

Pediatric Music Therapy Service Assessment

AMTA2019 Dallas; 11/17/18

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Thank you for your willingness to participate in this interactive process. The intention of this effort is to stimulate engagement and dialogue amongst music therapists working in pediatric medical settings to assist in development of their practice and improved service to the patients and families that they serve.

AMTA Pediatric Work Group seeks to develop best practice guidelines for pediatric medical settings by utilizing the research literature base as well as clinician experience. By sharing your practice experiences, you will meaningfully inform this project. After completing this service assessment, please consider completing the short survey to gather your perspective. **Link found at the end of this document - before Dec 1.**

Do you currently provide music therapy to hospitalized infants, children or adolescents?

- Yes - continue
- No - thank you for your participation, but this effort is focused on music therapists working in pediatric medical settings.

Establishing baseline - Defining your practice

1) Are you assigned to a single area/unit of the hospital?

- Yes: Please describe the areas you are expected to cover:

- No: Please describe the multiple areas you are expected to cover:

Are you able to influence the development of your practice, for example, focusing on a specific unit, area, or special population? _____

Consider how your skills and evidence from the literature might shape the development of a special focus in your setting. Please share possibilities or concerns:

2) How many hours per day do you work? _____

3) How many days per week do you work? _____

4) Do you receive referrals?

- Yes - continue to question #5
- No – How are patients identified for music therapy in your facility?

5) Do you assess before providing services?

- Yes - continue to question 6
- No – How do you formalize a treatment plan for identified patients?

6) Do you provide individualized sessions?

- Yes: How many sessions do you provide per day?

If you estimated an average length of session, what would it be?

15m, 30m, 45m, 60m, 75m, 90m, >90m

How frequently do you provide sessions?

1x per week, 2x per week, 3x per week, 4 or more times per week

Do you adjust dosage (frequency of sessions) of your MT sessions?

Do you provide group sessions?

How many group sessions do you provide per week?

How many patients do you see in group sessions per week?

- No: Do you provide group sessions?

How many group sessions do you provide per week?

How many patients do you see in group sessions per week?

7) Do you document your work in the medical record?

- Yes - continue to question #8
- No – What barriers keep you from documenting in the medical record? Go to question #10

8) Do you use electronic charting?

- Yes - continue to question #9
- No – What barriers keep you from documenting in the electronic medical record?

9) Which software does your hospital use for medical charting?

Cerner, EPIC, other: _____

10) Are you satisfied with your current charting system?

- Yes - Do you have a schedule for reviewing charting process and/or forms?
- No – Would additional support be helpful in developing your charting system?

Tracking your work

11) Do you keep statistics of your sessions — Some record of your work beyond what is placed in the electronic medical record?

- Yes - Do you track length of sessions? Yes No

Do you track type of intervention delivered? (Yes/No)

Do you track outcomes? (Yes/No)

What other outcome measures do you track & report to stakeholders?

No - Consider how a summary of your work might be helpful in sharing with key stakeholders or for research, development or quality improvement. Sharing about the quantity and quality of your work

Do you journal about your clinical experiences? Yes No

If Yes: Does journaling about your work decrease your work stress?

Supervision

Do you receive clinical supervision in your work setting? Yes No

Do you receive clinical supervision from your supervisor? Yes No

Do you receive peer clinical supervision? Yes No

Do you have advanced clinical training that you apply in your pediatric medical setting?

Yes No

Please describe your advanced clinical training: _____

Do you supervise interns in your pediatric setting? Yes No

Do you supervise practicum students in your pediatric setting? Yes No

Do you supervise music volunteers in your pediatric setting? Yes No

Do you provide oversight to any special music programs other than music therapy?

Yes: Please describe the music program you oversee: _____

What oversight do you provide? _____

No: Consider how a special music program may complement your music therapy work. What challenges have you encountered, or barriers have you experienced with special music programs in your setting: _____

Theory of practice and professional identity

Have you assembled a document describing the philosophy of your MT program?

Yes: Would you consider sharing the philosophy of your program with the Pediatric Work Group?

No: As part of the AMTA national roster internship application, sites seeking authorization to provide a national internship must provide an outline defining aspects of the music therapy practice including beliefs regarding how and why music is effective in treatment, clinical techniques, uses of music and theoretical models.

Consider how reflecting on these themes might help you create a philosophy document that will articulate how you use music to improve health outcomes for the patients and families you serve. Create your own mission statement!

Joke Bradt (2013), In Guidelines for Pediatric Music Therapy, based on Claire Ghetti's definition of procedural support offered this definition of pediatric medical music therapy:

"Pediatric medical music therapy is the use of music and the therapeutic relationship to promote healthy coping and safeguard the child's psychosocial well being during inpatient and out patient medical treatment."

Does this definition accurately describe your practice of music therapy?

Yes: In your own words, what appears to be the central aim of music therapy in pediatric medical settings? _____

No: What would you change about this definition or what other aims should be included to accurately reflect your approach to pediatric medical music therapy?

It has been suggested by some that music therapists identify to different degrees as artist and clinician. Do you agree with this conceptualization of music therapist identity?

Yes No

Yes: Please describe the ratio to which each reflects your 100% total clinical identity.

Artist: Select 0-100%: _____ Clinician: Select 0-100%: _____
(both must total 100)

No: What might better describe your professional identity?

Self-Care & Staff Support

Serving very ill or injured infants, children, adolescents and their parents can lead to feelings of distress.

Have you ever felt overwhelming distress because of your work, particularly while you were away from work?

Yes: Are there people or programs in your work setting that can support you?

Yes: Please describe: _____

No

No: What kinds of support programs would help reduce your feelings of distress related to your work? _____

Program Development

What is the most pressing area of need for the music therapy service development in your setting?

- a. Better referral systems
- b. Better charting system
- c. Better definition of MT services provided
- d. Better staff understanding of possible MT outcomes

If none of the above, then write in:

What is the most pressing area of need for the music therapy service development in your setting? _____

Have you found any staff or area of service particularly supportive of the music therapy service?

- Yes: Please describe the unit/area, or type of provider: _____
- No

Is there an area within your pediatric setting that doesn't currently receive music therapy services but you think could benefit?

- Yes: Please describe the area you think could benefit from music therapy services: _____
- No

Developing research programs

Do you participate in research within your setting?

- Yes No

Do you actively participate in AMTA or another facility affiliated supportive governing body?

- Yes No

Bradt, J. (Ed.). (2013). *Guidelines for music therapy practice in pediatric care*. Barcelona Publishers.

Thank you for taking the time to engage in this self-assessment process. Self-assessment promotes reflection and can lead to important insights that may guide development in your setting. The Pediatric Music Therapy workgroup hopes you take the time to share with us your key responses to each section and approach this development work as a learner-leader.

A very brief survey is available at: <https://is.gd/PedMTSelfAssess> to enable you to share this information. If you would like to receive this URL in the form of an email, please write to david.knott@seattlechildrens.org to receive an email invitation to this survey. Alternate URL: <https://redcap.iths.org/surveys/?s=LYWNMN44X3>

This survey will close on December 1, 2018