughout this quarter, the student I am supervising consistently...**

1. Attends all sessions.	1 No	2 Sometimes	3 Yes	4 NA
a. If you did not answer "Yes," how many sessions were missed?				
2. Receives feedback on <u>at least 3 occasions</u> from on-site supervisor, as evidenced by behaviors such as: verbal or written acknowledgment and/or follow-up questions.	1 No	2 Sometimes	3 Yes	4 NA
3. Assimilates feedback on <u>at least 3 occasions</u> , as evidenced by behaviors in subsequent sessions such as: enacting suggested changes or variations.	1 No	2 Sometimes	3 Yes	4 NA
4. Demonstrates appropriate ethics in regard to confidentiality when discussing the session in debrief and/or writing about the session through e-mail, documentation, etc.	1 No	2 Sometimes	3 Yes	4 NA
5. Demonstrates an understanding of the specific client population they are working with and its related target areas, challenges, etc. through the following ways:				
a. <b>Theory:</b> Demonstrates an understanding of the client population through written material, such as literature review, article summaries, description of best practice, etc.	1 No	2 Sometimes	3 Yes	4 NA
b. <b>Practice:</b> Demonstrates an understanding of the client population in practice, such as appropriate interaction with clients, appropriate facilitation of selected music, interventions, etc.	1 No	2 Sometimes	3 Yes	4 NA
6. Creates weekly session plans and submits them to on-site supervisor no later than 24 hours prior to the session.	1 No	2 Sometimes	3 Yes	4 NA
7. Prepares at least <b>three</b> unique activities appropriate to the population.	1 No	2 Sometimes	3 Yes	4 NA

8. Prepares the room, instruments, and materials prior to the session start time.	1 No	2 Sometimes	3 Yes	4 NA
9. Demonstrates use of 1 identified new skill, shared with supervisor, during at least two sessions in which the supervisor is present.	1 No	2 Sometimes	3 Yes	4 NA
10. Demonstrates effective session introduction, as evidenced by appropriate client greeting and hello song for client population.	1 No	2 Sometimes	3 Yes	4 NA
11. Demonstrates appropriate pacing when delivering verbal direction and/or instruction.	1 No	2 Sometimes	3 Yes	4 NA
12. Demonstrates active listening of client statements, musical outputs, etc. as evidenced by subsequent appropriate response (verbal or musical).	1 No	2 Sometimes	3 Yes	4 NA
13. Demonstrates appropriate use of instruments for specific client population in at least 3 different interventions.	1 No	2 Sometimes	3 Yes	4 NA
14. Maintains poised, confident appearance as evidenced by posture, facial affect, etc.	1 No	2 Sometimes	3 Yes	4 NA
15. Attempts appropriate musical prompting of client engagement.	1 No	2 Sometimes	3 Yes	4 NA
16. Demonstrates effective length, pacing, and sequence of interventions.	1 No	2 Sometimes	3 Yes	4 NA
17. Delivers quality musical product, as evidenced by elements such as: accurate tempo and rhythm, accurate vocal pitch, vocal volume, accurate chord progressions, etc.	1 No	2 Sometimes	3 Yes	4 NA
18. Facilitates appropriate closure to the session.	1 No	2 Sometimes	3 Yes	4 NA
19. Submits documentation to me within 48 hours after the session.	1 No	2 Sometimes	3 Yes	4 NA
20. Demonstrates improvement of baseline skills from first supervised session to final supervised session as a senior level music therapy student.	1 No	2 Sometimes	3 Yes	4 NA

**Please add your comments about this student:**

**SPU MUSIC THERAPY PROGRAM**  
**Student Evaluation of Supervisor**

Supervisor: \_\_\_\_\_ Term/Year: \_\_\_\_\_

Practicum Site: \_\_\_\_\_

Please evaluate your on-site supervisor using the following rating scale for the criteria listed below. Circle the number that most closely represents the quality of each item, not necessarily just the frequency. If an item was not applicable to your placement experience, you may write-in N/A.

1 = Seldom   2 = Occasionally   3 = Usually   4 = Almost Always   5 = Always

**Advising**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Supervisor helped me to identify my areas of strength.                            | 1 | 2 | 3 | 4 | 5 |
| 2. Supervisor helped me to identify my areas needing improvement.                    | 1 | 2 | 3 | 4 | 5 |
| 3. Supervisor maintained clear and reasonable expectations of me.                    | 1 | 2 | 3 | 4 | 5 |
| 4. Supervisor's observations were balanced between praise and constructive criticism | 1 | 2 | 3 | 4 | 5 |
| 5. Supervisor gave me helpful feedback on written work.                              | 1 | 2 | 3 | 4 | 5 |
| 6. Supervisor gave me helpful feedback on my clinical work.                          | 1 | 2 | 3 | 4 | 5 |
| 7. Supervisor gave helpful references to methods, materials, and research.           | 1 | 2 | 3 | 4 | 5 |
| 8. Supervisor was responsive to my requests for information.                         | 1 | 2 | 3 | 4 | 5 |
| 9. Supervisor treated me with dignity and respect.                                   | 1 | 2 | 3 | 4 | 5 |
| 10. Supervisor responded to my individual needs for supervision.                     | 1 | 2 | 3 | 4 | 5 |

**Administration**

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 11. Supervisor was available, dependable, and punctual.                     | 1 | 2 | 3 | 4 | 5 |
| 12. Supervisor kept accurate records of my work.                            | 1 | 2 | 3 | 4 | 5 |
| 13. Supervisor dealt with administrative problems promptly and effectively. | 1 | 2 | 3 | 4 | 5 |
| 14. Supervisor's evaluations of me were accurate.                           | 1 | 2 | 3 | 4 | 5 |

Comments (continue on back if necessary)

**Music Therapy Clinical Training Program**  
**Internship**

## Music Therapy Internship (MUS 4944), 2 credits

The Music Therapy Clinical Internship is a minimum of 1020 hours of supervised clinical experience in music therapy at an AMTA national roster internship program or with an SPU university-affiliated internship site. The goal of the internship is to provide clinical training and experience as necessary for success in the practice of music therapy and required for eligibility to take the national examination administered by the Certification Board for Music Therapy. The student must complete all academic and pre-internship (Practicum) clinical hour requirements for the Bachelor of Arts in Music at Seattle Pacific University before the start of the internship. **Complete the TOTAL HOURS OF PRACTICUM SHEET and turn in to the DOT before starting Internship (no exceptions).**

Gaining acceptance to a clinical internship program is a highly competitive process. The student is encouraged to begin researching potential sites and submitting applications one year before completing academic coursework. It is the student's responsibility to research, interview, and submit all necessary paperwork to an internship before its deadline.

If letters of recommendation are needed from MT faculty and/or practicum supervisors, provide the following information to each individual:

1. A current resume that lists all practicum sites as a matriculated student at SPU.
2. The name and website for the internship site.
3. Complete information for the Internship Supervisor (name and contact information).
4. Internship expectations for interns... what they're looking for in an intern.
5. The preference for the letter to be picked up by you or mailed separately.
6. A deadline request for the letter of recommendation (a minimum of at least two weeks' notice before the due date).

**Students register for 1 credit for each term while in residence at an internship site.** The DMT will monitor the internship by maintaining communication with the student and clinical supervisor. Upon completion of the internship the student's final grade will be determined based on the clinical internship supervisor's midterm and final evaluations of student performance.

Once students have a confirmed internship placement they must complete before leaving SPU:

- SPU Clinical Internship and Practicum Student Agreement & Acknowledgement of Risk & Release Form. Obtain a copy of the form from the DMT; sign, make yourself a copy, and return original to DMT.
- SPU Internship Plan and Evaluation of Intern Competencies  
The student completes this self-assessment and then meets with the DMT and Music Therapy faculty for a discussion. A signed copy of the document is sent to the Clinical Internship Supervisor.
- The TOTAL number of hours of Practicum form.

SEATTLE PACIFIC UNIVERSITY  
CLINICAL INTERNSHIP AND PRACTICUM STUDENT AGREEMENT AND  
ACKNOWLEDGEMENT OF RISK AND RELEASE

I, \_\_\_\_\_, in consideration of being allowed to participate in a clinical internship as part of my academic program in the Seattle Pacific University (SPU) Music Therapy Program (Program), hereby acknowledge and agree as follows:

1. The academic program in which I am enrolled offers clinical and practicum music therapy courses at training sites such as hospitals, health care organizations, medical clinics, skilled nursing residences, home health agencies in acute care, primary care and community care settings, public and private schools, and private corporations.

2. Clinical facilities require that confidentiality be maintained in all verbal interactions about clients and of their medical and/or educational records. I understand that any materials used in class from a patient record may not contain any identifying information on it and that no information is to be taken from an agency that contains identifying patient information. I understand that at all sites where I am assigned that I must be aware of and abide by the procedures and protocols designed to protect confidentiality of clients and staff.

3. Clinical assignments may involve frequent exposure to communicable diseases, bodily fluids, toxic substances, clients with mental or physical impairments, and other conditions common to a clinical and practicum environment. I understand and acknowledge these risks.

4. I must be able to react calmly and effectively in emergency situations and have the ability to establish and maintain effective relationships with patients, nursing staff, medical staff, and the public.

5. If I have a physical, mental or sensory condition which could affect my ability to participate fully in a clinical or practicum music therapy course or to perform the essential duties and responsibilities typically associated with a clinical or practicum music therapy course, then it is my responsibility to notify Disability Services (206-281-2475) in the Center for Learning to discuss reasonable accommodations or modifications.

6. When I am at the training site, I am there as an SPU student and not as an employee of the training site. Therefore, if I am injured or hurt or become ill in connection with my clinical assignment, I understand that I am not eligible for Workers Compensation insurance or benefits and I must contact the site preceptor immediately as well as SPU faculty.

7. Neither SPU nor the training site will provide me with insurance coverage for medical bills or for related expenses that may result from injury or illness that I may develop or contract in connection with my assignment. I understand that I am responsible to maintain, at my own cost and expense, comprehensive health and accident insurance that will provide continuous coverage during my participation in the clinical or practicum program. I will provide SPU with evidence of insurance coverage in the form of a certificate of insurance submitted to the School of Music Office along with this form. I understand that I am ultimately responsible for my own medical expenses.

8. The training site may require that I provide evidence of a two-step tuberculosis (TB) test followed by annual TB testing and current immunizations including but not limited to tetanus-diphtheria,

polio series, mumps, rubella, two Rubeola, (or a positive rubella and Rubeola titer), hepatitis A series, hepatitis B series or positive titer. If I do not have a history of exposure to chickenpox, I may need to provide an immune titer.

9. The training site may require a criminal history background inquiry be performed for each student who will have contact with patients. I will comply with all procedural requirements for obtaining such inquiry.

10. It is my responsibility to comply with the standards, policies and procedures established by the training site, such as patient confidentiality or Health Insurance Portability & Accountability Act (HIPAA), use of electronic medical records (EMR), and/or educational records of students.

11. While at the training site, I must wear appropriate attire and identification and conform to the standards and practices established by SPU for clinical or practicum education assignments.

12. I am responsible for my own transportation to and from the training site.

13. The training site will have the right to take immediate temporary action to correct a situation where my actions endanger patient care. All final resolutions of my academic status in such situations will be made solely by SPU. The training site has the right to terminate the use of its facilities by me where necessary to maintain its operation free of disruption and to ensure quality client care.

**14. If, in connection with my participation in a clinical internship or practicum, I suffer any injury, illness, loss, expense, damage, or death, I covenant not to sue and agree to release and discharge Seattle Pacific University and its governing board, officers, administrators, agents, faculty, employees, and students from any and all claims, demands, causes of action, costs, or expenses that can or may arise from the internship or practicum. This release is binding on my family, my heirs, my personal representative, agents or assigns.**

15. I am at least 18 years of age and legally competent to sign this document; I have read and understand everything written above and I voluntarily sign this Clinical Internship and Practicum Student Agreement to Participate and Acknowledgement of Risk and Release.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Program

**SEATTLE PACIFIC UNIVERSITY MUSIC THERAPY PROGRAM  
INTERNSHIP PLAN AND EVALUATION OF INTERN COMPETENCIES**

Intern Name: \_\_\_\_\_

Completed hours in pre-internship experiences: \_\_\_\_\_

Primary Instrument: \_\_\_\_\_

Secondary instrument(s): \_\_\_\_\_

Internship site: \_\_\_\_\_

Internship starting date: \_\_\_\_\_

Projected completion date: \_\_\_\_\_

Academic Supervisor: Carlene J. Brown, Ph.D., MT-BC

University Address:

Crawford Hall 206

Seattle Pacific University

3307 Third Ave. W, Suite 310.

Seattle, WA 98119

Contact Information:

Office 206.281.2920;

Cell 206.617.6223;

Email: [browncj@spu.edu](mailto:browncj@spu.edu)

**Academic Supervisor Role:**

- Complete initial evaluation of Intern's professional competencies before the first day of the internship.
- Assist Intern and Internship Director with completion of individualized contract, if needed.
- Maintain communication throughout the internship with Intern and on an "as needed" basis with Internship Director. It is expected that the Intern have phone or email contact with Dr. Brown at least once per month during the course of the six-month internship.
- Monitor contractual agreement through review of mid-term and final evaluation, Intern self-evaluation, and Intern's site evaluation.
- Verify, in consultation with the Internship Director, successful completion of internship per contractual agreement.

**Internship Director's Role:**

- Develop an individualized contract in partnership with the Intern and academic faculty, to be signed by all parties no later than the end of the first week of internship.
- Provide the Intern with a thorough orientation, including facility tour, review of AMTA documents, the CBMT Code of Professional Practice, applicable Policies and Procedures of the Site, and Intern Dismissal Policies.
- Provide viable music therapy role model for Intern.
- Assign other professional staff to provide support in the training process.
- Establish and coordinate a network of supportive professional contacts.
- Provide the Intern with one hour of individual consultation per week.
- Provide the Intern with an average of four hours per week of observation and constructive feedback.
- Complete and review mid-term and final evaluations with the music therapy Intern.
- Communicate information to the Intern regarding ongoing seminars, conferences, workshops, and community resources.
- Provide the Intern with a site evaluation to be completed at the end of the internship and review with Intern.
- Maintain continuous communication with the Intern and his/her academic faculty.
- Initiate performance improvement plans with the Intern and academic faculty, when necessary.

**Intern Responsibilities:**

- Register for 1 credit of Internship (MUS 4944) for each term in residence at Internship site.
- Adhere to AMTA National Roster Internship Guidelines, internship program personnel requirements, policies and procedures.
- Adhere to AMTA Standards of Clinical Practice and Code of Ethics.
- Seek feedback and clarification through regular communication with supervising therapist and/or Internship director.
- Maintain regular communication with the academic faculty via emails and/or calls at least once per month.
- Complete a mid-term and final Intern self-evaluation, and final Intern site evaluation.
- Request a 'Welcome to the Professional World' packet from AMTA at the mid-point of the internship.
- Six months following the internship, complete the post-internship site evaluation and send it to the Clinical Training Committee regional representative, as well as the Academic Faculty member.

**SEATTLE PACIFIC UNIVERSITY**  
**AMTA COMPETENCY EVALUATION**  
**[PRE-INTERNSHIP]**

Intern: \_\_\_\_\_

Date of Assessment: \_\_\_\_\_

Supervisors: \_\_\_\_\_

*Both the Intern and the Academic/ Practicum Supervisors have evaluated the student's current level of meeting proficiencies. Each of the AMTA categories is rated according to the following scale:*

- 4 – Exceeds Entry Level of Competencies
- 3 – Demonstrates Entry Level of Competencies
- 2 – Below Entry Level of Competencies
- 1 – Competency Not Demonstrated

The Pre-Internship competencies may have been met by fulfilling academic coursework and/or observed during supervised pre-internship (Practicum) experiences.

<b>MUSIC FOUNDATIONS</b>	<b>STUDENT RATING</b>	<b>SUPERVISOR RATING</b>
Music Theory / History	_____	_____
Composition & Arranging	_____	_____
Major Performance Medium	_____	_____
Guitar Skills	_____	_____
Keyboard Skills	_____	_____
Non-symphonic Instruments Skills	_____	_____
Vocal skills	_____	_____
Improvisational Skills	_____	_____
Conducting Skills	_____	_____
Movement Skills	_____	_____

<b>CLINICAL FOUNDATIONS</b>	<b>STUDENT RATING</b>	<b>SUPERVISOR RATING</b>
Therapeutic Applications	_____	_____
Therapeutic Principles	_____	_____
The Therapeutic Relationship	_____	_____

<b>MUSIC THERAPY</b>	<b>STUDENT RATING</b>	<b>SUPERVISOR RATING</b>
Foundations & Principles	_____	_____
Client Assessment	_____	_____
Treatment Planning	_____	_____
Therapy Implementation	_____	_____
Therapy Evaluation	_____	_____

Documentation	_____	_____
Termination / Discharge Planning	_____	_____
Professional Role / Ethics	_____	_____
Interprofessional Collaboration	_____	_____
Supervision and Administration	_____	_____
Research Methods	_____	_____

=====

**INDIVIDUALIZED INTERNSHIP PLAN – COMPETENCY AREAS / GOALS TO BE ADDRESSED DURING INTERNSHIP**

This document is considered to be an agreement between the music therapy student Intern, Internship Director and SPU Academic Supervisor. It is understood that failure to meet minimum competency requirements, as established by the American Music Therapy Association, by the end of the internship may result in additional coursework and/or supervised hours in order to satisfy such minimum required competencies. I agree to uphold these standards in order to insure a quality internship experience.

\_\_\_\_\_  
 Music Therapy Student Intern

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Dr. Carlene J. Brown, Academic Supervisor; Director, SPU Music Therapy Program

\_\_\_\_\_

\_\_\_\_\_  
 Internship Director

\_\_\_\_\_  
 Date



## Appendix I

### AMTA Professional Competencies

#### A. MUSIC FOUNDATIONS

##### 1. Music Theory and History

- 1.1 Recognize standard works in the literature.
- 1.2 Identify the elemental, structural, and stylistic characteristics of music from various periods and cultures.
- 1.3 Sight-sing melodies of both diatonic and chromatic makeup.
- 1.4 Take aural dictation of melodies, rhythms, and chord progressions.
- 1.5 Transpose simple compositions.

##### 2. Composition and Arranging Skills

- 2.1 Compose songs with simple accompaniment.
- 2.2 Adapt, arrange, transpose, and simplify music compositions for small vocal and non-symphonic instrumental ensembles.

##### 3. Major Performance Medium Skills

- 3.1 Perform appropriate undergraduate repertoire; demonstrate musicianship, technical proficiency, and interpretive understanding on a principal instrument/voice.
- 3.2 Perform in small and large ensembles.

##### 4. Functional Music Skills

- 4.1 Demonstrate a basic foundation on voice, piano, guitar, and percussion.
  - 4.1.1 Lead and accompany proficiently on instruments including, but not limited to, voice, piano, guitar, and percussion.
  - 4.1.2 Play basic chord progressions in several major and minor keys with varied accompaniment patterns.
  - 4.1.3 Play and sing a basic repertoire of traditional, folk, and popular songs with and without printed music.
  - 4.1.4 Sing in tune with a pleasing quality and adequate volume both with accompaniment and a capella.
  - 4.1.5 Sight-read simple compositions and song accompaniments.
  - 4.1.6 Harmonize and transpose simple compositions in several keys.
  - 4.1.7 Tune stringed instruments using standard and other tunings.
  - 4.1.8 Utilize basic percussion techniques on several standard and ethnic instruments.

4.2 Develop original melodies, simple accompaniments, and short pieces extemporaneously in a variety of moods and styles, vocally and instrumentally.

4.3 Improvise on pitched and unpitched instruments, and vocally in a variety of settings including individual, dyad, small or large group.

4.4 Care for and maintain instruments.

## 5. Conducting Skills

5.1 Conduct basic patterns with technical accuracy.

5.2 Conduct small and large vocal and instrumental ensembles.

## 6. Movement Skills

6.1 Direct structured and improvisatory movement experiences.

6.2 Move in a structured and/or improvisatory manner for expressive purposes.

## **B. CLINICAL FOUNDATIONS**

### 7. Therapeutic Applications

7.1 Demonstrate basic knowledge of the potential, limitations, and problems of populations specified in the Standards of Clinical Practice.

7.2 Demonstrate basic knowledge of the causes, symptoms of, and basic terminology used in medical, mental health, and educational classifications.

7.3 Demonstrate basic knowledge of typical and atypical human systems and development (e.g., anatomical, physiological, psychological, social.)

7.4 Demonstrate basic understanding of the primary neurological processes of the brain.

### 8. Therapeutic Principles

8.1 Demonstrate basic knowledge of the dynamics and processes of a therapist-client relationship.

8.2 Demonstrate basic knowledge of the dynamics and processes of therapy groups.

8.3 Demonstrate basic knowledge of accepted methods of major therapeutic approaches.

### 9. The Therapeutic Relationship

9.1 Recognize the impact of one's own feelings, attitudes, and actions on the client and the therapy process.

9.2 Establish and maintain interpersonal relationships with clients and team members that are appropriate and conducive to therapy.

9.3 Use oneself effectively in the therapist role in both individual and group therapy, e.g., appropriate self-disclosure, authenticity, empathy, etc. toward affecting desired therapeutic outcomes.

9.4 Utilize the dynamics and processes of groups to achieve therapeutic goals

9.5 Demonstrate awareness of the influence of race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status, or political affiliation on the therapeutic process.

## **C. MUSIC THERAPY**

### 10. Foundations and Principles

Apply basic knowledge of:

- 10.1 Existing music therapy methods, techniques, materials, and equipment with their appropriate applications.
- 10.2 Principles and methods of music therapy assessment, treatment, evaluation, and termination for the populations specified in the Standards of Clinical Practice.
- 10.3 The psychological aspects of musical behavior and experience including, but not limited to, perception, cognition, affective response, learning, development, preference, and creativity.
- 10.4 The physiological aspects of the musical experience including, but not limited to, central nervous system, peripheral nervous system, and psychomotor responses.
- 10.5 Philosophical, psychological, physiological, and sociological basis of music as therapy.
- 10.6 Use of current technologies in music therapy assessment, treatment, evaluation, and termination.

### 11. Client Assessment

- 11.1 Select and implement effective culturally-based methods for assessing the client's strengths, needs, musical preferences, level of musical functioning, and development.
- 11.2 Observe and record accurately the client's responses to assessment.
- 11.3 Identify the client's functional and dysfunctional behaviors.
- 11.4 Identify the client's therapeutic needs through an analysis and interpretation of assessment data.
- 11.5 Communicate assessment findings and recommendations in written and verbal forms.

### 12. Treatment Planning

- 12.1 Select or create music therapy experiences that meet the client's objectives.
- 12.2 Formulate goals and objectives for individual and group therapy based upon assessment findings.
- 12.3 Identify the client's primary treatment needs in music therapy.
- 12.4 Provide preliminary estimates of frequency and duration of treatment.
- 12.5 Select and adapt music, musical instruments, and equipment consistent with the strengths and needs of the client.
- 12.6 Formulate music therapy strategies for individuals and groups based upon the goals and objectives adopted.
- 12.7 Create a physical environment (e.g., arrangement of space, furniture, equipment, and instruments that is conducive to therapy).
- 12.8 Plan and sequence music therapy sessions.
- 12.9 Determine the client's appropriate music therapy group and/or individual placement.
- 12.10 Coordinate treatment plan with other professionals.

### 13. Therapy Implementation

- 13.1 Recognize, interpret, and respond appropriately to significant events in music therapy sessions as they occur.
- 13.2 Provide music therapy experiences that address assessed goals and objectives for populations specified in the Standards of Clinical Practice.
- 13.3 Provide verbal and nonverbal directions and cues necessary for successful client participation.
- 13.4 Provide models for and communicate expectations of behavior to clients.
- 13.5 Utilize therapeutic verbal skills in music therapy sessions.
- 13.6 Provide feedback on, reflect, rephrase, and translate the client's communications.
- 13.7 Assist the client in communicating more effectively.
- 13.8 Sequence and pace music experiences within a session according to the client's needs and situational factors.
- 13.9 Conduct or facilitate group and individual music therapy.
- 13.10 Implement music therapy program according to treatment plan.
- 13.11 Promote a sense of group cohesiveness and/or a feeling of group membership.
- 13.12 Develop and maintain a repertoire of music for age, culture, and stylistic differences.
- 13.13 Recognize and respond appropriately to effects of the client's medications.
- 13.14 Maintain a working knowledge of new technologies and implement as needed to support client progress towards treatment goals and objectives.

### 14. Therapy Evaluation

- 14.1 Design and implement methods for evaluating and measuring client progress and the effectiveness of therapeutic strategies.
- 14.2 Establish and work within realistic time frames for evaluating the effects of therapy.
- 14.3 Recognize significant changes and patterns in the client's response to therapy.
- 14.4 Recognize and respond appropriately to situations in which there are clear and present dangers to the client and/or others.
- 14.5 Modify treatment approaches based on the client's response to therapy.
- 14.6 Review and revise treatment plan as needed.

### 15. Documentation

- 15.1 Produce documentation that accurately reflects client outcomes and meet the requirements of internal and external legal, regulatory, and reimbursement bodies.
- 15.2 Document clinical data.

15.3 Write professional reports describing the client throughout all phases of the music therapy process in an accurate, concise, and objective manner.

15.4 Effectively communicate orally and in writing with the client and client's team members.

15.5 Document and revise the treatment plan and document changes to the treatment plan.

15.6 Develop and use data-gathering techniques during all phases of the clinical process including assessment, treatment, evaluation, and termination.

## 16. Termination/Discharge Planning

16.1 Assess potential benefits/detriments of termination of music therapy.

16.2 Develop and implement a music therapy termination plan.

16.3 Integrate music therapy termination plan with plans for the client's discharge from the facility.

16.4 Inform and prepare the client for approaching termination from music therapy.

16.5 Establish closure of music therapy services by time of termination/discharge.

## 17. Professional Role/Ethics

17.1 Interpret and adhere to the AMTA Code of Ethics.

17.2 Adhere to the Standards of Clinical Practice.

17.3 Demonstrate dependability: follow through with all tasks regarding education and professional training.

17.4 Accept criticism/feedback with willingness and follow through in a productive manner.

17.5 Resolve conflicts in a positive and constructive manner.

17.6 Meet deadlines without prompting.

17.7 Express thoughts and personal feelings in a consistently constructive manner.

17.8 Demonstrate critical self-awareness of strengths and weaknesses.

17.9 Demonstrate knowledge of and respect for diverse cultural backgrounds.

17.10 Treat all persons with dignity and respect, regardless of differences in race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status, or political affiliation.

17.11 Demonstrate skill in working with culturally diverse populations.

17.12 Adhere to all laws and regulations regarding the human rights of clients, including confidentiality.

17.13 Demonstrate the ability to locate information on regulatory issues and to respond to calls for action affecting music therapy practice.

17.14 Demonstrate basic knowledge of professional music therapy organizations and how these organizations influence clinical practice.

17.15 Demonstrate basic knowledge of music therapy service reimbursement and financing sources (e.g., Medicare, Medicaid, Private Health Insurance, State and Local Health and/or Education Agencies, Grants).

17.16 Adhere to clinical and ethical standards and laws when utilizing technology in any professional capacity.

## 18. Interprofessional Collaboration

18.1 Demonstrate a basic understanding of professional roles and duties and develop working relationships with other disciplines in client treatment programs.

18.2 Communicate to other departments and staff the rationale for music therapy services and the role of the music therapist.

18.3 Define the role of music therapy in the client's total treatment program.

18.4 Collaborate with team members in designing and implementing interdisciplinary treatment programs.

## 19. Supervision and Administration

19.1 Participate in and benefit from multiple forms of supervision (e.g., peer, clinical).

19.2 Manage and maintain music therapy equipment and supplies.

19.3 Perform administrative duties usually required of clinicians (e.g., scheduling therapy, programmatic budgeting, maintaining record files).

19.4 Write proposals to create new and/or maintain existing music therapy programs.

## 20. Research Methods

20.1 Interpret information in the professional research literature.

20.2 Demonstrate basic knowledge of the purpose and methodology of historical, quantitative, and qualitative research.

20.3 Perform a data-based literature search.

20.4 Integrate the best available research, music therapists' expertise, and the needs, values, and preferences of the individual(s) served.

## Appendix II

### AMTA Code of Ethics [excerpt]

#### 1.0 Professional Competence and Responsibilities

1.1 The MT will perform only those duties for which he/she has been adequately trained, not engaging outside his/her area of competence.

1.2 The MT will state his/her qualifications, titles, and professional affiliation(s) accurately.

1.3 The MT will participate in continuing education activities to maintain and improve his/her knowledge and skills.

1.4 The MT will assist the public in identifying competent and qualified music therapists and will discourage the misuse and incompetent practice of music therapy.

1.5 The MT is aware of personal limitations, problems, and values that might interfere with his/her professional work and, at an early stage, will take whatever action is necessary (i.e., seeking professional help, limiting or discontinuing work with clients, etc.) to ensure that services to clients are not affected by these limitations and problems.

1.6 The MT respects the rights of others to hold values, attitudes, and opinions that differ from his/her own.

1.7 The MT does not engage in sexual harassment.

1.8 The MT accords sexual harassment grievants and respondents dignity and respect, and does not base decisions solely upon their having made, or having been the subject of, sexual harassment charges.

1.9 The MT practices with integrity, honesty, fairness, and respect for others.

1.10 The MT delegates to his/her employees, students, or co-workers only those responsibilities that such persons can reasonably be expected to perform competently on the basis of their training and experience. The MT takes reasonable steps to see that such persons perform services competently; and, if institutional policies prevent fulfillment of this obligation, the MT attempts to correct the situation to the extent feasible.

#### 2.0 General Standards

2.1 The MT will strive for the highest standards in his/her work, offering the highest quality of services to clients/students.

2.2 The MT will use procedures that conform with his/her interpretation of the Standards of Clinical Practice of the American Music Therapy Association, Inc.

##### 2.3 Moral and Legal Standards

2.3.1 The MT respects the social and moral expectations of the community in which he/she works. The MT is aware that standards of behavior are a personal matter as they are for other citizens, except as they may concern the fulfillment of professional duties or influence the public attitude and trust towards the profession.

2.3.2 The MT refuses to participate in activities that are illegal or inhumane, that violate the civil rights of others, or that discriminate against individuals based upon race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status, or political affiliation. In addition, the MT works to eliminate the effect of biases based on these factors on his or her work.

### **3.0 Relationships with Clients/Students/Research Subjects**

3.1 The welfare of the client will be of utmost importance to the MT.

3.2 The MT will protect the rights of the individuals with whom he/she works. These rights will include, but are not limited to the following:

- - right to safety;
- - right to dignity;
- - legal and civil rights;
- - right to treatment;
- - right to self-determination;
- - right to respect; and
- - right to participate in treatment decisions.

3.3 The MT will not discriminate in relationships with clients/students/research subjects because of race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status or political affiliation.

3.4 The MT will not exploit clients/students/research subjects sexually, physically, financially or emotionally.

3.5 The MT will not enter into dual relationships with clients/students/research subjects and will avoid those situations that interfere with professional judgment or objectivity (e.g., those involving competitive and/or conflicting interests) in their relationships.

3.6 The MT will exert caution in predicting the results of services offered, although a reasonable statement of prognosis and/or progress may be made. The MT will make only those claims to clients concerning the efficacy of services that would be willingly submitted for professional scrutiny through peer review, publication in a professional journal, or documentation in the client's record.

3.7 The MT will offer music therapy services only in the context of a professional relationship and in a setting which insures safety and protection for both client and therapist. The MT will avoid deception in representations of music therapy to the public.

3.8 The MT will inform the client and/or guardian as to the purpose, nature, and effects of assessment and treatment.

3.9 The MT will use every available resource to serve the client best.

3.10 The MT will utilize the profession's Standards of Practice as a guideline in accepting or declining referrals or requests for services, as well as in terminating or referring clients when the client no longer benefits from the therapeutic relationship.

3.11 In those emerging areas of practice for which generally recognized standards are not yet defined, the MT will nevertheless utilize cautious judgment and will take reasonable steps to ensure the competence of his/her work, as well as to protect clients, students, and research subjects from harm.

#### **3.12 Confidentiality**

3.12.1 The MT protects the confidentiality of information obtained in the course of practice, supervision, teaching, and/or research.

3.12.2 In compliance with federal, state and local regulations and organizational policies and procedures, confidential information may be revealed under circumstances which include but are not limited to:

- a. when, under careful deliberation, it is decided that society, the client, or other individuals appear to be in imminent danger. In this situation, information may be shared only with the appropriate authorities, professionals or others. The client is made aware of this when possible and if reasonable.
- b. when other professionals within a facility or agency are directly related with the case or situation.
- c. when the client consents to the releasing of confidential information.
- d. when compelled by a court or administrative order or subpoena, provided such order or subpoena is valid and served in accordance with applicable law.

3.12.3 The MT informs clients of the limits of confidentiality prior to beginning treatment.

3.12.4 The MT disguises the identity of the client in the presentation of case materials for research and teaching. Client or guardian consent is obtained, with full disclosure of the intended use of the material.

3.12.5 All forms of individually identifiable client information, including, but not limited to verbal, written, audio, video and digital will be acquired with the informed client or guardian consent and will be maintained in a confidential manner by the MT. Also, adequate security will be exercised in the preservation and ultimate disposition of these records.

3.12.6 Information obtained in the course of evaluating services, consulting, supervision, peer review, and quality assurance procedures will be kept confidential.

#### **4.0 Relationships with Colleagues**

4.1 The MT acts with integrity in regard to colleagues in music therapy and other professions and will cooperate with them whenever appropriate.

4.2 The MT will not offer professional services to a person receiving music therapy from another music therapist except by agreement with that therapist or after termination of the client's relationship with that therapist.

4.3 The MT will attempt to establish harmonious relations with members from other professions and professional organizations and will not damage the professional reputation or practice of others.

4.4 The MT will share with other members of the treatment team information concerning evaluative and therapeutic goals and procedures used.

4.5 The MT will not discriminate in relationships with colleagues because of race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status or political affiliation.

#### **5.0 Relationship with Employers**

5.1 The MT will observe the regulations, policies, and procedures of employers with the exception of those that are in violation of this code of ethics.

5.2 The MT will inform employers of conditions that may limit the effectiveness of the services being rendered.

5.3 When representing the employer or agency, the MT will differentiate personal views from those of the profession, the employer, and the agency.

5.4 The MT will provide services in an ethical manner and will protect the property, integrity, and reputation of the employing agency.

5.5 The MT will utilize the agency's facilities and resources only as authorized.

5.6 The MT will not use his/her position to obtain clients for private practice, unless authorized to do so by the employing agency.

#### **6.0 Responsibility to Community/Public**

6.1 The MT will strive to increase public awareness of music therapy.

6.2 The MT engaged in a private practice or business will abide by federal, state and local regulations relevant to self-employment including but not limited to professional liability, registering and maintaining a business, tax codes and liability, confidentiality and reimbursement.

#### **7.0 Responsibility to the Profession/Association**

7.1 The MT respects the rights, rules, and reputation of his/her professional association.

7.2 The MT will distinguish personal from professional views when acting on behalf of his/her association. The MT will represent the association only with appropriate authorization.

7.3 The MT will strive to increase the level of knowledge, skills, and research within the profession.

7.4 The MT will refrain from the misuse of an official position within the association.

7.5 The MT will exercise integrity and confidentiality when carrying out his/her official duties in the association.

## Appendix III

### Infection Control and Musical Instruments

A large number of micro-organisms, including diseases such as chickenpox, measles, staphylococcus and streptococcus infections can be spread through the saliva. Since there is no simple way of knowing whether an individual is carrying an infectious micro-organism in their saliva (other than diagnosis of disease), schools should take care to reduce the spread of diseases.

The mouthpieces on musical instruments – particularly those used by more than one child, as in a music class or band – should be sterilized or disinfected to prevent the spread of disease. *Sterilization* destroys all form of life by using physical or chemical agents, such as heat or chemical vapor. *Cold disinfection* involves putting an object in a solution of a chemical agent and water to destroy most microorganisms. The high cost of equipment for sterilization, and the fact that plastics cannot be heat sterilized, usually means that sterilization is not possible in schools. Cold disinfection, while not a substitute for sterilization, is a good alternative for most schools.

#### **Avoid sharing as much as possible**

Whenever possible, schools are encouraged to provide individual mouthpieces or recorders for students. When this is not feasible, students should be encouraged to purchase their own recorder or mouthpiece.

Reeds are never to be shared and do not require sanitizing.

When mouth pieces must be shared, they should be disinfected using a disinfectant method that will preserve the mouth piece and be effective on the microbial agents of concern.

#### **Choosing a disinfectant for musical instruments**

Compounds that can be used on mouthpieces and instruments include:

1. Combination Phenolics (Synthetic), a non-corrosive, a nonirritating, odorless compound that won't hurt most metals and plastics.
2. Buffered chlorine products will disinfect without corroding metals.

*Both of these products can be found at medical and dental supply companies. Contact the school supplier of products for more information.*

3. Quaternary ammonium

*Other potential disinfectants, including alcohol, boiling water and bleach are NOT recommended for disinfecting mouthpieces or instruments because of their effect on skin and/or plastics and metals.*

Carry on a web search to find appropriate disinfectants for musical instruments. For example, one could use the following keywords: "disinfection musical instruments school".

### Steps for disinfecting mouthpieces/musical instruments:

1. Soak in warm water for twenty minutes.
2. Wash with soap and water.
3. Rinse thoroughly with water.
4. Immerse in the disinfectant solution. When using the disinfectant, follow the manufacturer instructions on dilution levels and immersion times to ensure effectiveness.
5. Rinse thoroughly with water and let dry.
6. In schools where dishwashers are available, mouthpieces can go into the dishwasher on a regular wash cycle.

Students with personal recorders or mouthpieces may wish to sanitize them after each use following the same procedure.

### Other Guidelines for disinfecting musical instruments:

1. Do not allow children with visibly active cold sores, severely chapped lips or upper respiratory infections to use mouthpieces or instruments.
2. Clean brass instruments with a cleaning snake and warm water before passing to other children or after a child has had a communicable disease, such as a cold or flu.
3. Wipe dry woodwind instruments after every use.
4. Disinfect mouthpieces after use by a child who has had a communicable disease and throw out used reeds.
5. If preferred, a squeeze bottle can be used to squirt the liquid into hard to reach places. **Never use a spray bottle.**
6. All mixed solutions should be stored in a non-metal container, which has a lid. The solution must be deep enough to allow total immersion of the mouthpiece or recorder.
7. The solution once mixed is to be covered when not in use. It must be **replaced every week or more frequently** depending on the number of mouth pieces being cleaned.
8. Used solutions can be poured down the drain followed by a one-minute flush of tap water.
9. If the mouthpiece or recorder is to be dried, use disposable paper towels.
10. At the end of the class, the mouthpiece or recorder should have as much of the excess moisture removed as possible. Use swabs or disposable paper towels to remove moisture before immersing the mouth piece or instrument in an appropriate disinfectant solution for one minute.
11. The recorder or mouthpiece should be placed on a disposable paper towel to air dry before being placed in storage.

### To clean whistles:

1. Prepare a light bleach solution with approximately one capful of bleach to one gallon of water.
2. Immerse whistles in bleach solution. If whistles have a wooden ball, limit the time to ten minutes they are in bleach solution.
3. Rinse well with water.