

Application Submittal Checklist

The following items are required for submittal of the grant application. Please verify and check off that the items have been included in the application packet.

- X 1) Certificate of Good Standing (If the Applicant is an Organization)
- X 2) Declaration Statement
- X 3) Verify that grant shall be used for a public purpose
- X 4) Background and Summary
- X 5) Service Summary and Outcomes
- X 6) Budget
 - a) Budget request by source of funds ([Link](#))
 - b) Personnel salaries and wages ([Link](#))
 - c) Equipment and motor vehicles ([Link](#))
 - d) Capital project details ([Link](#))
 - e) Government contracts, grants, and grants in aid ([Link](#))
- X 7) Experience and Capability
- X 8) Personnel: Project Organization and Staffing



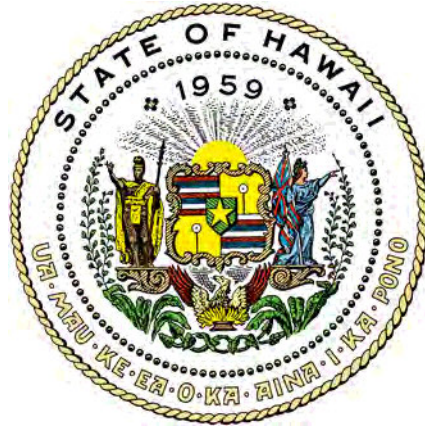
Maria C. Guerrero, Clinical Director, Grants Manager

Jan. 21, 2022

AUTHORIZED SIGNATURE

PRINT NAME AND TITLE

DATE



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

SOUNDING JOY MUSIC THERAPY, INC.

was incorporated under the laws of Hawaii on 09/05/2002 ; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 17, 2022

Director of Commerce and Consumer Affairs

**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAI'I REVISED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

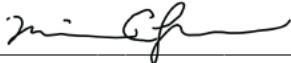
- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Sounding Joy Music Therapy, Inc.

(Typed Name of Individual or Organization)


(Signature)

Jan. 21, 2022

(Date)

Maria C. "Nina" Guerrero, PhD, MT-BC

Clinical Director / Grants Manager

(Typed Name)
Rev 12/2/16

(Title)

Application for Grants

Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Certification – Please attach immediately after cover page

1. Certificate of Good Standing (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2021.

Attached.

2. Declaration Statement

The applicant shall submit a declaration statement affirming its compliance with [Section 42F-103, Hawaii Revised Statutes](#).

Attached.

3. Public Purpose

The applicant shall specify whether the grant will be used for a public purpose pursuant to [Section 42F-102, Hawaii Revised Statutes](#).

The grant requested by this application will be used for services to enhance well-being and quality of life for underserved, socioeconomically disadvantaged individuals and communities. Therefore, the request is fully in compliance with the public purpose pursuant to Section 42F-102, Hawaii Revised Statutes.

II. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:

1. A brief description of the applicant's background

Established in 2002, Sounding Joy Music Therapy, Inc. (Sounding Joy), is the only 501(c)3, non-profit organization providing music therapy in Hawai'i. It was founded on the basis of our belief that music can significantly transform people's lives, and in response to a strong public demand for music therapy in Hawai'i from people of diverse communities who value music as a rich cultural resource

for healing and empowerment. The mission of Sounding Joy is to improve well-being and quality of life through increased access to music therapy, to educate the public about the benefits of music therapy and advocate for equitable distribution of services, and to advance music therapy research and training in Hawai'i.

The organization's main activities are: 1) Music therapy direct services to clients with disabilities, special needs, and at-risk circumstances, offered at Sounding Joy's clinic and at a wide range of community sites including schools, skilled nursing facilities, adult day programs, senior residences, transitional housing shelters, hospitals, and hospices; 2) Promotion and advocacy of music therapy through workshops, demonstrations, resource fairs, and various media; 3) Education and training of music therapy interns and the development of a music therapy degree program in Hawai'i; and 4) Fundraising through benefit concerts, charity events, special campaigns, and sponsor solicitation. Numerous volunteer opportunities are available to the public within these activities.

This year, Sounding Joy is celebrating its 20th anniversary, having provided music therapy direct services to over 2,500 individuals and families and educated over 50,000 on the principles and benefits of music therapy. We have collaborated with hundreds of local agencies which seek out the unique, creative methods of music therapy that no other program can offer. We have contracted with the Hawai'i Department of Education and provided music therapy to dozens of local children in Special Education. With grant support from the State Foundation on Culture and the Arts since 2005, and from the Hawai'i Department of Human Services from 2008 through 2019, we have offered music therapy programs to over 1,000 at-risk youth and families statewide to cultivate self-empowerment and positive relationships. Additionally, from 2017 through 2019, the City of Honolulu granted funds for Sounding Joy to provide music therapy to underserved populations on O'ahu.

In 2011, at the World Congress of Music Therapy in Seoul, Korea, Sounding Joy presented on music therapy in Hawai'i for the first time in the history of this conference. We also initiated a special project in the same year to support relief efforts for regions of Northeast Japan affected by the Great Earthquake. In 2012, the Hawai'i Tourism Authority awarded Sounding Joy a grant for music therapy to enhance mental health in Native Hawaiian communities. Around that time, at Hawai'i Pacific University, we offered the first music therapy introductory course in the state. This course has become the cornerstone of local education in music therapy. More recently, faculty and administration of Brigham Young University in Hawai'i have sought collaboration with Sounding Joy to develop the first music therapy degree program in the state. Over the years, Sounding Joy has received numerous awards and recognitions from the governors, the State Senate and House of Representatives, and the mayors of Honolulu for its outstanding contributions to Hawai'i (Att. 13).

2. The goals and objectives related to the request

The organization requests a grant to provide music therapy (MT) to approximately 75 people of all ages with disabilities and special needs in order to improve their well-being, quality of life, and functioning within the community, especially as they recover from the disruption and isolation of the COVID-19 pandemic. The program will target historically marginalized and underserved communities, which have been disproportionately affected by the physical and psychosocial tolls of the pandemic. Priority for service will be given to individuals and groups currently on the organization's extensive waiting list (Att. 1) who seek but cannot afford MT. The goals of MT include promoting clients' psycho-social-emotional resilience; enhancing developmental, cognitive, physical, and neurologic functioning; and facilitating behavioral modifications and adaptations as needed. The use of music as a tool in the therapeutic process is so manifestly engaging and enjoyable that many clients will experience strong motivation to persevere and succeed in advancing toward their individualized therapeutic goals and objectives despite considerable challenges.

The program will allow Hawai'i's rich heritage of music to be recognized and utilized as a healing resource for Hawai'i's diverse communities. MT mobilizes cultural values and expression as a source of positive change. The psychosocial needs of people with disabilities in underserved indigenous communities are heightened, given that mainstream services are often unable to address these needs in a culturally appropriate or meaningful manner. MT can reach many within these communities through its culturally engaged, creative, personalized approach, motivating them to attain more independent lives through the power of music. Many requests for MT services come from socioeconomically disadvantaged geographic areas where Native Hawaiian and Pacific Islander communities place high value on informal group music-making, or *kani ka pila*, as an empowering source of social and cultural identity.

Another factor in the demand for MT is that Hawai'i has one of the fastest-growing elderly populations in the nation (*2019-2023 Hawai'i State Plan on Aging*, Hawai'i Department of Health, 2019). Research findings strongly agree that this population benefits significantly from MT in terms of social, cognitive, and emotional support, maintenance of overall functioning, and care at the end of life (Att. 2). In fact, the U.S. Congress recommends MT as one of the mandatory activities for senior care. The goals and objectives of the requested grant are to fulfill the needs described above.

3. The public purpose and need to be served

The COVID-19 pandemic has significantly restricted access for people with disabilities to vital sources of psychosocial support, including structured activity

and peer interaction. As many individuals with disabilities are at high risk for adverse consequences of COVID-19, many of their customary opportunities for social engagement and stimulation, such as group services within community day programs, have been limited. This isolation has adversely affected well-being and quality of life for these individuals, as well as their families/caregivers. As our communities undertake recovery from the restrictions of the pandemic, there is a need for resources dedicated to cultivating emotional resiliency, renewing interpersonal and community connections, and rebuilding self-expression and autonomy in individuals with disabilities. This need is particularly acute in historically marginalized and underserved communities which have been most vulnerable to the physical and psychosocial stress of the pandemic. The proposed project will address this need through group MT offered by our board-certified music therapists (MT-BCs) at hosting community facilities, in strict compliance with COVID-19 mitigation measures.

The overarching goal of MT is to enhance well-being and quality of life. Because music stimulates and integrates the functioning of different areas within the brain, musical engagement can address therapeutic goals in a variety of domains, including motor functioning, learning, memory, communication, emotional expression, and socialization. MT reduces stress and strengthens resiliency, self-esteem, communication, social interaction, and integration within the community. Peer-reviewed research compiled by the American Music Therapy Association demonstrates beneficial MT outcomes for a wide range of clinical conditions including autism, dementia, developmental disabilities, neuromotor disorders, and trauma (www.musictherapy.org/research). No prior musical training is required for clients to participate, as the purpose of MT is not technical instruction but self-expression and interaction through singing, movement, and creative improvisation on a variety of instruments in a safe, supportive environment.

Hawai'i is among the most underserved states in terms of MT (Att. 3). Fewer than 10 MT-BCs are currently employed in Hawai'i, as compared with approximately 8,000 nationwide. Neither health insurance nor the HI Department of Health covers MT; hence, it is difficult to provide services to the most vulnerable populations, who could benefit most. These factors have contributed to the accumulation of clients on Sounding Joy's waiting list over the years, who will be given priority for service through the requested grant. Currently, the list includes 635 people with disabilities and special needs: 92 on O'ahu, 211 on Maui, and 332 on Hawai'i (Att. 1). By allowing long-awaited access to MT, we believe the grant will transform the lives of many in Hawai'i who struggle with their daily activities. Although Sounding Joy was able to grant-supported weekly MT to over 100 clients per year from 2017 to 2019 through funding from the City and County of Honolulu (Att. 4), our waiting list of 635 demonstrates that there remain significant needs for MT on the neighbor islands and underserved areas of O'ahu. Neither health insurance nor the Hawai'i Department of Health covers MT services; hence, it is difficult to provide MT to Hawai'i's most vulnerable populations, who could benefit most.

4. Describe the target population to be served

The target population of this grant consists of individuals with disabilities and special needs, as detailed on the waiting list, who lack the financial resources to afford MT. They are affected not only by financial constraints but also by multiple challenges to their developmental, physiological, psycho-social-emotional, spiritual, and material well-being. They are highly vulnerable in their efforts to maintain quality of life, especially amidst the restrictions and disruptions of the pandemic. The requested grant will support services to a total of 75 clients with disabilities and special needs: 25 children and youths (ages 0-17), 20 adults (ages 18-64), and 30 elderly (ages 65+), on the islands of O‘ahu, Maui, and Hawai‘i, giving priority to those on our waiting list. We will endeavor to distribute services among islands and geographic locations in proportion to the distribution of need reflected by the waiting list.

The positive changes that would occur in clients’ lives as a result of receiving MT would also ease the burden of their caregivers and offer hope to their families, teachers, friends, and extended support circles. The benefits of MT directly experienced by the participants would thus strengthen community awareness and support of MT, and contribute to enhanced community living for people with disabilities and special needs in Hawai‘i.

5. Describe the geographic coverage

The grant will support MT services on the islands of O‘ahu, Maui, and Hawai‘i.

III. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant’s approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities

The proposed MT services will seek to improve well-being and quality of life for individuals with disabilities and special needs who are socioeconomically disadvantaged – and thus unable to afford MT – and their communities. Over the course of the grant term, 75 individuals with disabilities and special needs will receive 18 weekly MT group sessions provided by Board Certified Music Therapists (MT-BCs) from Sounding Joy Music Therapy. The clients will be 25 children and youths, 20 adults, and 30 elders, on the islands of O‘ahu, Maui, and Hawai‘i. Sessions will be offered as a pilot program at community facilities

-serving the target populations, with the intention of laying the foundation for sustainable MT services through ongoing collaborative relationships with these facilities.

In the first month of the grant term, the Clinical Director, Program Coordinator, and MT-BCs designated for the project will reconnect with individuals and agencies from the target populations on our waiting list. We will also advertise the proposed MT services through our website, social media, and email lists. We will seek to offer the program at community facilities which demonstrate strong potential for future investment of their own resources to sustain MT services based upon observed benefits to their clients. Once we have made contact with prospective participants, the Program Coordinator and MT-BCs will begin program registration, which entails interviewing clients and/or their caregivers, meeting with facility staff, conducting clinical assessments, obtaining informed consent, placing clients in MT groups, and scheduling weekly group sessions. Age, needs, strengths, and other factors will be taken into account in clients' placement in groups, so as to prevent withdrawal from the program and to promote communication and social interaction.

Our guiding principle is to apply an individually tailored, multi-sensory, culturally responsive approach to enhance clients' well-being and quality of life through measurable positive outcomes. For the first few weeks after weekly MT sessions begin, the MT-BCs will focus on establishing individualized goals and objectives for each client. This is the first and most important task of the MT-BCs, because these goals and objectives will become the core measurement standards for overall evaluation of the proposed services. All sessions will be documented and evaluated by the MT-BCs to assess each client's progress toward goals and objectives on an ongoing basis.

Goals are determined for each client in various domains such as motor, cognitive, emotional, and social functioning, depending upon the client's presenting needs and capacities. The objectives are measurable milestones (e.g., to fill-in an omitted word in a song 3 out of 5 times, to express feelings when asked 2 out of 3 times, etc.) that provide evidence of clients' progress towards their goals. Objectives should be reasonable and realistic, allowing clients to experience success which will motivate further progress. A sample goal with objectives may be stated as follows:

Goal: To improve social skills

Objectives:

- 1) The client will sing or play an instrument together with other group members for 5 minutes per session.
- 2) The client will take turns playing solos in the group in 2 out of 3 opportunities.

The MT-BC will design MT sessions by choosing activities and interventions to facilitate clients' goal attainment. Along with structured activities, spontaneous musical expression is encouraged so that non-verbal "musical dialogues" may take place among session participants. This approach is especially effective for those whose verbal communication or emotional expression is limited. As clients become increasingly expressive and spontaneous through creative modalities, new pathways of communication and relationship may be established. The role of the MT-BC is to facilitate clients' social, emotional, physical, and spiritual engagement to the fullest possible extent. Based upon past outcomes, we anticipate that at least 80% of all clients will achieve their goals and objectives over the course of 18 weekly MT sessions.

Pandemic contingency plans: Over the course of the COVID-19 pandemic, we have developed methods of delivering MT virtually through secure, HIPAA-compliant videoconferencing (e.g., via Zoom Pro), maintaining a high level of creative musical interaction in sessions. In the proposed program, we will be prepared to implement virtual delivery should in-person activities be curtailed for COVID mitigation. Our collaborations over the past year with both new and long-standing community partner organizations have yielded creative strategies for combining virtual and in-person modalities. As some of our partner facilities have gradually reopened for in-person client services, we have been invited to provide MT sessions or interactive presentations through video conference with groups of participants who are gathered in person at the partner site, with on-site staff facilitating participants' engagement and interaction. We have also begun leading groups in person at outdoor locations, with group size limited to 10 in order to optimize both physical distancing and individualized attention, and with participants and facilitators fully vaccinated.

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service

Throughout July 2022, the Clinical Director, Program Coordinator, and MT-BCs will engage in outreach efforts to contact prospective clients and community facilities on the islands of O'ahu, Maui, and Hawai'i. We will give priority for service to individuals and families on our waiting list who are in financial need, and will offer the program to facilities which demonstrate potential to partner with us to sustain MT services in the future. To introduce the program, we will conduct MT workshops and demonstrations, as needed, for clients, families, and staff at prospective partner facilities.

By July 31, 2022, the Program Coordinator and MT-BCs will begin the registration process, which will continue until January 31, 2023, or until maximum client capacity is reached. Within a month of initial contact with each client or facility, the MT-BCs will conduct initial intake sessions and meetings, and ensure that all necessary registration forms (Att. 12) have been completed and signed by

clients or their representatives. Clients will be placed in an appropriate MT group and weekly sessions will be scheduled.

MT sessions will begin as soon as a group (with a minimum of 2 clients) is formed. In the event that there is a clinical need for a client to receive individual rather than group therapy, sessions will begin as soon as the client's and MT-BC's schedules allow. At the latest, therapy should begin by mid-February 2023 to allow completion of 18 weekly sessions. After each session, the MT-BCs will complete attendance sheets and MT session reports (Att. 6) for each client. Within the first 4-5 weeks of sessions, the MT-BCs will establish goals and objectives for each client and record these on the session reports.

Around the 9th weekly session, the MT-BCs will file a mid-term progress report (Att. 7) for each client, assessing progress toward goals during the first half of the program. Clients and/or their representatives will also complete a feedback form (Att. 10). The Clinical Director will conduct an interim analysis and evaluation of the program based upon the mid-term progress reports, client feedback, and other input from the Program Coordinator, MT-BCs, clients, families/caregivers, and collaborating facility staff.

After the completion of 18 MT sessions, the MT-BCs will file a final report (Att. 8) for each client. This report will estimate the client's overall attainment of goals and will provide a narrative description of the client's progress over the entire period of service. It will also recommend future services and resources to maintain or further improve the client's well-being and quality of life. Additionally, the MT-BCs will once again collect feedback from clients and/or their representatives. The Clinical Director will meet with key administrative and clinical staff at each collaborating facility to review the implementation and outcomes of the program, address any questions or concerns, and discuss prospects for continuation of MT services. When all clients have completed their terms of service, the Clinical Director will conduct a final analysis and evaluation of MT outcomes based upon the final reports, client feedback, and other input as described above, and will communicate the results to the grantor, the State. We expect to attain the projected program outcomes by the end of the grant term.

3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results.

Since its establishment in 2002, Sounding Joy's MT programs have been highly regarded as one-of-a-kind in the community, making a significant difference in people's lives through the therapeutic application of music and its unique power to heal. For quality control of all of its MT services, Sounding Joy complies strictly with the code of ethics and professional standards set forth by the American Music Therapy Association (AMTA) and Certification Board for Music Therapists

(CBMT) (Att. 5), the national organizations regulating the field of MT in the U.S. Most importantly, we hire only those holding the nationally recognized MT credential (MT-BC) as clinical staff, because their specialized skills are essential to deliver effective MT services and achieve the targeted therapy goals.

The Executive Director and Clinical Director will be responsible for overall quality assurance of the proposed MT services. The Clinical Director (or the Program Coordinator if the Clinical Director is not available) will review all session reports (Att. 6) to monitor the quality of the sessions. To evaluate clients' progress, mid-term reports (Att. 7) completed by MT-BCs around the 9th session will be discussed at peer-supervision meetings by the Clinical Director, Program Coordinator, and other participating MT-BCs. This is to receive input from all clinicians in the program to support and improve the effectiveness of the sessions. Final reports (Att. 8) completed by MT-BCs at the end of the 18-week service will be reviewed by the Clinical Director and the Executive Director to evaluate the outcomes of MT for each client. All of these reports are essential tools in assessing or modifying clients' courses of therapy.

All of Sounding Joy's MT-BCs are experienced, highly skilled, compassionate professionals who hold monthly peer-supervision meetings to review clients' progress, share clinical expertise and feedback, and discuss any significant events and concerns. If a MT-BC feels more privacy is needed to deal with particular issues, the Clinical Director or the Executive Director will follow up individually, as appropriate to the situation. The MT-BCs are entitled at any time to file a written complaint or grievance to Sounding Joy's Board of Advisors, who will review the case and take necessary action in accordance with Article VI, Section 6.1, *Removals*, and Article VIII, Section 8.1, *Indemnification*, of the organization's bylaws (Att. 9). The MT-BCs are required to submit a written resignation letter at least 30 days in advance. This policy is to protect clients from sudden changes in their support environment, which create unnecessary stress, and to allow them to experience a positive closure with the therapist.

In addition to MT-BC reports, Sounding Joy will also use participant feedback forms (Att. 10) to monitor and evaluate the quality of services. Program participants will be asked to complete the feedback form at the mid-term and end of the program, and will also be encouraged to do so whenever needed or desired. This feedback will guide the therapists' recommendations of future services and resources for clients at the closure of MT. Oral grievances will be accepted and transcribed if a client is unable to write. When any complaints, hardships, or grievances arise, whether documented or undocumented, the Clinical Director will initiate follow-up communication among those involved within 3 working days. If a case cannot be resolved at this level within 2 weeks of an incident, the Executive Director will report the case to the Board of Advisors, who will review the case on behalf of the organization and take responsibility for responding to the case, in accordance with the Grievance Policy (Att. 11).

With the organization's proven record of effective service, highly trained and experienced clinical, administrative, and supervisory staff, and long history of human service work in the community, Sounding Joy is more than adequate to achieve the targeted outcomes of the proposed MT services.

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

During this grant term, 75 individuals with disabilities and special needs on the islands of O'ahu, Maui, and Hawai'i will receive 18 weekly MT sessions provided by MT-BCs to improve their well-being and quality of life. At the outset of services, the MT-BCs will establish individualized MT goals and objectives for each client based on the intake assessment. We expect at least 80% of all clients to achieve their goals and objectives, as measurable outcomes of the proposed MT services.

Below is a list of documents measuring clients' progress at each stage of the program, and overall outcomes which will be reported to the State.

- **Registration Form** (Att. 12): Filed at the start of each client's MT services. Measures how many clients are enrolled in the proposed services.
- **Session Report** (Att. 6): Completed by the MT-BC for each weekly MT session, for each client. References the client's goals and objectives. Describes session events, including the MT-BC's clinical interventions and the client's participation, responses, behavior, and interactions.
- **Mid-Term Progress Report** (Att. 7): Completed by the MT-BC around the 9th session. Narrates the client's progress over time towards his/her goals and objectives. Goals and objectives may be reevaluated and modified by the MT-BC, when appropriate, over the course of services.
- **Client Feedback Form** (Att. 10): Completed by each client (or his/her representative, if necessary) at the mid-term and end of services. We expect 80% of clients' feedback to show at least 75% satisfaction in their ratings.
- **Final Report** (Att. 8): Filed by the MT-BC at the conclusion of services for each client. Evaluates therapy outcomes by estimating goal attainment

and narrating overall progress. Recommends future services, resources, and activities.

We eagerly anticipate achieving the projected outcomes, as the strength-based, client-centered, multi-sensory, culturally sensitive, holistic interventions of MT have been found to strongly motivate clients and their families to strive toward their goals and objectives. Our past outcomes support the efficacy of MT rendered by qualified MT-BCs; hence, we expect the proposed services to generate data demonstrating enhanced well-being and quality of life for participants.

IV. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
 - a. Budget request by source of funds (Link) Attached
 - b. Personnel salaries and wages (Link) Attached
 - c. Equipment and motor vehicles (Link) Not Applicable
 - d. Capital project details (Link) Not Applicable
 - e. Government contracts, grants, and grants in aid (Link) Attached

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2023.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$25,000.00	\$25,000.00	\$25,000.00	\$25,000.00	\$100,000.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2023.

The organization has applied for funding through the Hawai'i State Foundation on Culture and the Arts Biennium Grants program and the City and County of Honolulu's Grants-in-Aid program for fiscal year 2023. In addition to ongoing session fees paid by private clients, the organization will seek further support through private foundations, individual and corporate donations, and community-giving programs, as always.

4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.

In 2020 and 2021, the organization received the CARES Act Sick & Family Leave and Employee Retention Credits in the amount of \$40,020.00.

5. The applicant shall provide a listing of all federal, state, and county government contracts, grants, and grants in aid it has been granted within the prior three years and will be receiving for fiscal year 2023 for program funding.

Please see the attached "GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID" form.

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2021.

Please see the attached organization balance sheet.

V. Experience and Capability

1. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

Sounding Joy has established a strong record of service to disadvantaged individuals and families through MT over the past 20 years. Its outstanding public service is praised not only by clients, families, community members, and professional colleagues, but also by local legislators and political leaders, who consider Sounding Joy a significant asset to Hawai'i (Att. 13). Since its establishment, the organization has provided MT to over 2,500 clients and educated over 50,000 statewide. Sounding Joy tirelessly collaborates with hundreds of local, national, and international agencies to improve the affordability and accessibility of MT in Hawai'i.

Sounding Joy's primary mission is to serve people with disabilities, special needs, and at-risk circumstances through MT. Our largest MT program in the past (2011-2012), funded by the State Department of Human Services, served more than 1,000 at-risk teens with disabilities and special needs. A large statistical study of this program, with 332 subjects meeting criteria for inclusion in statistical analysis, demonstrated overall success, with over 85% goal attainment and under 5% drop-out rates (Att. 14). These outcomes suggest that our MT programs effectively motivate clients to participate and achieve their goals.

From 2017 through 2019, the City and County of Honolulu awarded Grant-In-Aid funding to Sounding Joy, supporting MT services for 100 clients per year on O‘ahu with disabilities and special needs. The program successfully attained its targeted outcomes.

Another program at Sounding Joy, funded by the State Foundation on Culture and the Arts since 2005, has provided MT to about a dozen clients with disabilities per year, along with community outreach to inform the general public about the benefits of MT. Sounding Joy has also served Hawai‘i’s indigenous communities in low-income areas through MT funded by the Hawai‘i Tourism Authority, enhancing participants’ sense of cultural identity and heightening community awareness of the rich therapeutic potential within Hawaiian and Pacific Island musical traditions and cultural values.

The core concept of MT, utilization of music’s unique power to facilitate the betterment of human life, is applied to all our programs. The field of MT is regulated nationally by professional ethics and standards of practice, including the education and training of MT-BCs. By employing only qualified MT-BCs, our organization maintains quality of service, helping to ensure the attainment of targeted outcomes for all our programs.

Sounding Joy’s ultimate goal is to provide all our clients with the best MT services possible to improve their quality of life, regardless of their socioeconomic or other disadvantages. We have been making progress towards this goal, but the community’s needs remain profound, particularly on the neighbor islands and rural O‘ahu. The requested grant will allow significant advancement in providing the public with access to high-quality MT services. Sounding Joy has a long history of delivering such services, and is known and trusted as a MT provider by the community at large.

2. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.

Sounding Joy currently rents an office space of about 500 sq. ft. in an ADA-compliant building. In this space, all administrative tasks along with individual and small-group MT sessions are conducted. The organization will require additional spaces or a new, larger facility to adequately accommodate the proposed services, and is thus requesting a capital grant along with this service grant. If the capital grant is not awarded, Sounding Joy plans to rent additional spaces for MT sessions as needed.

VI. Personnel: Project Organization and Staffing

1. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the

qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

All of Sounding Joy's music therapists hold the required national credential, the MT-BC. Two MT-BCs will provide the proposed MT sessions, one of whom will also serve as Program Coordinator. Each of them is experienced in serving clients with disabilities and special needs through MT and achieving the desired outcomes of Sounding Joy's MT programs. They are the powerhouse of our clinical success and will help our clients to attain their goals and objectives to their maximum capacity.

The proposed Program Coordinator is a MT-BC with 10 years of experience within the organization. Possessing excellent communication and interpersonal skills, she successfully collaborates with clients, families, and agencies. Her clinical knowledge enables her to effectively advocate for Sounding Joy's services to the community, manage the recruitment of prospective clients, and advise clients on placement to create an optimal therapy environment.

The proposed Clinical Director is a senior clinician, a MT-BC with over 20 years of clinical and supervisory experience in MT. She holds a PhD in music therapy from New York University. She will be responsible for reporting to the grantor, the State. She heads the organization's efforts in regard to clinical assurance, public education, and community collaboration to sustain MT services in Hawai'i. With her extensive knowledge and experience in the MT field, she will guide the MT-BCs in making appropriate clinical decisions to achieve desired program outcomes. She will also ensure adherence to professional protocols of the therapy process, including compliance with the Health Information Portability and Accountability Act (HIPAA).

The proposed Executive Director is a senior clinician, a MT-BC with over 25 years of clinical and supervisory experience in MT. She is the Founder and President of Sounding Joy, with the utmost experience in advancing the mission and vision of the organization. She will oversee the program as a whole, in the context of the organization's overall operations. She heads Sounding Joy's program development and efforts to establish a MT degree program at Brigham Young University - Hawai'i, which will be vital to the ultimate sustainability of MT in Hawai'i.

In addition to ongoing clinical supervision and monitoring by the Clinical Director, peer-supervision meetings will be held monthly. All project staff will attend these meetings to discuss and evaluate the progress of the proposed MT services. These meetings can also be used to address any issues and concerns regarding clinical work. Providing MT-BCs with the best possible work environment is essential to their well-being and success. Any necessary follow-up and/or training will be provided according to the personal and professional needs of each MT-BC.

2. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.

See the attached organization chart.

3. Compensation

The applicant shall provide an annual salary range paid by the applicant to the three highest paid officers, directors, or employees of the organization by position title, not employee name.

Executive Director: \$60,000

Clinical Director: \$58,800

Program Coordinator: \$45,000

VII. Other

1. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

Not applicable.

2. Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.

Sounding Joy requires all clinical staff to hold the national credential for music therapists: Music Therapist - Board Certified (MT-BC). This certification must be renewed every 5 years.

3. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see [Article X, Section 1, of the State Constitution](#) for the relevance of this question.

Not applicable.

4. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2022-23 the activity funded by the grant if the grant of this application is:

(a) Received by the applicant for fiscal year 2022-23

In implementing the proposed project during the grant term, Sounding Joy will identify participating individuals or facilities that demonstrate the potential to become self-sufficient to fund continued MT services. In the past, it has often happened that when clients experience the overwhelmingly successful results of MT as compared to other forms of treatment or therapy they have received, they make it a priority to obtain MT services. Many clients and facilities have thus made a commitment to continue MT through self-funding or other resources. They also encourage others to consider MT services, becoming strong advocates for MT.

In order to create sustainable programs, it is essential to recruit future supporters of MT while the grant term is active. Community members who have directly witnessed the benefits of MT – including professional colleagues and dedicated volunteers – will invite prospective promoters and grantors to observe and experience MT sessions. Such community members have organized numerous advocacy and fundraising activities to date. They are capable of eliciting powerful moral and financial support from the community to help sustain our programs. Visits to observe MT sessions will be arranged by our program staff in accord with professional standards of client confidentiality and privacy, as well as public health requirements to minimize the risk of COVID-19 transmission.

(b) Not received by the applicant thereafter.

We aim to offer the proposed services as a pilot program for community facilities that have indicated significant interest in building a long-term collaborative relationship with Sounding Joy and sustaining MT services for their clients beyond the grant term. Effective collaboration with these facilities will entail systematic interdisciplinary sharing of expertise between our MT-BCs and key facility staff to meet clients' needs. In addition, we will continue our vigorous efforts to educate the public about the benefits and cost-effectiveness of MT for a variety of client populations.

The positive outcomes experienced by participants and their caregiving circles through the proposed MT services, together with heightened public awareness of MT, may attract self-financed clients and donors to support the organization's programs on an ongoing basis. At the same time, Sounding Joy will continually endeavor to expand its scope of service to socioeconomically disadvantaged communities, for which the organization will seek additional grants and other sources of funding. Sounding Joy has successfully implemented this sustainability plan to make MT available for the past 20 years, enhancing quality of life and community living for the people of Hawai'i.

Balance Sheet - As of 12/31/2021

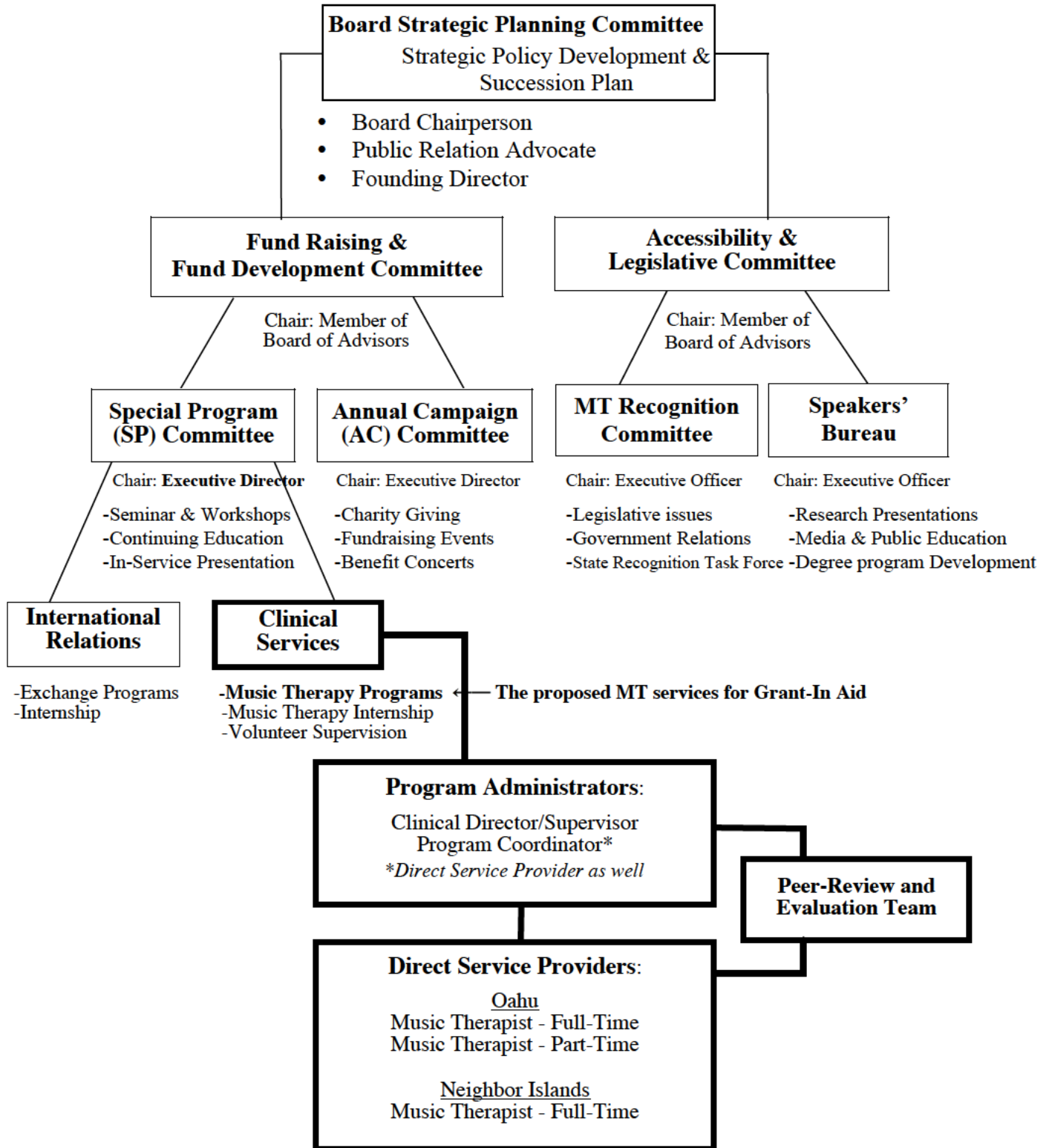
As of 12/31/2021 (Cash Basis)

1/18/2022

Page 1

Account	12/31/2021 Balance
ASSETS	
Cash and Bank Accounts	
ING Direct Savings	1.00
SJMT checking	123,384.29
TOTAL Cash and Bank Accounts	123,385.29
Other Assets	
Customer Invoices	-1,561.63
SJMT Asset	11,611.41
TOTAL Other Assets	10,049.78
TOTAL ASSETS	133,435.07
LIABILITIES & EQUITY	
LIABILITIES	
Other Liabilities	
SBA EIDL Loan	87,650.04
TOTAL Other Liabilities	87,650.04
TOTAL LIABILITIES	87,650.04
EQUITY	45,785.03
TOTAL LIABILITIES & EQUITY	133,435.07


The Organization Chart



BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2022 to June 30, 2023

Applicant: Sounding Joy Music Therapy, Inc.

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	67,800		7,600	
2. Payroll Taxes & Assessments	5,900		650	
3. Fringe Benefits	8,200		1,500	
TOTAL PERSONNEL COST	81,900		9,750	
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	4,000			
2. Insurance	570		120	
3. Lease/Rental of Equipment				
4. Lease/Rental of Space	8,940		800	
5. Staff Training				
6. Supplies	1,080		80	
7. Telecommunication	720		80	
8. Utilities				
9. Mileage & Parking	2,790		380	
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES	18,100		1,460	
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	100,000	#VALUE!	11,210	#VALUE!
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested		Nina Guerrero	(808) 593-2620	
(b) Total Federal Funds Requested		Name (Please type or print)	Phone	
(c) Total County Funds Requested	11,210		1-19-2022	
(d) Total Private/Other Funds Requested		Signature of Authorized Official	Date	
TOTAL BUDGET	11,210	Keiko Kajiwara, President Name and Title (Please type or print)		

GOVERNMENT CONTRACTS, GRANTS, AND / OR GRANTS IN AID

Applicant: Sounding Joy Music Therapy, Inc.

Contracts Total: 507,007

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S./State/Hawaii/ Honolulu/ Kauai/ Maui County)	CONTRACT VALUE
1	Grant for "Music for People with Speical Needs	7/1/16 – 6/30/17	State Foundation on Culture and The Arts	State	14,714
2	Grant for "Music for People with Speical Needs	7/1/17 – 6/30/18	State Foundation on Culture and The Arts	State	8,815
3	Grant for "Music for People with Speical Needs	7/1/18 – 6/30/19	State Foundation on Culture and The Arts	State	9,378
4	Grant for "Sustainable Community Music for Clients with Special Needs"	7/1/19 - 6/30/20	State Foundation on Culture and The Arts	State	15,000
5	Grant for "Sustainable Community Music for Clients with Special Needs"	7/1/21 – 6/30/22	State Foundation on Culture and The Arts	State	15,000
6	Grant for "Life Skill Development through MT"	7/1/16 – 6/30/17	Dept. of Human Services	State	107,000
7	Grant for "Life Skill Development through MT"	7/1/17 – 6/30/18	Dept. of Human Services	State	107,000
8	Grant for "Music Therapy for Life Enhancement	10/1/17 – 9/30/18	City & County of Honolulu	Hon	113,100
9	Grant for "Music Therapy for Life Enhancement	10/1/18 – 9/30/19	City & County of Honolulu	Hon	117,000
10					
11					
12					
13					
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15					
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22					
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24					

Supplementary Attachments

Client Waiting List

Sounding Joy Music Therapy, Inc.
As of January 2022

<u>Description of client or facility</u>	<u># of clients</u>	<u>Age</u>	<u>Islands</u>
female with Bipolar Disorder and Depression	1	38	Oahu
boy with Down syndrome	1	18	Oahu
boy with visual impairment and autism	1	3	Oahu
girl with Bipolar Disorder	1	15	Oahu
boy diagnosed with sensory processing disorder	1	6	Oahu
girl w/ith Down syndrome	1	9	Oahu
boy with Down syndrome	1	9	Oahu
girl with hydrocephalis	1	20	Oahu
boy with ADHD	1	11	Oahu
girl with autism	1	9	Oahu
boy with autism	1	7	Oahu
girl with disorder of infancy NOS	1	5	Oahu
girl with ADHD	1	14	Oahu
boy with ADHD and ODD	1	14	Oahu
girl with autism	1	10	Oahu
boy with autism	1	11	Oahu
boy with autism	1	11	Oahu
girl with autism	1	10	Oahu
female with depression	1	21	Oahu
boy with autism	1	6	Oahu
boy with autism	1	11	Oahu
boy with ADHD	1	18	Oahu
boy with DiGeorge Syndrome	1	15	Oahu
girl with microcephaly	1	19	Oahu
2 males (brothers) with developmental delays	1	22, 24	Oahu
boy with Williams Syndrome	1	4	Oahu
girl with autism	1	17	Oahu
boy with autism	1	8	Oahu
3 boys with ADHD	1	3,11,12	Oahu
boy with visual impairment and multiple disabilities	1	15	Oahu
girl with autism	1	8	Oahu
girl with William's Syndrome	1	18	Oahu
woman with paranoid schizophrenia	1	51	Oahu
girl with autism	1	9	Oahu
girl with conduct disorder	1	16	Oahu
girl with mental health problems	1	20	Oahu
girl with developmental delay	1	17	Oahu
boy with autism	1	6	Oahu
senior with Parkinson's and Alzheimer's	1	elderly	Oahu
2 boys with ADHD	1	10, 12	Oahu

Client Waiting List

Sounding Joy Music Therapy, Inc.
As of January 2022

2 at-risk youth	1	13, 16	Oahu
girl with autism	1	12	Oahu
girl with developmental delay	1	7	Oahu
women with depression	1	49	Oahu
boy with Angelman's syndrome	1	8	Oahu
boy with depression	1	16	Oahu
boy with autism and anxiety	1	14	Oahu
boys with ASD and ADHD	1	12, 13	Oahu
girl with Sensory Processing Disorder	1	4	Oahu
girl with ASD	1	14	Oahu
female with Bipolar Disorder, and Depression	1	36	Oahu
married couple with depression	1	36, 39	Oahu
boy with autism	1	6	Oahu
male with Brain Trauma / Schizophrenia, Paranoid type	1	35	Oahu
boy with autism	1	5	Oahu
boy with autism	1	17	Oahu
boy with autism	1	6	Oahu
adults with Parkinson's Disease	1	55 to 85	Oahu
children with ADHD	1	7	Oahu
boy with developmental disability and blindness	1	3	Oahu
boy with ADHD and autism	1	12	Oahu
boy with autism	1	7	Oahu
boy with autism	1	5	Oahu
girl with autism	1	19	Oahu
male with autism	1	27	Oahu
female recovering from stroke	1	87	Oahu
Kilohana Senior Center	1	elderly	Oahu
HCAP head start – inclusive classroom with special needs and typical children	1	4 to 6	Oahu
Children who have been abused and their family members (support group at Child & Family Service)	1	7 to 14	Oahu
Kosasa Academy- students with ADHD, autism, and LD	1	6 to 18	Oahu
Ke Kama Pono- residential program for boys with mental health issues and involvement with juvenile justice system	1	13 to 19	Oahu
SpEd students at Enchanted Lake Elem.	1	6 to 11	Oahu
SpEd students at Ewa Makai Middle School	1	12 to 17	Oahu
SpEd students at Ilima Intermediate School	1	12 to 15	Oahu
SpEd students at Kalani High School	1	15 to 22	Oahu
SpEd students at Campbell High School	1	15 to 22	Oahu
SpEd students at Liholiho Elem.	1	6 to 11	Oahu
SpEd students at Kalakaua Middle School	1	12 to 15	Oahu
Wilson Senior Living nursing home	1	elderly	Oahu
Nursing home in Pearl City	1	elderly	Oahu

Client Waiting List

Sounding Joy Music Therapy, Inc.
As of January 2022

Manoa Cottage Kaimuki nursing home	1	elderly	Oahu
Hospice Hawaii	1	various	Oahu
Adult Day Center near Ward	1	adults	Oahu
Abilities Unlimited	1	adult	Oahu
Ann Pearl Nursing home	1	Adults, Elderly	Oahu
Lanakila Health Center	1	Adults, Elderly	Oahu
Children and adolescents with mental health diagnoses- residential and acute care	1	children and adolescents	Oahu
Senior programs at Child & Family Service	1	seniors	Oahu
Loveland Academy- HS students with autism	1	17 to 22	Oahu
Hawaii Youth Correctional Facility	1	15 to 18	Oahu
Trumpet Academy- children and adults with special needs	1	11 to 22	Oahu
Aged to Perfection Adult Day Center	1	elderly	Oahu
female recovering from stroke	1	45	Maui
Easter Seals	5	Adults	Maui
Aloha House	5	Elders	Maui
Horizons Academy	20	children	Maui
Haiku School	20	children, adolescents	Maui
Maui Youth & Family Services	20	children, adolescents	Maui
Hui Malama Learning Center	20	Children	Maui
Child & Family Service Maui	20	Children, Adults	Maui
Paia Youth and Cultural Center	20	children, adolescents	Maui
Queen Liliuokalani Children Center Maui Unit	20	children, adolescents	Maui
Catholic Charities Maui Office	20	Adolescent	Maui
Ke Kama Pono boys' home	8	Adolescents	Maui
Horizon Academy	15	Adolescents	Maui
Kihei Youth Center	15	Adolescents	Maui
children with autism	2	9 and 11	Maui
developmental delay	1	31	Big Island
female with down syndrome	1	41	Big Island
male with MMR, Epiceptic	1	38	Big Island
Arc of Hilo adults with various disabilities	15	adults	Big Island
girl with ADHD and Bi-Polar	1	23	Big Island
Full Life Hawaii	15	Adults	Big Island
Neighborhood Place in Puna	5	Adults	Big Island
foster children	10	children	Big Island
Kona Community Hospital	20	children/adults	Big Island
Life Care Center of Kona	20	elders	Big Island
Life Care Center of Hilo	20	elders	Big Island
Hilo Highschool	20	14-21	Big Island
Child & Family Service Hilo	20	children, adolescents	Big Island
boy with autism	1	11	Big Island
Hale Anuenue restorative care	50	elders	Big Island
Hospice of Hilo	10	elders	Big Island
DOH mental health clients	20	adolescents	Big Island
Goodwill Hawaii Youth Program	20	adolescents	Big Island

Client Waiting List

Sounding Joy Music Therapy, Inc.
As of January 2022

Ke Kama Pono	20	adolescents	BigIsland
Queen Liliuokalani Children's Center Kona	20	children	BigIsland
Kona Adult Day Center	20	20-30	BigIsland
Waiakea HS	20	16-18	BigIsland
veteran with PTSD	1	35	BigIsland
veteran with Traumatic Brain Injury	1	38	BigIsland
TOTAL	635		

THE WALL STREET JOURNAL.

TUESDAY, NOVEMBER 17, 2009

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HEALTH JOURNAL

A Key for Unlocking Memories

Music Therapy Opens a Path to the Past for Alzheimer's Patients; Creating a Personal Playlist

By MELINDA BECK

One of the raps on iPods is that users tend to close themselves off from other people and retreat into their own private world.

But with stroke and dementia patients, iPods and other MP3 players are having just the opposite effect.

Listening to rap and reggae on a borrowed iPod every day has helped Everett Dixon, a 28-year-old stroke victim at Beth Abraham Health Services in Bronx, N.Y., learn to walk and use his hands again.

Trevor Gibbons, 52, who fell out of a fourth-floor construction site and suffered a crushed larynx, has become so entranced with music that he's written 400 songs and cut four CDs.

Ann Povodator, an 85-year-old Alzheimer's patient in Boynton Beach, Fla., listens to her beloved opera and Yiddish songs every day on an iPod with her home health aide or her daughter when she comes to visit. "We listen for at least a half-hour, and we talk afterwards," says her daughter, Marilyn Povodator. "It seems to touch something deep within her."

Caregivers have observed for decades that Alzheimer's patients can still remember and sing songs long after they've stopped recognizing names and faces. Many hospitals and nursing homes use music as recreation, since it brings patients pleasure. But beyond the entertainment value, there's growing evidence that listening to music can also help stimulate seemingly lost memories and even help restore some cognitive function.

"What I believe is happening is that by engaging very basic mechanisms of emotions and listening, music is stimulating dormant areas of the brain

that haven't been accessible due to degenerative disease," says Concetta Tomaino, executive director of the Institute for Music and Neurologic Function, a nonprofit organization founded at Beth Abraham in 1995.

Dr. Tomaino, who has studied the therapeutic effects of music for more than 30 years, is spearheading a new program to provide iPods loaded with customized playlists to help spread the benefits of music therapy to Alzheimer's patients even at home. "If someone loved opera or classical or jazz or religious music, or if they sang and danced when the family got together, we can recreate that music and help them relive those experiences," she says.

Dr. Tomaino says she frequently sees dementia patients make gains in cognitive function after music therapy. In one unpublished study she led a few years ago, with funding from the New York State Department of Health, 45 patients with mid- to late-stage dementia had one hour of personalized music therapy, three times a week, for 10 months, and improved their scores on a cognitive-function test by 50% on average. One patient in the study recognized his wife for the first time in months.

David Ramsey, a music therapist and psychologist, holds twice weekly sessions at Beth Abraham, where small groups of patients can sing and dance to familiar songs like "Under the Boardwalk" and "Swing Low, Sweet Chariot." Mr. Ramsey will sometimes stop singing and let residents fill in the blanks on their own. When they do that, he says, "they are exercising their cognitive function—just like they are exercising in physical therapy." And unfamiliar songs quickly become familiar, another sign that even advanced



Music for Memory

Listen to clips of some '60s and '50s tunes recommended by the the Institute for Music and Neurologic Function for individuals with Alzheimer's disease or other memory impairments:

- "The Times They Are A-Changin'" by Bob Dylan
- "Dawn (Go Away)" by Frankie Valli & The Four Seasons
- "Come a Little Bit Closer" by Jay & The Americans
- "California Girls" by The Beach Boys
- "(I Can't Get No) Satisfaction" by The Rolling Stones
- "Que Sera, Sera (Whatever Will Be, Will Be)" by Doris Day
- "Fever" by Peggy Lee
- "That's Amore" by Dean Martin
- "Mambo Italiano" by Rosemary Clooney
- "Unforgettable" by Nat King Cole

See the full list at the Institute's Web site.

Alzheimer's patients are forming new memories. "One of our therapists played, 'Who Let the Dogs Out?' I know they had never heard that one, but it became an anthem," he says.

In addition to benefiting Alzheimer's patients, decades of studies have demonstrated that

music can help premature infants gain weight, autistic children communicate, stroke patients regain speech and mobility, dental, surgical and orthopedic patients control chronic pain and psychiatric patients manage anxiety and depression. Now, neuroscientists are starting to

(over please)



David Ramsey leads music sessions at Beth Abraham Health Services, meant to stimulate positive memories and physically engage dementia patients.

identify the underlying brain mechanisms that explain how music connects with the mind and body, and they are starting to work hand in hand with music therapists to develop new therapeutic programs.

There's no single center for music in the mind—the brain appears to be wired throughout for music, since it engages a wide variety of functions, including listening, language and movement. But Petr Janata, a cognitive neuroscientist at the University of California, Davis's Center for Mind and Brain, recently located an area of the brain—the medial prefrontal cortex, just behind the forehead—that seems to serve as a hub for music, memory and emotions.

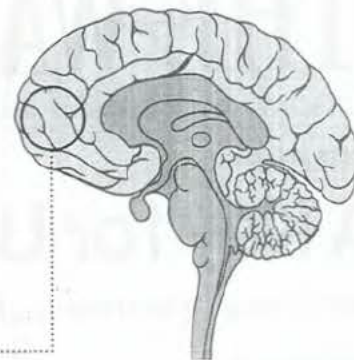
In a study published online in the journal *Cerebral Cortex* in February, Dr. Janata had 13 UC

Davis students listen to excerpts of 30 songs chosen randomly from "top 100" charts from years when they were 8 to 18 years old, while he recorded their brain activity using functional magnetic resonance imaging, or fMRI. Songs that were unfamiliar evoked reactions in the auditory processing parts of the students' brains; those that elicited emotional reactions stimulated other brain areas. When songs conjured up a specific personal memory, there was particularly strong activity in the medial prefrontal cortex. That's where what Dr. Janata calls "a mental movie" seems to play in the mind's eye, with music serving as its soundtrack.

And, it turns out, this same medial prefrontal cortex had been identified in earlier research as one of the last parts of the brain to atrophy as Alzheimer's disease progresses.

Dr. Janata hopes to study whether the same phenomenon occurs, in the same part of the brain, with older test subjects and eventually with Alzheim-

New research indicates that the **medial prefrontal cortex** may serve as a hub where music, memory and emotions meet. It is also one of the last brain regions to atrophy in Alzheimer's patients.



Medial prefrontal cortex

er's patients. He says that activating memories with music cannot reverse or cure neurological diseases like dementia. But playing familiar music frequently can significantly improve a patient's mood, alertness and quality of life.

Music therapy isn't used more widely with Alzheimer's and dementia patients largely because of a lack of manpower and money, experts say. There are only about 5,000 certified music therapists in the U.S., and fewer than 20% work with geriatric patients. That's why the Institute for Music and Neurologic Function is trying to bring music therapy into patients' homes.

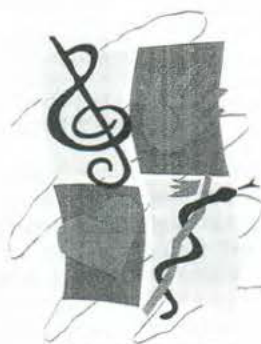
Caregivers or family members can use records or tapes at home, or program their own iPods. The institute provides suggested songs by era and genre on its Web site, www.imnf.org. But those who don't have the time or technical skills can send an iPod to the institute after filling out a questionnaire about the patient's musical tastes, and the institute will program a customized iPod for them. (See the Web site for prices and package information.) The institute is also seeking donations of iPods that are no longer in use to load with music

and send to Alzheimer's patients who can't afford their own.

Dr. Tomaino advises caregivers to listen as long as the patient seems interested. A patient may want to listen alone through headphones or through speakers so that a friend or family member can listen along. "Then they can reminisce together about what the music reminds them of or just hold hands to be more connected," she says. She also suggests involving the whole family in interacting with the music. "The kids can drum along while Grandpa listens to Big Band sounds," she says.

One possible downside: Dr. Tomaino says sometimes a song can evoke unhappy memories, such as the death of a loved one or a relationship gone bad. She recalls a Holocaust survivor at Beth Abraham who became very upset upon hearing a Wagner opera.

"If family members don't know what music would be appropriate, think in generalizations," she says. "If a parent loved to go dancing in their teens, picking the most popular songs from that era tends to be pretty safe." Music from a person's teenage years seems to be especially evocative of memories, for reasons not well understood.

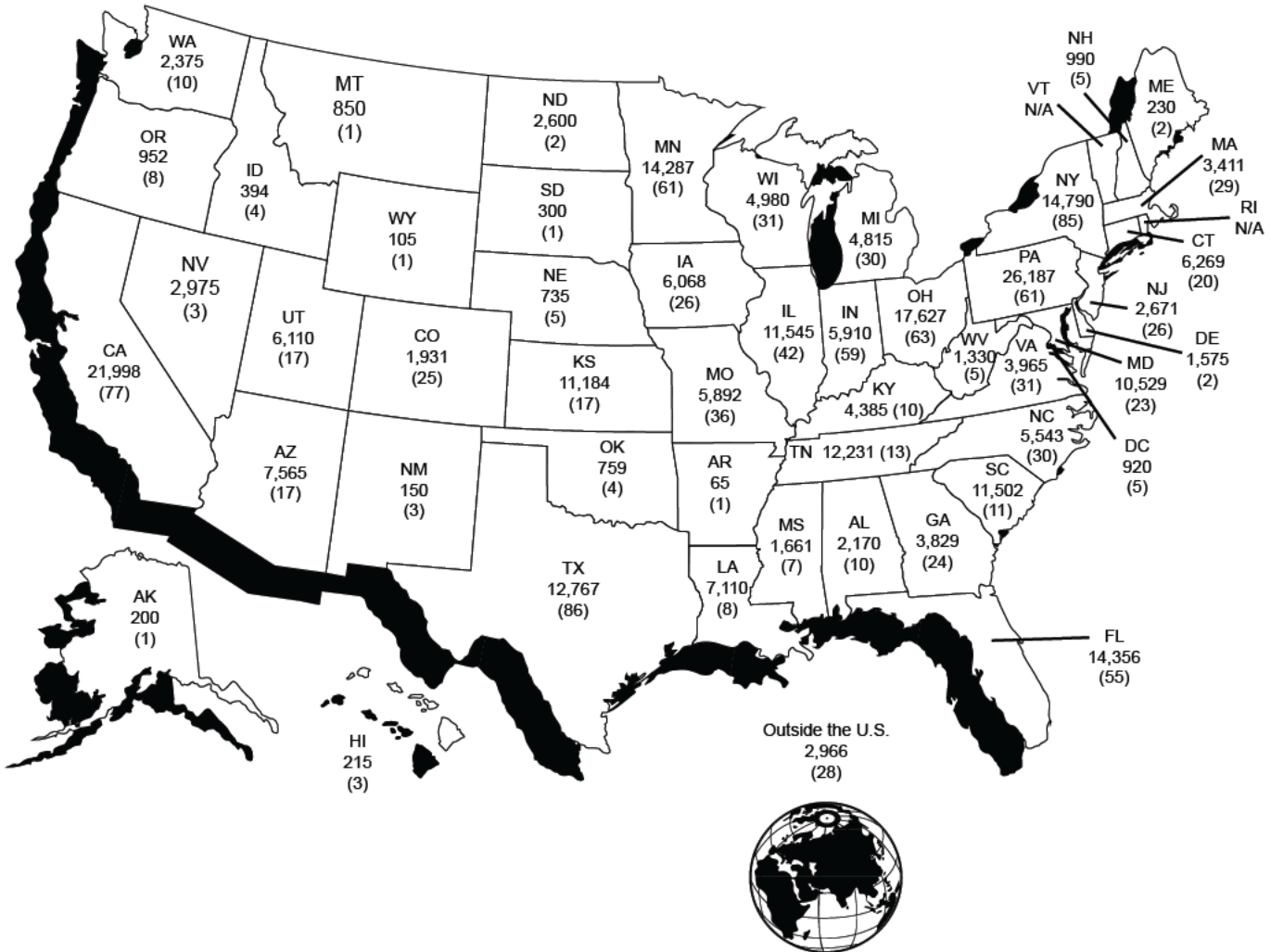


AMERICAN
**MUSIC
THERAPY**
ASSOCIATION

American Music Therapy Association
8455 Colesville Road, Suite 1000
Silver Spring, MD 20910
Phone: (301) 589-3300
Website: www.musictherapy.org

Clients Served by Music Therapists

Survey respondents were asked to estimate the number of clients for whom they provided music therapy services for the entire year of 2016. 1,124 survey respondents reported having seen a total of 284,381 clients last year — an average of 253 clients per service provider. The map below shows the number of clients reported seen last year in each state and the number of corresponding survey respondents for that state (in parentheses).



Of survey respondents who indicated a job title on their survey, 83% reported their job title as one which involves mainly clinical responsibilities (Excluding Director/Admin./Supervisor and Faculty). As of October 1, 2017, a reported 218 music therapists were listed on the National Music Therapy Registry and 7,514 board certified music therapists were reported by the Certification Board for Music Therapists — a total of 7,732 qualified music therapists. Extrapolating from the number of qualified music therapists, if 83% of these 7,732 music therapists each saw an average of 253 clients, then it can be inferred that an estimated 1,623,754 people received music therapy services last year in the United States.



Music Therapy Services for Life Enhancement



Now accepting applications!
(Through April 30, 2019)

Music Therapy Services (Available on Oahu)

- Eligibility** Children, Adults, and Seniors with disabilities, or social or economic challenges.
- Goals** To enrich and sustain quality of life. Music therapy interventions are used to enhance functioning in areas such as: social, cognitive, motor, communicative, emotional, self-esteem, cultural identity, and other life skills.
- Format** Group or Individual sessions, meeting weekly, for 18 weeks.
- Location** Sounding Joy's Office (Honolulu), or on-site at facility (i.e. School, Rehab Center, Nursing Facility, etc.)
- Schedule** Weekly session schedule depends on client's and therapist's availability. We are open Monday-Saturday!

For more information and to sign up, please contact Sounding Joy's Office at (808) 593-2620 or postmaster@soundingjoymt.org or fill out the Music Therapy for Life Enhancement Application. We look forward to hearing from you!



WHAT IS MUSIC THERAPY?

Music therapy is a well-established health profession consisting of clinical and evidence-based uses of music interventions to accomplish individualized goals. After assessing clients' strengths and needs, Board-Certified Music Therapists design sessions specifically tailored to individuals. Research in music therapy supports the effectiveness of interventions that target cognitive, physical, social, emotional, behavioral, and/or communication needs.



Music Therapists Help Individuals With:

- * Alzheimer's Disease and Dementia
- * Autism and Developmental Disabilities
- * Brain Injuries, Parkinson's, and Stroke
- * Cancer
- * End of Life Issues
- * Learning Disabilities
- * Mental Health Concerns
- * Pain and Chronic Illness
- * Physical Disabilities
- * Sensory Impairments
- * Substance Abuse

For more information on specific initiatives, on music therapy, or on board certification, contact:

American Music Therapy Association

8455 Colesville Road, Suite 1000
Silver Spring MD 20910
www.musictherapy.org
Phone: 301-589-3300
Email Contact: Judy Simpson
simpson@musictherapy.org

Certification Board for Music Therapists

506 E. Lancaster Avenue, Suite 102
Downingtown PA 19335
www.cbmt.org
Phone: 800-765-CBMT (2268)
Email Contact: Dr. Dena Register
dregister@cbmt.org



MUSIC THERAPY



AMTA & CBMT

Working Together to
Increase Access to Quality
Music Therapy Services

WHAT IS CBMT?

The Certification Board for Music Therapists (CBMT) is a certifying agency and non-profit 501(c)(6) corporation fully accredited by the National Commission for Certifying Agencies. Established in 1983, its role is to create a Scope of Practice representing competent practice in the profession of music therapy and to administer a credentialing program to evaluate initial and continuing competence. CBMT is committed to ensuring public protection by administering disciplinary action as outlined in the CBMT Code of Professional Practice, if necessary.



AZ music therapists thank Senator Al Melvin for sponsoring SB1376 on music therapy services and persons with disabilities.

AMTA & CBMT WORKING TOGETHER

The American Music Therapy Association (AMTA) and the Certification Board for Music Therapists (CBMT) collaborate on a national initiative designed to achieve state recognition of the music therapy profession and the MT-BC credential required for competent practice by:

- * *Educating the public about music therapy*
- * *Recommending accurate language for legislation and regulations*
- * *Assisting local legislators and communities with insuring access to quality music therapy services*
- * *Protecting the rights of Board-Certified Music Therapists to practice*

There are over 30 states with task forces that are working on this national initiative.

WHAT IS AMTA?

The American Music Therapy Association (AMTA) is a non-profit 501(c)(3) educational organization established in 1950 to advance music therapy education, training, professional standards, and research. AMTA's mission is to advance public knowledge of music therapy benefits and increase access to quality music therapy services. AMTA provides technical support to consumers and professionals and represents the profession to federal and state legislators and agencies. Members of AMTA adhere to a Code of Ethics and Standards of Clinical Practice in their delivery of music therapy services.



<GROUP SESSION REPORT>

Session Date: 4/13/11

Session #: 5

Location: SJMT

Time: 4:30-5:30pm

Client: S.

Assistant: none

<p align="center"><u>Description of Client</u></p> <p>S. is a 2-year-old girl with pervasive developmental disorder-not otherwise specified. She is usually very pleasant and cooperative during sessions and engages easily with others. She has some speech skills including saying repeated phrases such as “knock knock,” “uh oh,” and “sorry.” She seems to have an interest in music and often sings along to songs that are familiar to her. She also enjoys looking at the animal cards and book and sometimes requests “animals” during sessions.</p>	<p align="center"><u>Treatment Goals & Objectives Addressed</u></p> <ol style="list-style-type: none"> 1. Increase social skills <ol style="list-style-type: none"> a. take turns appropriately 2/3x b. say names of other group members in hello and goodbye 2/3x 2. Increase communication and speech skills <ol style="list-style-type: none"> a. verbally communicate desires 5x per session b. fill in omitted words to songs 3/4x 3. Increase motor skills <ol style="list-style-type: none"> a. play instrument using fist grasp for 3 mins. continuously b. play instrument in 3 different ways
<p align="center"><u>Content of Service, Approach / Interventions</u></p> <ul style="list-style-type: none"> -Hello song to provide session structure and increase social interaction -Beat the drum to increase attn to task and motor skills -Playing wind chimes with turn-taking to increase social skills, engagement, and awareness of environment -Shaker blues to increase communication and motor skills -Old MacDonald to increase speech skills -Piano improvisation to increase engagement and motor skills -Xylophone improvisation to increase motor skills -Goodbye song to close session and provide structure 	<p align="center"><u>Provider assessment/interpretation of session</u></p> <p>S. seemed to be more distracted and demonstrated more acting-out behaviors than in previous sessions. She became fixated on taking out all the instruments or objects in a box and then replacing them over and over. She did this with the animal cards, xylophone mallets, and box of percussion instruments. She dropped objects on the floor or laid down on the floor purposefully and then said “uh oh” or “sorry” many times. She did not maintain her interest in instruments and activities for as long as in previous sessions. Like in the last session, she began singing “clean up, clean up” when she wanted to finish an activity. She helped to put away materials with 2-3 prompts each time.</p>

Progress Notes

S. demonstrated increased social skills in that she took turns appropriately during wind chimes playing. She did not wave or say names of others during hello when prompted.

S. communicated her desires 2-3x during this session to indicate when she wanted to finish and activity. She said “all done” a few times when prompted and began singing the “clean up” song other times independently. She also requested “animals” verbally ~2x. S. did not sing along to songs as much during this session as in previous sessions.

S. demonstrated motor skills by playing the xylophone, piano, and shakers, but she did not sustain her attention to any of these activities for very long (less than 1 minute).

Plans for Upcoming Services

Continue music therapy services, especially focusing on building therapeutic relationship with MT.

I certify that I provided the service(s) as recorded above.

Signature: _____ Provider: XXXX, MT-BC Date: 4/13/11

<MID-TERM PROGRESS REPORT>

Period of Report: 3/9/11 to 5/25/11Client: S. Date of Report: 5/31/11Describe progress in attainment of each goals and objectives:**1. Increase social skills**

a. S. will take turns appropriately (not playing, not grabbing others' instrument) in 2 of 3 opportunities given during the session. *Achieved ~90%*

b. S. will sing or say the names of at least 2 other group members during hello and goodbye songs.

Not achieved

2. Increase communication and speech skills

a. S. will verbally communicate her desires (choosing activities, more/all done, etc.) at least 5 times per session with less than 3 cues each time. *Achieved ~60%*

b. S. will sing along or fill in omitted words to familiar songs at least 3 out of 4 times when prompted.

Achieved ~50%

3. Increase motor skills

a. S. will play an instrument requiring a fist grasp (i.e., xylophone mallet, maraca) for at least 3 minutes continuously at least once per session. *Achieved ~75%*

b. S. will play a percussion instrument in 3 different ways (i.e., loud, soft, fast, slow) throughout the session.

Achieved ~5%

Summarize any growth or significant changes in client's behavior and functioning:

S. has demonstrated growth in her social skills and relationship with the music therapist. Her comfort level in sessions has greatly increased since beginning music therapy, as evidenced by her independently taking instruments and items out of the closet and initiating activities. She is good at sharing instruments and items with P. and will give them to him the first time prompted. She sometimes loses focus when it is not her turn in an activity and will begin to wander around the room. S. will continue to work on greeting others during hello and goodbye songs, as she has not yet achieved this objective.

S. has shown progress toward communication skills by communicating her desires in sessions. She speaks much more in sessions than she did when she began music therapy. S. has also increased her independence in singing along to songs and using language to express herself. For example, during "Old MacDonald" in a few recent sessions, S. began making the noises for bird, lion, cat, and dog without any prompting or modeling from the therapist. S. also requests items about 1 time per session by saying "I want _____," repeating one word at a time after the therapist. She says "more" or "all done" and "clean up" 5-7 times per session consistently to indicate what she wants. S. also demonstrates communication skills by singing along to songs such as "ABC," "Twinkle Twinkle" and "Old MacDonald." She usually sings about 1 out of 5 words per song.

When S. is focused on an activity, she will participate for 2-5 minutes at a time, demonstrating increased motor skills. She has also learned how to play the piano keys with her index finger and grasp a xylophone mallet and shaker and control them well enough to play these instruments independently. S. follows about 80% directions to the shaker movement activity to increase motor skills as well. S. will continue to work on playing instruments in different ways (loud, soft, etc.) as this is a more complex cognitive skill.

During a few sessions in April, S. began to engage in attention-seeking behaviors during sessions, such as singing "clean up" before an activity was finished, or climbing on chairs and the piano bench. She also took all the items out of a box or the closet, only to replace them a few seconds later. These attention-seeking behaviors have decreased during the last few sessions.

Changes in Long-Term Goals:

None

Updates of Short-Term Objectives:

None

Music Therapist: XXXX, MT-BC

<TERMINATION REPORT>

Period of Service: 3/9/11 to 10/12/11Client: S. Date of Report: 10/17/11Date of Birth: 8/5/08 Date of Intake: 9/13/10Service Received: Group music therapy, 25 sessionsGoals & Objectives Addressed:**1. Increase social skills**

- a. S. will take turns appropriately (not playing, not grabbing others' instruments) in 2 of 3 opportunities during the session. *Achieved 100%*
- b. S. will sing or say the names of at least 2 other group members during hello and goodbye songs. *Achieved in September 2011*

2. Increase speech and communication skills

- a. S. will verbally communicate her desires (choosing activities, more/all done, etc.) at least 5 times per session with less than 3 cues each time. *Achieved 100%*
- b. S. will sing along or fill in omitted words to familiar songs at least 3 out of 4 times when prompted. *Achieved ~75%*

3. Increase motor skills

- a. S. will play an instrument with a fist grasp (i.e., xylophone mallet, maraca) for at least 3 minutes continuously at least once per session. *Achieved ~75%*
- b. S. will play a percussion instrument in 3 different ways (i.e., loud, soft, fast, slow) throughout the session. *Achieved ~50%*

Summary of Progress:**Changes in behavior**

S. has demonstrated progress toward all the stated goal areas in music therapy. She consistently displayed positive affect and willingness to engage in music activities. However, at the beginning of music therapy treatment, S. engaged in some attention-seeking behaviors such as knocking over chairs, dropping materials on the ground, and trying to put away materials before an activity was finished. After about 2 months of therapy, these behaviors began to decrease and S. now engages in positive behavior throughout the session. S. is helpful in putting away materials and helping other group members to participate in activities.

Social skills

S. has demonstrated improved social skills throughout music therapy treatment. She has developed from engaging in interactions about 75% of the time to imitating interactions with others, even verbal interactions. She has also initiated interactions with others by offering them instruments and following them around the room. In a recent session, S. observed D's crying behavior by saying "D. cry." S. has also demonstrated social skills by achieving the objective of saying the names of other during hello and goodbye songs. In June 2011, she began saying D's name and in September 2011 filled in the assistant's

and the therapist's names during hello and goodbye. This was especially impressive because the assistant had not been in the sessions for very long; S. remembered and said her name after she was present in only 2 sessions.

Speech and communication skills

S. has demonstrated significant development in her speech and communication skills. At the beginning of music therapy treatment, S's verbal communication was low, and she often just repeated after others, rather than communicating effectively. She has shown significant improvements in speech in a variety of ways. S's echolalia in her speech has decreased significantly, and now occurs 0-1 times per session. S. now requests activities and instruments that she wants to play without any verbal assistance. She often says "animals" independently and requests other activities when choices are given. S. also says "all done" and "clean up" when she is finished with an activity. S. has demonstrated verbal ability and social interaction by initiating verbal call-and-response with the therapist and assistant. For example, in one session S. turned a small drum upside down and began singing into it like a microphone. She sang "la la la," "mi mi mi," and a variety of other verbal syllables and was encouraged to continue by the therapist repeating after her.

Motor skills

S. has addressed motor skills during music therapy by playing a variety of instruments requiring different motor skills. Some of these included the xylophone (grasping the mallet), drum, piano, and shakers. S. consistently followed directions for movement activities as well, such as playing the shakers and drum in different positions around her body (up high, down low, on her feet, etc.) S. followed musical cues during a running/walking around the room activity as well by changing the speed of her movement to match with the music. All these activities demonstrate S's improved motor skills. The walking/running around the room activity especially shows S's gross motor control, as she is able to control her entire body to move in time with the music.

Reason for Termination:

S. completed the Scholarship Program.

Recommendations for other services and interventions:

Continue music therapy services if possible to address speech, social skills, and reinforce academic skills. Continue intervention to work on relating to others in positive ways. Participate in speech therapy to continue S's development in this area.

Music Therapist: XXXX, MT-BC

Clinical Director: YYYY, MT-BC

effects in such banks, trust companies, or other depositories as shall from time to time be designated by the Board of Directors. The Treasurer shall make such disbursements as the regular course of the business of the Corporation may require or the Board of Directors may order. The Treasurer shall perform all other duties incident to the office or which may be assigned by the President or the Board of Directors.

SECTION 5.6 Absence of Officers. In the absence or disability of the President and Vice President, or Vice Presidents if more than one, the duties of the President shall be performed by the Chairman of the Board of Directors or by such persons as may be designated for such purpose by the Board of Directors. In the absence or disability of the Secretary or of the Treasurer the duties of the Secretary or of the Treasurer, as the case may be, shall be performed by such person or persons as may be designated for such purpose by the Board of Directors.

SECTION 5.7 Salaries. The salaries and compensation, if any, of officers, agents, and employees shall be determined by the Board of Directors.

ARTICLE VI

Removals, Vacancies and Absences

SECTION 6.1 Removals. The Board of Directors may at any time depose or remove from office with or without cause in accordance with law, any director, officer, subordinate officer, agent or employee.

SECTION 6.2 Vacancies. In case of any vacancy occurring in the Board of Directors between meetings of the directors, through death, resignation, disqualification, removal or other cause other than temporary absence or illness, the directors remaining, although less than a majority of them, may appoint a successor or successors to fill the vacancy or vacancies so

to time to the credit of the Corporation in such banks, trust companies, or other depositories as the Board of Directors may select.

ARTICLE VIII

Indemnification

SECTION 8.1 Indemnification.

(a) Except as prohibited by law, the Corporation may indemnify each person who was or is a party or is threatened to be made a party to any threatened, pending, or completed action, suit, or proceeding, whether civil, criminal, administrative, or investigative (other than an action by or in the right of the Corporation) because the person is or was a director, officer, employee, or agent of the Corporation or any division of the Corporation, against liability incurred in the proceeding if the person (1) conducted himself in good faith, and (2) the person reasonable believed: (A) in the case of conduct in an official capacity, that the person's conduct was in the corporation's best interests; (B) in all other cases, the person's conduct, at a minimum, did not oppose the corporation's best interests; and (3) in the case of any criminal proceeding, had no reasonable cause to believe the person's conduct was unlawful. The termination of any proceeding by judgment, order, settlement, conviction, or upon a plea of nolo contendere or its equivalent, is not by itself determinative of a person's failure to meet the standard of conduct described in this section.

(b) To the extent that a director, officer, employee, or agent of the Corporation or any division of the Corporation has been wholly successful on the merits or otherwise in the defense of any action, suit, or proceeding to which the person was a party because the person was a director, officer, employee or agent of the Corporation, the person shall be indemnified against

reasonable expenses actually incurred by the person in connection with the proceeding.

(c) Any indemnification under paragraph (a) of this Section (unless ordered by a court) shall be made by the Corporation only as authorized in the specific case upon a determination that indemnification of the director, officer, employee, or agent is proper in the circumstances because the person has met the applicable standard of conduct set forth in paragraph (a). Such determination may be made (1) by the Board by a majority vote of a quorum consisting of members of the Board of Directors who were not parties to such action, suit, or proceeding, or (2) if such a quorum is not obtainable, by the majority vote of a Committee duly designated by the board of directors (in which designation directors who are parties may participate) consisting solely of two or more directors not at the time parties to the proceeding, or (3) special legal counsel selected by: (a) the board of directors or its committee in the manner described above; or (b) majority vote of the full board if a quorum of the board cannot be obtained under subsection (1) and the committee cannot be designated under subsection (2).

(d) Expenses incurred in defending a civil or criminal action, suit, or proceeding may be paid by the Corporation in advance of the final disposition of such action, suit, or proceeding as authorized by the Board of Directors in a particular case provided that the requirements of HRS §414D-162 are met.

(e) The Corporation may purchase and maintain insurance on behalf of any person who is or was a director, officer, employee, or agent of the Corporation or any division of the Corporation against any liability asserted against or incurred by the person in that capacity or arising out from the person's status as such, whether or not the Corporation would have the power to indemnify the person against the same liability under the provisions of this Article.

Music Therapy Feedback Form

Name (Optional):

Date:

**Please rate and circle one number for each question.*

	NO					YES
1. Do you think you are benefiting from Music Therapy?	1	2	3	4	5	n/a
2. Do you feel supported by your music therapist?	1	2	3	4	5	n/a
3. Do you feel supported by peers in this program?	1	2	3	4	5	n/a
4. Does music therapy make you feel good about yourself and others?	1	2	3	4	5	n/a
5. Does music therapy help you to develop focus in your life?	1	2	3	4	5	n/a
6. What are the areas of your life, in which music therapy makes a difference? Circle all that apply:	Social	learning	Speech	Physical	Mental	Emotional
	Memory	Behavior	Family			

Other: _____



Mahalo for completing the form!

GRIEVANCE POLICIES & PROCEDURES

A grievance is defined as, and limited to, a complaint involving an alleged violation concerning the provided State funded activity. A written grievance shall contain a clear and concise statement of the grievance indicating the issue involved, the relief sought, and the date the incident or alleged violation took place. The grievance and/or appeal must be initiated with Sounding Joy Music Therapy, Inc. to the following address: 1314 South King Street, #711, Honolulu, HI 96814. All grievances must be presented promptly in writing and not later than 30 calendar days from the date the grievant first became aware of cause of such grievance. The grievant shall receive a written reply from Clinical Director at Sounding Joy Music Therapy, Inc. within 30 calendar days of receipt of the grievance. If the grievant is not satisfied with the action on the issue, the grievant has the right to have the grievance addressed by the State.

Agreement & Consent Form

Client's name: _____
Last First Middle

I, hereby, agree with Sounding Joy Music Therapy, Inc, on that:

- I / my family member receive the music therapy service free of charge for the admitted music therapy program;
- I / my family member will commit to the program for the following length: minimum 18 weeks;
- I / my family member will notify the organization of any absence before the start of the scheduled sessions;
- I am responsible for my / my family member's travel and transportation costs; and

I, hereby, consent Sounding Joy Music Therapy, Inc. to:

- Access my / my family member's medical and clinical records;
- Video record all my / my family member's music therapy sessions; and
- Have the rights to automatically drop me / my family member out from the program, when more than 2 no-shows observed without any notice given to the organization;

for clinical and educational purposes and complying with the integrity of the program. Check if:

I do NOT want the sessions to be video recorded.

Signature of the guardian / participant

Name of the guardian / participant

Date

<INTAKE NOTES>

Client: _____ Date of Intake: _____

Interviewer: _____

Gross Motor	
Fine Motor	
Oral Motor	
Sensory	
Receptive Communication / Auditory Reception	
Expressive Communication	
Cognitive	
Emotional	
Social	
Family	
Musicality	

Music Therapist: _____

Clinical Director: _____



Proclamation

WHEREAS, music therapy is a process in which a qualified therapist uses music and all of its facets – physical, emotional, mental, social, aesthetic and spiritual – to help clients improve or maintain their health; and

WHEREAS, music therapists believe that all individuals, regardless of age or musical background, have a basic capacity for musical expression and appreciation, and music therapy interventions can be designed to promote wellness, manage stress, alleviate pain, express feelings, enhance memory, improve communication and promote physical rehabilitation; and

WHEREAS, music therapy is used to treat individuals of all ages with a variety of conditions, including psychiatric disorders, medical problems, physical and developmental disabilities, sensory impairments, communication disorders and aging; and

WHEREAS, music therapy is also applied to improve learning, build self-esteem, reduce stress, support physical exercise and facilitate a host of other health-related activities; and

WHEREAS, music therapists work in general hospitals, psychiatric facilities, schools, prisons, community centers, training institutes, private practices and universities; and

WHEREAS, every session with clients involves some type of musical experience, such as improvising, re-creating, composing and listening to music, and clients may also be encouraged to express themselves through other arts, such as drawing, painting, dance, drama or poetry; and

WHEREAS, the mission of the American Music Therapy Association is to advance public awareness of the benefits of music therapy and increase access to quality music therapy services in a rapidly changing world,

NOW, THEREFORE, I, MUFI HANNEMANN, Mayor of the City and County of Honolulu, do hereby proclaim March 9 - 16, 2008, to be

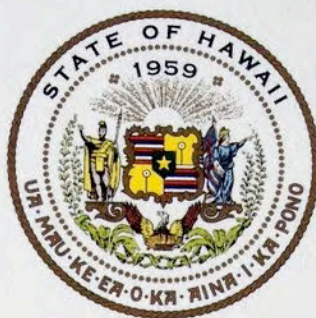
MUSIC THERAPY WEEK

in the City and County of Honolulu, to increase awareness of the benefits of music therapy and its potential for health, wellness and healing, and to thank music therapists for their invaluable contributions.



Done this 7th day of March, 2008,
in Honolulu, Hawaii.

Mufi Hannemann
MUFI HANNEMANN



Proclamation

Presented to the

Sounding Joy Music Therapy, Inc.

WHEREAS, Sounding Joy Music Therapy, Inc., established in 2002, is Hawai'i's first & only non-profit organization dedicated to promoting music therapy; and

WHEREAS, Sounding Joy Music Therapy, Inc.'s mission is "to enhance public awareness of benefits of music therapy, to increase accessibility to music therapy services, and to advance music therapy research, in order to improve quality of life through therapeutic uses of music"; and

WHEREAS, Sounding Joy Music Therapy, Inc. understands the valuable benefits of music therapy; music therapy consists of therapeutic uses of music to address behavioral, social, psychological, physical and communicative functioning; it enhances one's quality of life, involving human relationships, which are structured and adapted through the elements of music to create a positive environment and set the occasion for successful growth and change; and

WHEREAS, Sounding Joy Music Therapy, Inc. was able to successfully provide music therapy to more than 200 Hawai'i families, as well as thousands of others through public education and resource programs; and

WHEREAS, Sounding Joy Music Therapy, Inc. will be celebrating its 2nd Annual "A Morning of Music" on October 23, 2011 at Mission Houses Museums of Hawaii; the event will feature a champagne brunch, live musical entertainment, a silent auction, orchid sale, and more; and

WHEREAS, Sounding Joy Music Therapy, Inc. will honor Pamela Young, Anchor of KITV, for her dedication and commitment to promote music therapy through media outreach in Hawai'i;

THEREFORE I, NEIL ABERCROMBIE, Governor, and I, BRIAN SCHATZ, Lieutenant Governor of the State of Hawai'i, do hereby proclaim October 23, 2011 as

"SOUNDING JOY MUSIC THERAPY DAY"

in Hawai'i and urge the people of the Aloha State to join us in recognizing Sounding Joy Music Therapy, Inc. for its valuable contributions to our communities.

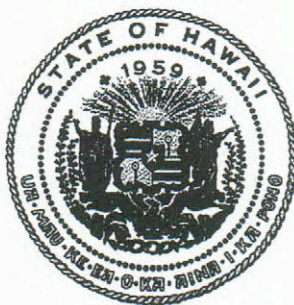
DONE at the State Capitol, in the Executive Chambers, Honolulu, State of Hawai'i, this third day of October, 2011.

Neil Abercrombie

NEIL ABERCROMBIE
Governor, State of Hawai'i

Brian Schatz

BRIAN SCHATZ
Lt. Governor, State of Hawai'i



*The House of Representatives
State of Hawaii*

hereby presents this certificate to

**SOUNDING JOY MUSIC THERAPY, INC.,
"Sounds of Joy"
6th Annual Benefit Concert**

WHEREAS, the Legislature proudly acknowledges organizations in the community that have touched so many lives in a positive manner and have made numerous contributions to the well-being of the State of Hawaii; and

WHEREAS, established in September 2002, SOUNDING JOY MUSIC THERAPY, INC., is Hawaii's first and only non-profit organization, Medicare and Medicaid participating provider that promotes music therapy and that also is an approved continuing education provider by the Certification Board for Music Therapists and the National Board for Certified Counselors; and

WHEREAS, SOUNDING JOY MUSIC THERAPY, INC.,'s mission is to enhance public awareness of the benefits of music therapy, to increase accessibility to music therapy services, and to advance music therapy research; and

WHEREAS, similar to occupational and physical therapy, SOUNDING JOY MUSIC THERAPY, INC., promotes music therapy in response to a growing therapy demand in our community, and uses music to enhance the quality of life of individuals with behavioral, social, emotional, psychological, communicative, and sensory-motor concerns through a structured, yet positive environment that encourages success; and

WHEREAS, on Sunday, January 18, 2009, SOUNDING JOY MUSIC THERAPY, INC., celebrates its 6th Annual Benefit Concert entitled "Sounds of Joy" at the YMCA - Fuller Hall, hosting the pioneer of music therapy from New York University, Dr. Clive Robbins; now, therefore,

The House of Representatives of the State of Hawaii hereby commends and applauds SOUNDING JOY MUSIC THERAPY, INC., for their continuing commitment to the people of Hawaii, and extends to them its warmest aloha and best wishes for continued success in all future endeavors.

Tom Brown

Calvin K.Y. Say

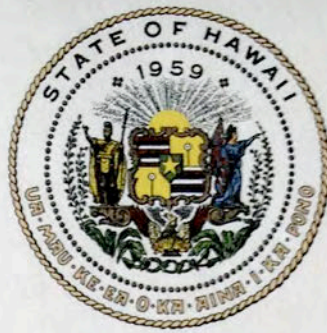
Calvin K.Y. Say, Speaker of the House

Patricia Mau-Shimizu

Patricia Mau-Shimizu, Chief Clerk

John M. Mizuno

Representative John M. Mizuno



The Senate

COMMENDING AND RECOGNIZING SOUNDING JOY MUSIC THERAPY, INC. FOR OUTSTANDING CONTRIBUTIONS TO HAWAII

The spirit of Aloha in Hawaii helps to bring our people together through caring, support, and mutual respect. This spirit has carried our islands through good times and bad times, enabling all of us to be one Ohana. The people of the State of Hawaii recognize and honor the contributions of special organizations and individuals who help inspire a better community by their example of character, caring and commitment. It is a pleasure and a privilege for the Hawaii State Legislature to formally recognize **SOUNDING JOY MUSIC THERAPY, INC.** as one such organization.

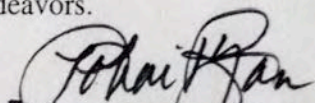
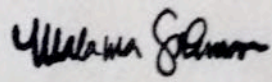
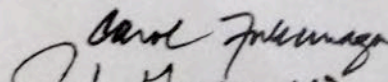
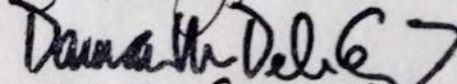
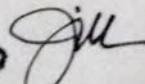
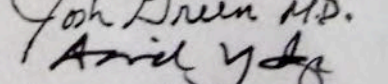
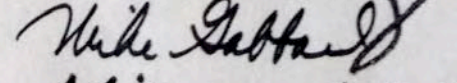
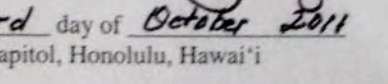
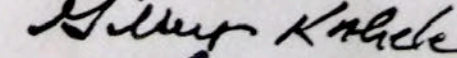
Established in September 2002, **SOUNDING JOY MUSIC THERAPY, INC.**, is Hawaii's first and only non-profit organization, Medicare and Medicaid participating provider that promotes music therapy. They are an approved continuing education provider by the Certification Board for Music Therapists and the National Board for Certified Counselors.

SOUNDING JOY MUSIC THERAPY, INC.'s mission is to enhance public awareness of the benefits of music therapy, to increase accessibility to music therapy services, and to advance music therapy research. Similar to occupational and physical therapy, **SOUNDING JOY MUSIC THERAPY, INC.**, promotes music therapy in response to a growing therapy demand in our community, and uses music to enhance the quality of life of individuals with behavioral, social, emotional, psychological, communicative, and sensory-motor concern through a structured, yet positive environment that encourage success. Their contributions to the community and their commitment to Hawaii's families is greatly appreciated.

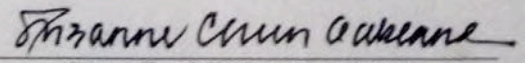
On October 23, 2011, Sounding Joy Music Therapy, Inc. will hold its 2nd Annual Honoree Gala, "A Morning of Music", at the Mission Houses Museum from 11 a.m. to 2 p.m. for the community to enjoy.

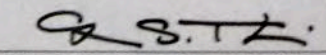
The Twenty-Sixth Legislature of the State of Hawaii hereby recognizes and commends **SOUNDING JOY MUSIC THERAPY, INC.** for its dedication and service to the people of the State of Hawaii, and extends warmest Aloha and best wishes in all its future endeavors.

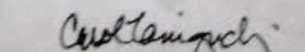


Done this 23rd day of October 2011
State Capitol, Honolulu, Hawai'i


Suzanne Chun Oakland, Sponsoring Senator


Shan S. Tsutsui, President of the Senate


Carol Taniguchi, Clerk of the Senate

Performance Measures by Program Component

As of February '11

Youth Empowerment Service: Decision-making Skills / Positive Choices
Provided by: Sounding Joy Music Therapy, Inc.

Knowledge:

Effect of risky behavior on goal attainment	93% of participants who report that risky behavior can affect goal attainment.
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Attitudes and Beliefs:

Confidence and self-efficacy in making healthy decisions	85% of participants who report feeling more confident they can and will make good decisions.
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Skills:

Decision-making skills	88% of participants reporting acquisition of decision-making skills.
Resistance and refusal skills	88% of participants who report attaining refusal skills.

Behavior:

Goal-setting	80% of participants who report they set goals.
Avoidance of risky behaviors	86% of participants who report abstaining from risky behaviors.

Relationships:

Staff-youth relationships	86% of participants who report a supportive adult in the program.
Peer relationships	89% of participants who report positive peer relationships.