MUSIC THERAPY REFERRAL PROCEDURES

NOTE: A principal signature is REQUIRED for all referral requests. The signature box is located on the two-page checklist in this packet.

→ DETERMINING WHETHER AN MT ASSESSMENT IS REQUIRED

- 1. Case Manager reviews "The Quick Three" chart below and the music therapy district information packet located on SDUSD website (Related Services section):
 - a. If a music therapy evaluation appears warranted, the two-page checklist in this packet is completed by the Case Manager with input as appropriate from relevant service providers (such as SLP/OT) **PRIOR** to developing an assessment plan.
 - b. If this request was formally made by the **student's parent/guardian**, the Case Manager shall <u>submit the two-page checklist within 10 days of the request.</u> This will allow the district to respond to the family's request within the 15-day legal timeline.

THE QUICK THREE

If you answer YES to all three questions below, your student is more likely to be appropriate for a music therapy evaluation through the IEP:

- ✓ Is additional support required in the student's educational program due to factors such as insufficient progress, interfering behaviors, or a limited number of instructional approaches the student has been responsive to?
- ✓ Is music a documented learning strength or one of the few ways to elicit on-task participation, communication, engagement, and/or independent responses?
- ✓ Given the existing uses of music in the student's program, does the IEP team still require the assistance of a specialist to align music-based interventions with IEP goals and/or accommodate for the student's age, cognitive level, mode of communication or rate of processing?
- 2. **Case manager obtains principal signature** (signature box is located on the "Music Therapy Referral Checklist" included in this packet).

- 3. Case Manager emails completed "Music Therapy Referral Checklist" from this packet to mtclerk@sandi.net.
- 4. Music Therapist reviews the checklist and confers with the Case Manager to determine the most appropriate option:
 - a. If an assessment IS warranted, an assessment plan is developed on SEAS.
 - b. If an assessment is NOT warranted and this was a parent request, PWN shall be provided by the Case Manager to the family describing why the request was refused

→ DEVELOPING AN ASSESSMENT PLAN

- 1. If it is determined that an assessment is appropriate, the Case Manager shall generate an assessment plan with prior written notice on SEAS:
 - a. Under "Reason for the Assessment Plan" select "Music Therapy Assessment".
 - b. Under "Reason(s) for Proposed Assessment" indicate rationale such as "Based on indicators that music is a primary motivator and learning strength a Music Therapy Eligibility Assessment will be conducted to determine if music therapy as a related service is required for NAME to receive meaningful educational benefit and access his/her educational program."
- 2. Case Manager sends the assessment plan & prior written notice home for signature.
- 3. Once the signed assessment plan is received, the Case Manager emails mtclerk@sandi.net with the student's name and date the evaluation plan was signed.

→ ASSESSMENT PROCEDURES

- 1. Music Therapist contacts Case Manager to schedule assessment at the school site:
 - a. Assessment procedures completed by the Music Therapist may include observation, direct music trials, interview with staff, records review, and parent contact.
 - b. Music Therapist prepares assessment report and informs case manager to notify them that an IEP meeting be scheduled within the legal timeline to discuss results.
- 2. Case manager schedules supplemental IEP meeting (unless a meeting is already scheduled for other reasons and results can be reviewed at that meeting).
 - a. Case manager should inform Music Therapist in advance of IEP date.
 - b. Music Therapist uploads report into SEAS.
 - c. Music Therapist attends meeting and discusses assessment results with IEP team.

→ POST-ASSESSMENT PROCEDURES

- 1. If music therapy services are NOT recommended based on assessment results, the Case Manager should indicate this information on the SEAS team action page.
- 2. If based on assessment results and IEP team agreement, music therapy services are found to be necessary for the student to receive meaningful educational benefit, the Music Therapist will complete the following on SEAS:
 - a. <u>Strengths/Interests/Learning Preference:</u> This section should reflect that music is a primary learning modality for the student and any other relevant information of how music-based strategies are critical to the student's participation and progress.
 - b. Related Services Section: Enter start/end date, duration/frequency, and environment.
 - c. Special Factors:
 - i. <u>Section A: Special Education Service Delivery:</u> Fill in service, environment, need areas, and comments.
 - ii. <u>Section C: Collaboration/Program Modifications:</u> Indicate which providers the Music Therapist will collaborate with.
 - d. <u>Goals:</u> The Music Therapist is listed as person(s) responsible for IEP goals that will be supported by music-assisted learning interventions.
- 3. Once parent/guardian consent is received, the Case Manager shall inform the Music Therapist so that the provider is aware of when to start services.
- 4. The Music Therapist is responsible for reviewing the student's eligibility/need for music therapy at each subsequent annual IEP meeting to determine if services are still necessary and required.
- 5. For the time period that music therapy is listed as a related service on the IEP, it is the responsibility of the Case Manager to include the Music Therapist as an IEP team member by assuring that they are informed of IEP meeting dates, changes to the IEP, records requests, or any other pertinent student information.

MUSIC THERAPY AS A RELATED SERVICE OVERVIEW

1) What is Music Therapy

Music therapy is the evidence-based use of music interventions to accomplish individualized goals. In the special education setting, music therapy functions as a collaborative service to support IEP-related progress in goal areas such as academic learning, social skills, expressive and receptive communication, behavior, movement, and daily living skills. Music therapists assist in facilitating functional educational outcomes, including the student's ability to generalize skills taught through music to the non-music setting.

Music therapy is provided by Board Certified Music Therapists who have a minimum of a Baccalaureate degree in Music Therapy from an accredited University including 1200 hours of clinical training and Board Certification through the Certification Board for Music Therapists (www.cbmt.org), which is accredited by NCCA; the same governing body for Occupational Therapy certification.

2) When Can Music Therapy be Considered a Related Service?

As indicated in the California Code of Regulations (Title 5 section § 3051.21) music therapy can be considered as an IEP-related service for students who may require this type of support to receive meaningful educational benefit. An evaluation must first be conducted by a Board Certified Music Therapist to determine if the service is necessary and required in order to accommodate the student's learning strengths and assist the student in making progress in IEP goal areas. Music therapy as a related service is NOT offered to teach students a musical instrument or simply because a student shows an interest in music.

3) Music Therapy Eligibility Criteria

The following criteria are considered by the music therapist when determining the necessity of music therapy within the student's IEP:

- Is additional support required to address relevant goals based on factors such as slow or insufficient progress, interfering behaviors, or a limited number of instructional approaches the student has been responsive to?
- Can IEP goal areas be functionally supported through music-assisted learning strategies?
- Is music a documented learning strength for the student?
- Given the music resources available in the student's current program, are modifications or additional instructional supports necessary to access this learning strength?

4) Services

If services are deemed necessary after assessment, music therapy is added to the related services section of the IEP and the music therapist is added as a collaborative support to relevant IEP goals. Since music therapy is a support and not an area of need, additional goals specific to music therapy are not developed. Services are most frequently provided in a consultative or collaborative format, including the development of IEP-aligned music strategies for carryover by staff and parents. Session data is maintained, and the student's need for music therapy is reviewed at each subsequent IEP meeting. Services are discontinued when no longer found to be required for the student to achieve meaningful educational benefit.

MUSIC THERAPY REFERRAL CHECKLIST

This checklist serves as a guide to assist the IEP team in determining whether a music therapy assessment is required. Prior to completing, please review The Music Therapy Referral packet found on the SDUSD website in the Related Services section. The Case Manager should complete this form with input from IEP team members. Consideration for music therapy as a related service should have a clear purpose, be educationally relevant, and necessary. Send completed checklist by email to mtclerk@sandi.net.

Student Name:	Today's Date:										
School:	Student ID:										
Evaluation Requested By:	Date of Request (if this was a parent request):										
Case Manager Name:	Email:										
Teacher Name:	SLP Name:										
Principal Name:	Principal Signature:										
REASON FOR REQUEST (must include why this service may be required for the student to receive educational benefit):											
1. NEED FOR ADDITIONAL SUPPORT											
		N/A	Never 0-20%	Seldom 20-40%	Occas 40-60%	Freq 60-80%	Always 80-100%				
Does the student have motivation, attention, engagement, and behavioral issues which significantly impact and limit his or her											
Does the student demonstrate significant difficulty with memorization, recall, and/or retention of scripts, rules, task sequences, academic facts or pre-academic concepts?											
Is it difficult to find instructional approaches that accommodate the student's learning style or provide appropriate access to educational content due to challenges such as vision impairment, concurrent cognitive/physical impairments, or other unique needs?											
Does student continue to make insufficient progress on verbal/expressive communication goals despite a variety of interventions attempted?											
Comments:											
2. GOAL AREAS											
List the IEP goal areas music therapy is being requested to assist with			Is student already making appropriate progress in this IEP goal area?								
Goal:			Yes No								
Goal:			☐ Yes ☐ No								
Goal:			☐ Yes ☐ No								
Goal:			☐ Yes ☐ No								
Goal:			☐ Yes ☐ No								
If you answered no for any of the above goal areas, please is	notate if this	is ba	sed on 1	the most	recent pr	ogress re	eport,				

MUSIC THERAPY CHECKLIST - PAGE 2

Student Name:	Date Con			npleted:						
3. RESPONSES TO MUSIC										
		N/A	Never	Seldom	Occas	Freq	Always			
			0-20%	20-40%	40-60%	60-80%	80-100%			
	r, something the student independently									
	d, or is a reliable behavioral reinforcer?									
Does the student show enhanced ability to memorize or recall song		ш	Ш	Ш						
lyrics/chants compared to non-musical presentation of information?										
Is music one of the few instructional approaches that accommodates the			Ш	Ш						
student's learning style or provides a meaningful way to access content?		\vdash	_							
Does the student initiate singing more than speaking, or sing long strings of words but verbally communicates in short utterances?				Ш						
Comments:	unicates in short utterances?									
Comments:										
4. CURRENT USES OF	MUSIC IN THE EDUCATIONAL SETT	ING								
Type of music involvement	Check the boxes below to indicate level of access			List st	udent res	sponses				
Background Music Used	☐ Used Frequently ☐ Used Occasionally									
for Calming or Focusing	Available but Not Used Unavailable If applicable list types of background music available:									
	ii applicable list types of background mus	ic avai	<u>liable:</u>							
Songs or Instruments	☐ Used Frequently ☐ Used Occasionally									
Used as a Reinforcer or	Available but Not Used Unavailable									
Behavioral Incentive	If applicable, list examples:									
Songs or Chants to Teach	Used Frequently Used Occasionally									
Educational Skills	☐ Used Frequently ☐ Used Occasionally ☐ Available but Not Used ☐ Unavailable									
Eudodional Onlino	If applicable, list examples:									
Music Software, Music	Used Frequently Used Occasionally									
Apps, or Music Videos	Available but Not Used Unavailable If applicable, list examples:									
	ii applicable, list examples.									
Circle Time or Classroom	☐ Daily ☐ Weekly ☐ Monthly ☐ Occasi	ionally	□ N/A							
Group Music/Dance	If applicable, list examples of group music	activi	ties:							
Participation										
Student Attends a Band,	Daily Wookly Monthly Cosses	ionally	□ N/A	+						
Choir or other Music Class										
in applicable, hist type of classificationicit.										
Materials Developed by a	Daily Weekly Monthly Occasi	ionally	☐ N/A							
Music Therapist	If applicable, list examples:									
List other members of the s	tudent's IEP team you are aware of that are	utilizir	na music	to supn	ort educa	tional pr	ogress:			
	Jesus Jesus Jesus Grand		3	>=-PP			. J			

MUSIC THERAPY SAMPLE INDICATORS

Students who show multiple indicators in each category are more likely to be appropriate for consideration of music therapy as a related service. This sheet is intended to be used as a springboard for discussion at IEP meetings before referring a student for assessment.

GENERAL NEEDS

- 1. Student has significant **difficulty with attention/motivation** that impacts his/her ability to attend to or participate in educational tasks.
- 2. Student responds to a **limited number of instructional approaches** due to conditions such as concurrent visual & cognitive impairment, severe orthopedic impairment, etc.
- 3. Student has significant behavioral interferences that impede learning and ability to participate,
- 4. Student has shown **limited or insufficient progress on IEP goals** (relative to student potential) given current strategies and supports.

GOAL AREAS

- 1. Student has educational goals requiring basic **rote memorization** such as academic facts, classroom rules, social/communication scripts, safety rules, personal information, etc.
- 2. Student has **basic level pre-academic or academic goals** such as addition facts, basic time/money, phonics, story retell, calendar concepts, letter/number ID, sight words, counting, etc.
- 3. Student has **early elementary level language concept goals** (i.e. opposites, prepositions, emotions, actions verbs, community helpers, shapes, categories, functions, adjectives, body parts, colors, etc.
- 4. Student has **basic level expressive language goals** such as vocal imitation, requesting, early sign language, "Wh" questions, labeling/describing an object, articulation, expanding phrase length, etc.
- 5. Student has **basic level social goals** such as beginning conversation skills, greetings, use of social language, turn-taking, eye contact, learning a simple social script or Social Story©, etc.
- 6. Student has **basic motor goals** such as motor imitation, simple grasp, cause/effect, sustained manipulation of objects, purposeful hand use, or crossing midline.
- 7. Student has educational goals relating to **simple sequences** such as hand washing, tooth brushing, toileting, crossing the street, etc.
- 8. Student requires additional approaches for calming, transitioning, or behavioral incentive.

MUSIC RESPONSES

- 1. Music is a **primary motivator** (such as student consistently requesting music, singing to self, showing high levels of engagement during music activities) or effective **behavioral incentive/reinforcer**.
- 2. Student **learns skills more quickly through song lyrics** or has highly accurate memory for songs/chants and can recall when prompted.
- 3. Student **readily/independently attempts actions** or spontaneously initiates **movement** during songs.
- 4. Student shows **increased phrase length or initiation when singing**, or hums/sings spontaneously throughout the day.
- 5. Music is a consistent way to **maintain the student's attention to task** or student will readily **engage in non-preferred tasks** when music is present.
- 6. Student shows high interest and positive response to a wide variety of songs and music activities, rather than perseveration on select songs

MUSIC THERAPY FLOW CHART

After a student is referred for a music therapy evaluation, the Board Certified Music Therapist considers each of the four criteria below during the assessment process. Information is gathered through records review, staff/parent input, observation, and direct evaluation.

Is additional support required to address relevant IEP goals based on factors such as slow or insufficient progress, behavioral interferences, or limited teaching approaches the student has been responsive to?

