

# MA in Music Therapy

## Programme & module specifications & assessment criteria for 2021/22

*The School is currently planning for the next academic year on the basis that Step 4 of the UK Government road map will have been achieved by the first day of term, Monday 13 September 2021. This means that teaching and performance activities next academic year are expected to be primarily in-person, as set out in the programme and module specifications (“Gold copy”).*

*However, new and continuing students need to be aware that this situation may change and consider this in their decision making; the last sixteen months of the pandemic have shown that nothing is certain. Possible future scenarios range from standard in-person teaching, near normal in-person teaching with mitigations (such as students being required to take regular lateral flow tests and wear face coverings), blended learning with a combination of in-person and online activities, to a worst case scenario of a short-term lockdown.*

*The School managed blended learning very successfully this academic year with core teaching/performance/production activity offered in-person (with small class sizes to allow for social distancing) complemented with online classes and tutorials. Apart from during the January and February 2021 national lockdown the School was able to offer in-person activities throughout the academic year. The School will do its utmost to deliver in-person activities next academic year but will necessarily have to be guided by government regulation on this matter.*

Programme details may change in future academic years, please consult the “Gold copy” for the given year. Any programme, module and assessment criteria amendments will be approved following consultation of the student body through the School’s academic governance committee framework and in-line with the requirements of the School’s Academic Regulatory Framework.

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## **1. Programme Title**

Music Therapy

## **2. Programme Accredited by (if applicable)**

HCPC

## **3. Final qualification and level of award**

MA in Music Therapy

## **4. Exit awards (where relevant)**

PGDip in Music and Health Studies

## **5. Relevant QAA subject benchmarking group(s)**

N/A

## **6. SITS code**

M-MUT

## **7. Approved for the year of study**

2021/22

## **8. Programme leader**

Head of Music Therapy

## **9. Pathway leader**

N/A

## 10. Aims of the Programme

This programme aims to:

- Produce graduates who have a systematic understanding of, and critical insight into, the professional, ethical, legal and cultural issues commensurate with practice as a state-registered music therapist.
- Enable students to acquire highly developed skills in musical communication that can be integrated with theoretical knowledge from the musical, medical psychological, psychotherapeutic and other clinical literature.
- Equip students with the practical, observational and clinical skills required for music therapy clinical work and research.
- Provide students with supervised individual and group music therapy clinical experience in multi-disciplinary teams, with children and adults in a variety of clinical settings, including learning disability and psychiatry.
- Develop students' professional skills, judgement and ethical practice in recording, reviewing and evaluating their clinical work (including observation and note-taking; aural awareness and music notation).
- Develop students' competence in clear and focused verbal and written presentation, reporting of case work and collection of data for Evidence Based Practice.
- Enable students to critically evaluate current research and use appropriate research methods.
- Promote in students a high level of responsibility for and involvement in their own learning and practice, with the ability to act autonomously in planning and implementing practice.
- Develop students' initiative, analytic and decision-making skills in complex, emotionally demanding, and unpredictable situations.
- Provide a safe, contained environment for training therapists which cultivates reflective practice, self-exploration and the development of a therapeutic stance.
- Produce graduates who have a critical insight into the nature of the therapeutic process and the dynamics of the client/ therapist relationship.
- Prepare students for responsible, effective and professional employment in multi-disciplinary teams in such settings as the National Health Service, schools, nurseries, specialist units, and for the voluntary and private sectors.
- Produce graduates with an ability to contribute to the development of the music therapy profession in the UK and internationally.
- Produce graduates who meet the HCPC Standards of Proficiency.

## **11. Criteria for admission to the Programme**

### **11.1 Selection Process**

All applicants to the programme will be invited to a musical audition where they are required to prepare and play two contrasting pieces on their first study, one on their second study and sing a simple song from memory. They are then given a range of previously unseen tasks that assess sight-singing skills, keyboard harmonic sense, and the capacity to improvise alone on the keyboard, and in an interactive scenario with one of the panel members. The majority of these auditions take place in December and January.

Applicants who demonstrate a level of ability sufficient to manage the musical demands of the programme are invited back for a further selection day. This consists of 2 interviews to assess personal suitability and readiness for the programme, and a group musical improvisation session which assesses applicants' capacity to work in a group. These selection days take place during the spring term after which a number of offers are made.

Most places will be offered and accepted by the end of the spring term, although late application and offers can occasionally be accommodated in exceptional circumstances.

### **11.2 Standard entry requirements**

Applicants should normally have obtained an undergraduate degree with Honours in Music, or international equivalent, as a result of completing a minimum of three years in a music college or university music department. Graduates in a different discipline or professional musicians of some years' standing can be accepted, provided they demonstrate appropriate musicianship skills at audition.

Applications should demonstrate experience of a period of paid or voluntary work outside of full-time education. Experience of working with vulnerable adults or children would be highly beneficial.

### **11.3 English language requirements**

Applicants whose first language is not English must achieve as a minimum the IELTS Academic Training examination with an overall band score of 7, regardless of previous study at a UK institution.

### **11.4 Non-standard entry procedure**

N/A

## 12. Programme Outcomes

\* Indicates transferable skill

<b>A. Technique and Knowledge</b>	
On successful completion of this programme the student will be able to:	
A1	A thorough understanding of established practice and theory in music therapy at Masters Level
A2	A systematic understanding of relevant psychological and medical perspectives, and the integration of these into clinical practice in music therapy and related disciplines
A3	An awareness of recent relevant approaches to clinical practice and research in the arts therapies, in particular an understanding of the challenges of Evidence Based Practice in this field
A4	A good working knowledge of the characteristics of the client groups encountered on clinical placements and of the social, family, political and cultural contexts influencing their assessment of and clinical practice with patients.
A5	An awareness of the value of research in evaluating practice and a knowledge of the methods commonly used in health care research
A6	An understanding of core psycho-therapeutic processes techniques (for example empathy, listening, reflection, setting of boundaries, transference and counter-transference, containment) and how these are applied in music therapy
A7	Knowledge of the theories relevant to individual work, group work and group processes and their applications in varied clinical settings
A8	A critical understanding of working relationships, including co-therapy
A9	A capacity to analyse information, including quantitative and qualitative data, that helps to evaluate treatment and management plans, and the responses of patients, clients and users.
A10	A capacity to analyse and apply critique to theoretical and technical questions appropriate to the practice of music therapy
A11	Engagement with the principles and applications of academic enquiry and the research process, including the evaluation of ideas about theory and practice, calling on ideas from reading and other sources using appropriate referencing
A12	Apply creative and improvisational skills to challenging situations*
A13	Skills in using audio/visual recording technologies, music technology and where appropriate, use of music writing programmes such as Sibelius*

<b>B. Performance and/or Creative Output</b>	
On successful completion of this programme the student will be able to:	
B1	How to both create and apply the varied features of music appropriately in clinical settings and to analyse their clinical work
B2	How to use music sensitively and imaginatively on first study and other instruments, and to demonstrate individuality and responsiveness in musical improvisation and composition appropriate to clinical and cultural contexts
B3	Respecting the rights, dignity, choice and autonomy of every patient, with particular reference to social and cultural difference, and the contexts of their lives*
B4	How to establish and sustain a therapeutic relationship based on mutual respect and trust, using empathy, intuition and awareness of diversity, in a creative and containing environment
B5	Maintaining autonomy, flexibility and effective musical communication with patients and colleagues in the clinical setting
B6	Applying heightened observation and listening skills leading to appropriate assessment and formulation of appropriate music therapy techniques
B7	The physiological, psychological and social development of the client and of human relationships, and an ability to analyse group dynamics
B8	How to integrate, translate and apply theoretical understanding to clinical practice
B9	Conducting appropriate therapy treatments or other actions safely and skilfully and in accordance with best/evidence-based practice
B10	Demonstrate effective personal presentation, organisation and time management*
B11	Designing, implementing and documenting a research project*

<b>C. Communication and artistic values</b>	
On successful completion of this programme the student will be able to:	
C1	The need for effective communication with patients clients and users, the nature and impact of non-verbal communication and how this can be affected by culture , ethnicity , age, gender, religious beliefs and socio-economic status*
C2	How to communicate clearly and succinctly in written and spoken English with different audiences and in different contexts*
C3	Reflective practice, supervision and ongoing learning and the limits of their own practice*
C4	The need to build and sustain effective professional relationships and sustain good communication both as an independent practitioner and collaboratively as a member of a team*
C5	Maintaining accurate, legible written clinical records, (using only accepted terminology and abbreviations), and handle these and other clinical data in accordance with relevant protocols
C6	How to provide patients, clients and users (or their advocates) with the information necessary to enable them to make informed decisions regarding the process, benefits and closure of therapy



<b>C. Communication and artistic values</b>	
C7	Presenting, discussing and synthesising complex written, practical and clinical material in a coherent way
C8	Leadership and using initiative and analytical problem-solving skills in unpredictable situations*

<b>D. Professional protocols</b>	
On successful completion of this programme the student will have knowledge and understanding of:	
D1	Working practices of a range of Allied Health Professionals including Occupational Therapy, Art Therapy, and Drama Therapy and Psychology
D2	The requirements of the Health and Care Professions Council, and insight into the professional, ethical, legal and cultural issues commensurate with practice as a registered music therapist
D3	The importance of confidentiality, and its limits in relation to all clinical material
D4	How to practice in a non-discriminatory manner within the legal and ethical boundaries of their profession, maintaining confidentiality and obtaining informed consent*
D5	Understand the need to use an appropriate interpreter wherever necessary, to assist patients whose first language is not English*
D6	Their own commitment to ongoing musical development as part of development as a music therapist*
D7	The principles and role of audit, quality control and quality assurance and be able to participate in or conduct these where necessary*
D8	The obligation to maintain fitness to practice through supervision, self-awareness, musical activity, and CPD*
D9	Relevant health and safety legislation, and any relevant safety policies and procedures at the workplace and be able to act and work safely in accordance with these*

## **13. Programme Structure**

### **13.1 Programme Duration**

2 Years

### **13.2 Mode of Delivery (full/part-time/other)**

Full-time

### **13.3 Total student learning hours**

3000 hours

### **13.4 % Split teaching contact hours: self-directed practice & study\***

1,276 contact

1,724 self-directed

## **14. Teaching & Learning Methodology & Assessment Strategy**

The teaching and learning strategies for the Music Therapy programme have evolved to deliver the aims of the programme, to match the learning outcomes and to achieve professional standards. As the range of entrants to the programme is diverse (in age, skills, culture and experience), the programme has needed to develop flexible and appropriate methods to deliver the teaching.

Professional practice in Music Therapy requires competency in clinical, practical, academic and 'personal awareness' areas and students need substantial practice to use and integrate these skills. Hence the department's approach to teaching and learning concentrates on a high level of student responsibility for, and involvement in, their studies, with a significant concentration on experiential learning and on processes that parallel the work that graduates will do once employed.

Central to the programme is the focus on clinical placements, giving students the experience of working alongside qualified music therapy practitioners in three different settings during the course of their studies. A particular feature of Guildhall is that students begin clinical placements one day per week immediately after enrolling on the programme. Each student's package of placement is carefully chosen and balanced by the programme leader to give them an appropriate range of experience throughout their training.

### **Year 1**

In term 1, students observe the work of a practising music therapist and complete an observational case study before going on to undertake individual casework of their

own in the same setting in term 2, and moving to a different work placement in term 3.

## **Year 2**

Placements are extended to 2 days per week, and students can take on a greater level of responsibility, and more complex cases. They are well supported individually by their clinical placement supervisors, who liaise with the module leader and attend termly student progress meetings at Guildhall School.

At Guildhall, programme staff support students in reflecting on their experience and developing their technique and knowledge in weekly small group clinical seminars, where work is shared and discussed with peers and tutors.

Student presentation and discussion are highly valued, regular reflection on case work is expected, constant investigation of the relationship between theory and student case work is made, helpful patterns of music practice are encouraged, and interactive techniques such as role-play are used for exploration of themes. Students are expected to develop their own choices and ideas, readily to question their teachers and to take initiatives with their clinical experience and choices of reading.

### **14.1 Assessment**

Assessment is seen as an integral part of the learning process and is used formatively throughout the programme. Feedback is provided formally and informally and students are involved in some of the processes of formative feedback to themselves and their peers.

The strategy for assessment of the Masters in Music Therapy programme is built on the following principles:

- Students should be set clear and focused tasks (as outlined in the programme handbook) with firm deadlines as stated in the handbook, and with transparent criteria for assessment
- The assessment tasks will be related as far as possible to the varied professional procedures expected of the working music therapist, in order to prepare candidates effectively for their working lives and to meet the statutory requirements of the Health & Care Professions Council in the UK. This includes, for example, verbal and written clinical case reports; placement appraisal linked to termly viva voce exams; clinical improvisation; creative musicianship, performance and some composition; live seminar presentation and writing of academic papers and essays, team liaison.
- As part of the Masters Level training, research-based tasks are included in the evaluation of clinical practice.

- The assessment tasks focus on a variety of skills (practical, clinical, academic and research) to allow students to demonstrate their strengths and to reflect the wide range of learning outcomes developed by the programme.
- Where assessment tasks involve the student’s imagination and artistry (for example in clinical improvisation, composition and general musicianship), students should recognise that their own initiative and experimentation are highly valued qualities in the learning process.

## 14.2 Feedback Arrangements

Students receive prompt written feedback on assignments (wherever possible within three weeks of written submission or completion of the relevant component) recognising and rewarding positive aspects of their work and providing constructive criticism on how improvements could be made in the future.

For all written and seminar presentation assignments, students receive feedback on content and presentation according to the Assessment Criteria. The School endeavours to provide students with feedback and grades for work submitted within three weeks after assessment tasks have been completed or handed in. Students are advised that the grades they might receive during the academic year for written work are provisional. In some cases, only the final moderated mark is available to students.

Student progress is discussed in staff meetings (usually held in the study week of each term). Feedback is given to students following these meetings.

Following the School Assessment Board, students will receive individual letters regarding their results. Students will also receive in due course their reports with the formative and summative parts of their assessments, as appropriate. Students who are not successful are called for a meeting with the relevant staff member to discuss their results.

## 14.3 Years and Modules

Year 1			
Core Modules: students must take & pass all of the following:			Notes
Title	Credits	Level	
(A1) Clinical Practice and Reflection 1	60	7	
(B1) Theoretical Studies 1	50	7	
(C) Musical Resources	50	7	
(D1) Personal Awareness	20	7	
Total	180		

<b>Year 2</b>			
Core Modules: students must take & pass all of the following:			Notes
Title	Credits	Level	
(A2) Clinical Practice and Reflection 2	60	7	
(B2) Applied Theoretical and Research Studies	50	7	
(D2) Professional and Personal Awareness	10	7	
Total	120		

## **15. Assessment Regulations**

These regulations are in addition to the general assessment regulations for taught programmes in the Academic Regulatory Framework covering Board membership, attendance at examinations and submission of coursework (including late penalties), extenuating circumstances, external examiners and academic misconduct.

### **15.1 Module Regulations**

Full details of each modules pass requirements are set out in the module specifications.

### **15.2 Progression and Completion**

#### **Requirements for progression to Year 2**

In order to progress from Year 1 to Year 2, a student must achieve a pass grade in modules A1, B1, C, and D1.

A student who fails the Viva Voce 2 in module A1 may be permitted to re-sit the component in term 3 of Year 1 or, provided a mark of between 40% and 49% has been achieved, carry this mark forward to Year 2. Any such fail mark must be compensated within the module before the degree can be awarded.

A fail in module D1 would mean a student's attendance had been insufficient and they would not be able to proceed to Year 2 until the module had been completed. In discussion with the Head of Programme and module tutor, a scheme for retaking this module would be decided.

#### **Requirements for completing Year 2**

In order to complete year 2 a student must

- achieve a mark of at least 50% in module A2 and B2;
- achieve a mark of at least 50% in the research project of module B2 and an aggregate mark of 50% for the overall module
- achieve a pass grade in module D2\*(please see below);

- attend a minimum of 40 hours of personal therapy.

#### \*Module D2

If the Professional Development profile and log is failed it will need to be resubmitted.

If one of the other components is failed this will necessitate a further assessment task or period of development, depending on which component has been failed. Any component that is failed will need to be redeemed at the earliest available opportunity. In discussion with the Head of Programme and module tutor, a scheme for retaking failed components will be decided.

Students whose attendance and participation has fallen below 80% without certified Extenuating Circumstances by the study week of Term 5 will be counselled in an interview with programme staff and warned that they might be liable to fail the module if attendance does not improve. (Failure to participate due to extenuating circumstances will be taken into account.)

### **15.3 Resit Procedures**

Where there has been a first valid attempt, re-sit provisions will apply to all failed modules. The conditions for the re-sit shall be prescribed by the Assessment Board.

If the Assessment Board permits a student to re-sit a module:

The failed assessment component must be redeemed at the earliest possible opportunity

Or

The entire module assessment must be redeemed at the earliest possible opportunity

Or

A specific assessment activity should be undertaken. The nature of this activity will be recommended by the Assessment Board and will take into account the aims of the module and the associated learning outcomes.

The Assessment Board may, at its discretion, permit a student to resit during the course of the following year, with or without attendance.

A student who does not pass his or her resit will not have met the requirements of the programme and, therefore, their student registration will be terminated. Where applicable, a student will be considered for an exit award.

A student who successfully completes a resit shall be awarded the credit for the Module. The resit mark (capped where applicable) will be used for the purposes of the award calculation.

## 15.4 Compensation Provisions

In accordance with requirements for Registration with the Health & Care Professions Council (HCPC) and as all arts therapies professions, no compensation between modules will be permitted within this programme.

Compensation between components within a module will be permitted provided that:

an aggregate mark of 50% has been achieved for the module overall;

the mark for any component is not less than 40%.

Compensation between components in modules D1, A2 and D2 is not permissible.

Compensation between the first two components in module B2 is permissible but the final research project must be passed to pass the module.

## 15.5 Award regulations

### MA in Music Therapy

In order to be awarded the MA in Music Therapy, a student must have:

- successfully passed all modules (300 credits) to the satisfaction of the School Assessment Board;
- achieved an aggregate mark of 50% for the programme as a whole;
- completed the minimum hours of personal therapy recommended by the Council (currently stated as 40 hours).

The MA will be awarded as pass, merit or distinction according to the following aggregate marks for the programme as a whole. The aggregate will be calculated by weighting the module marks in accordance with their credit values and omitting the pass/fail modules D1 and D2 from the calculation:

Classification	Minimum %
Distinction	70% (students who achieve an overall module score of 80% in either module A2 or B2 will be eligible for a Starred Award)
Merit	60%
Pass	50%

Once the pass lists have been signed, the Assessment Manager will inform the HCPC of the official pass list; graduates will then be eligible for HCPC registration.

## Postgraduate Diploma in Music & Health Studies

In order to be awarded the Postgraduate Diploma in Music & Health Studies, a student must have:

- successfully passed all Year 1 modules (180 credits) to the satisfaction of the School Assessment Board;
- achieved an aggregate mark of 50% for the Year 1 modules as a whole.

The PGDip will be awarded as pass, merit or distinction according to the following aggregate marks. The aggregate will be calculated by weighting the module marks in accordance with their credit values and omitting the pass/fail module D1 from the calculation:

Classification	Minimum %
Distinction	70%
Merit	60%
Pass	50%

Additional modules undertaken and passed in Year 2 will not be used to calculate the overall mark but will be recorded on the student's transcript.

Note: this is an academic award only and is not recognised by the Health & Care Professions Council.

Where a student fails to meet the requirements for Year 2, having exhausted all permitted re-sit opportunities, but satisfies the requirements for Year 1, then the Assessment Board shall recommend, where applicable, that the lower level qualification will be awarded and the student withdrawn from the programme.

### 15.6 Participation

Students are expected to attend all appropriate lessons, classes, clinical placements and activities and to maintain good timekeeping. Persistent attendance and timekeeping problems would be likely to jeopardise the students' performance in assessments. Students who miss more than 20% of the taught or experiential curriculum will be considered under the School's Course Participation policy

### 15.7 Fitness to practice procedure

The School has a duty of care to the public to ensure that MA in Music Therapy students will be safe and suitable entrants to the profession and are fit to practice. All Music Therapy students must meet the HCPC's "Standards of Proficiency."

If there is, for whatever reason, concern about a student's fitness to practice, this must be reported to the Head of the Music Therapy Department (or deputy in her absence) who will investigate the concern under the School's Fitness to Practice Procedure.



## 16. Curriculum Map Relating Programme Learning Outcomes to Modules

	Module	Code s	A1	A2	A3	A4	A5	A6	A7	A8	A9	A10	A11	A12	A13	B1	B2	B3	B4	B5	B6	B7	B8	B9	B10	B11
			<b>Part 1</b>	Clinical Practice and Reflection 1	GM MTH 4001	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	
Theoretical Studies 1	GM MTH 4002	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓	✓		✓	✓	✓		✓	✓
Musical Resources	GM MTH 4003					✓		✓		✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	
Personal Awareness	GM MTH 4004							✓	✓	✓	✓			✓		✓	✓	✓	✓	✓	✓	✓	✓			
Clinical Practice and Reflection 2	GM MTH 4005	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Part 2</b>	Applied Theoretical and Research Studies	GM MTH 4006	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓			✓		✓			✓	✓	✓		✓	✓
	Personal and Professional	GM MTH 4007	✓		✓	✓	✓	✓	✓	✓	✓			✓		✓	✓	✓	✓	✓	✓	✓	✓		✓	

Part 1	Module	Code s	A1	A2	A3	A4	A5	A6	A7	A8	A9	A10	A11	A12	A13	B1	B2	B3	B4	B5	B6	B7	B8	B9	B10	B11
	Clinical Practice and Reflection 1	GM MTH 4001	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓				
	Theoretical Studies 1	GM MTH 4002	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓		✓	✓		✓	✓	✓		✓	✓
	Musical Resources	GM MTH 4003				✓		✓		✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	
	Personal Awareness	GM MTH 4004						✓	✓	✓	✓			✓		✓	✓	✓	✓	✓	✓	✓	✓			
	I Awareness																									

	Module	Codes	C1	C2	C3	C4	C5	C6	C7	C8	D1	D2	D3	D4	D5	D6	D7	D8	D9
<b>Part 1</b>	Clinical Practice and Reflection 1	GM MTH 4001	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Theoretical Studies 1	GM MTH 4002	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓
	Musical Resources	GM MTH 4003	✓		✓	✓				✓	✓	✓	✓	✓		✓		✓	
	Personal Awareness	GM MTH 4004	✓		✓	✓		✓		✓			✓	✓	✓			✓	
	Clinical Practice and Reflection 2	GM MTH 4005	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Part 2</b>	Applied Theoretical and Research Studies	GM MTH 4006	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓			✓	✓	✓
	Personal and Professional Awareness	GM MTH 4007	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

## 17. Module Specifications

### 17.1 Clinical Practice and Reflection 1

1. Module Title	A1 – Clinical Practice and Reflection 1
2. HE Level	7
3. Credit Value	60
4. SITS Module Code	MTH 4008
5. Location of Delivery	Guildhall School and Partnership Placement
6a. Module Type	Placement/Taught
6b. Applicable in the year of study	Year 1
7. Module Leader	Ann Sloboda
8. Department	Music Therapy

#### 9. Aims of the Module

##### Clinical Seminars

To provide a regular contained environment, where students can present and discuss observations about their own and their supervisors' music therapy practice and receive clear feedback from tutor and peers;

To enable the students to value the process of reflective thinking about clinical material from the perspective of different theoretical frameworks;

To develop students' skills in clinical observation and interpretation;

To develop appropriate and effective case study presentation skills – with emphasis on precision and clarity and timing;

To enable the students to use the clinical material presented as a basis for understanding techniques and methods used in music therapy;

To give support and help with any difficulties experienced on placement and to assist students in deciding when such difficulties should be taken to their personal therapy, to clinical placement supervision or to be dealt with in this class;

To provide a forum for the discussion of wider clinical issues.

## **Clinical Placements**

To provide regular practical experience of clinical music therapy, throughout the training course. This forms the professional and practical basis for the students understanding of the discipline;

To develop students' understanding of clinical work in a graduated way; first experiencing by observation of a qualified practitioner, second by beginning individual practice; third by running a group; fourth by developing interests and contacts of their own choice (broadening and deepening their experience);

To gain experience of work with children and adults in a variety of settings. (Students will have a unique profile of clinical practice, each being placed independently in 2-4 differing institutions);

To experience different models of work by UK practitioners, and to receive supervision on-site from the clinically-responsible music therapist;

To experience the actual clinical work in real contexts and understand the relevance of various clinical approaches. Students experience a range of perspectives on music therapy practice and learn to reflect on the tension between different clinical models;

To participate in the life of the therapeutic team, taking part in meetings, reviews and assessments, learning to give and receive feedback.

## **10. Teaching & Assessment Methodology**

### **Method of teaching delivery:**

#### **Clinical Seminars**

Regular opportunities to present case work (usually 4 times per term) and at the end of 1<sup>st</sup> and 3<sup>rd</sup> term, presentation of summaries of case studies;

Receiving framework for case studies from tutors and experimenting with their use;

Class discussion and feedback also allows the students to gain confidence and to offer mutual support where difficulties are experienced. Tutor offers regular feedback and guidance on these values, and model ways to reflect on experience;

The facilitation of reflective thinking on students' own casework and that of peers. Receiving feedback casework and giving feedback to fellow students;

Occasional Clinical presentations by tutor;

Developing questions about practice and theory. Some discussion of key reading.

## **Clinical Placements**

Live observation of clinical supervisors and other professionals on placement (term 1);

Conducting your own music therapy sessions; writing up notes; reflecting on work in supervision; taking part in team meetings, ward rounds and other relevant work on placement;

Weekly supervision of clinical work, describing and analyzing music therapy material and sharing and discussing ideas; writing up of case notes regularly and accurately.

### **Assessment:**

#### **Clinical Seminars**

Formative Assessment:

Regular feedback and guidance is given on the development of the necessary clinical knowledge, written and verbal skills, and professional protocols required for the range of clinical placement settings.

Summative Assessment:

Viva voce 1 examination on observational work (start of term 2) 1 hour;

Viva voce 2 examination on individual case work (start of term 3): 20 mins presentation including audio-visual extracts, followed by 30 mins viva voce;

Presentation of a written case report 2000-2500 words (end of term 1);

Viva voce 3 examination on group work (start of term 4): 20 mins presentation including audio-visual extracts, followed by 30 mins viva voce.

## **Clinical Placements**

Weekly supervision informally monitors student development and discusses difficulties; placement report each term;

Weekly clinical seminars monitor understanding, reflective practice and presentation and analytical skills;

Termly clinical supervisor's placement reports assess whether each student has reached a satisfactory standard in that specific field;

Three interim clinical viva voce exams for year 1 assess the learning outcomes of the placement, as the casework content of the viva is based on experience gained on placements.

## 11. Learning Outcomes

On the successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:

A1, A2, A3, A4, A5, A6, A7, A8, A9, A10, A12, A13  
B1, B2, B3, B4, B5, B6, B7, B8, B9, B10  
C1, C2, C3, C4, C5, C6, C7, C8  
D1, D2, D3, D4, D5, D6, D7, D8, D9

## 12. Module Pattern

### a) Scheduled Teaching & Learning Hours

KIS Type	Contact Hours
Seminar	60
One-to-one class/tutorial	8
Placement(s)	240

### b) Assessment

KIS Assessment Component	Detail	KIS Code	% Weighting	% Pass Mark
Written Assessment	2000 - 2500 words	KCW	20	50
Oral Assessment	1 hour viva voce exam	KPE	20	50
Oral Assessment	20 mins presentation and 30 mins viva	KPE	30	50
Oral Assessment	20 mins presentation and 30 mins viva	KPE	30	50

### c) Independent Study Hours

Independent Study Hours	Notional Hours
Personal practice/study	132
Library-based study	120

### d) Total Student Learning Hours for Module

600 hours

## 13. Reading & Resources\*

### Clinical Seminars and Clinical Placements

Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant.

Author	Year	Title	Publisher
Aldridge, D	2008	Music Therapy and Neurological Rehabilitation	Jessica Kingsley Publishers
Aldridge, D (ed)	2000	Music Therapy in Dementia Care	Jessica Kingsley Publishers
Authors – various		British Journal of Music Therapy	British Society for

### 13. Reading & Resources\*

#### Clinical Seminars and Clinical Placements

Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant.

			Music Therapy
Bunt, L & Hoskyns, S	2002	The Handbook of Music Therapy	Routledge/ Taylor- Francis
Case Bruscia, K (ed)	1991	Studies in Music Therapy	Barcelona Publishers
Casement, P	1985	On Learning from the Patient	Routledge
Compton-Dickinson, S, Odell-Miller, H & Adlam, J (eds)	2012	Forensic Music Therapy	Jessica Kingsley Publishers
Darnley-Smith, R & Patey, H	2003	Music Therapy	Sage
Davies, A & Richards, E	2002	Sound Company: Music Therapy and Group Work	Jessica Kingsley Publishers
Davies, A, Richards, E & Barwick, N	2015	Group Music Therapy	Routledge
Fawcus, M (ed)	1997	Children with Learning Difficulties: a collaborative approach to their education and management	Whurr
Gray, A	1994	Introduction to the Therapeutic Frame	Routledge
Higgins, R.		Approaches to Case Study	Jessica Kingsley Publishers
Karkou, V (ed)	2010	Arts Therapies in Schools	Jessica Kingsley Publishers
Miller, L et al. (eds)	2013	Closely Observed Infants	Bloomsbur y
Oldfield, A & Flower, C	2008	Music Therapy with Children and their Families	Jessica Kingsley Publishers
Pavlicevic, M	1999	Music Therapy: Intimate Notes	Jessica Kingsley Publishers
Trevarthen, C et al.	1996	Children with Autism Diagnosis and Interventions to Meet Their Needs	Jessica Kingsley Publishers
Wigram, T	2002	Indications in Music Therapy	BJMT (Vol 16 no.1)



### 13. Reading & Resources\*

#### Clinical Seminars and Clinical Placements

Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant.

Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy in Developmental Disability, Paediatrics and Neurology	Jessica Kingsley Publishers
Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy in Psychiatry	Jessica Kingsley Publishers
Zinkin, L	1994	Group Analysis 27 (1) All's well that ends well. Or is it?	

## 17.2 Theoretical Studies 1

<b>1. Module Title</b>	B1 – Theoretical Studies 1
<b>2. HE Level</b>	7
<b>3. Credit Value</b>	50
<b>4. SITS module code</b>	MTH 4009
<b>5. Location of Delivery</b>	Guildhall School
<b>6a. Module Type</b>	Taught
<b>6b. Applicable in the year of study</b>	1
<b>7. Module Leader</b>	Cressida Lindsay
<b>8. Department</b>	Music Therapy

### 9. Aims of the Module

- To provide students with the necessary theoretical background to compliment and support the acquisition of music therapy techniques;
- To provide students with the knowledge and understanding of how psychology can support and extend the practice of music therapy;
- To introduce students to the main body of music therapy literature, with particular reference to key historical texts;
- To enable students to integrate theoretical knowledge concepts with their developing clinical thinking and practice;
- To equip students to present their work and ideas in a clear, objective, confident manner;
- To show how psychology theory and research can help to explain the nature and causes of different disorders;
- To explore the theory and practice of alternative models of disorder and treatment.
- To follow up and expand on the subject matter of the clinical lectures and to relate issues to practical experience on placement, music-based and clinical classes at the Guildhall School and further reading;
- To develop a critical understanding of the relevance and relative strengths of different models and approaches to psychological therapy;
- To provide an arena where students can debate, assimilate and integrate practical and theoretical issues raised in training.

## 10. Teaching & Assessment Methodology

### Method of teaching delivery:

- Lectures and seminars offering interactive discussion style presentations in small and large groups;
- Student presentations in class;
- Small group exercises to explore application of theoretical concepts;
- Individual tutorials to support students' study skills and planning for assignments.

### Assessment:

- Music Therapy Essay – late term 1 of 1<sup>st</sup> year: 2500 – 3000 words;
- Music Therapy Theory and Literature Seminar Presentation – Term 2 of 1<sup>st</sup> Year on a theoretical topic of choice. 25 minutes long followed by 10 minutes for discussion. Students must gain approval for the seminar topic at least one week in advance;
- Psychology/Theory Report (4,000-4,500words) Term 3 of 1<sup>st</sup> year. Students are given the opportunity to give a 15 minute presentation on their report followed by 15-20 of discussion.

<b>11. Learning Outcomes</b>
On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:
A1, A2, A3, A4, A5, A6, A7, A8, A9, A10, A11 B1, B3, B4, B6, B7, B8, B10, B11 C1, C2, C3, C4, C5, C6, C7 D1, D2, D3, D4, D5, D7, D8, D9

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
KIS Type				Contact Hours
Seminar				180
b) Assessment				
KIS Assessment Component	Detail	KIS Code	% Weighting	% Pass Mark
Written assignment	Theoretical Studies Essay, 2500-3000 words.	KCW	35	50
Report	Psychology/Theory Case Report, 4,000-4,500 words	KCW	45	50

<b>12. Module Pattern</b>				
Presentation	25 minute long presentation with 10 minutes discussion.	KPE	20	50
c) Independent Study Hours			Notional Study Hours	
Personal Practice/Study			120 Hours	
d) Total Student Learning Hours for Module			500 Hours	

<b>13. Reading &amp; Resources</b>			
Music Therapy			
Author	Year	Title	Publisher
Aigen, K	2014	The Study of Music Therapy	Routledge
Aldridge, D	2000	Music Therapy in Dementia Care	Jessica Kingsley Publishers
Aldridge, D	1999	Music Therapy in Palliative Care – New Voices	Jessica Kingsley Publishers
Aldridge, D	2008	Music Therapy and Neurological Rehabilitation	Jessica Kingsley Publishers
Alvin, J	1966	Music Therapy	Stainer and Bell
Ansdell, G & Pavlicevic, M	2004	Community Music Therapy	Jessica Kingsley Publishers
Austin, D	2008	The Theory and Practice of Vocal Psychotherapy	Jessica Kingsley Publishers
Baker, F & Tamplin, J	2006	Music Therapy Methods in Neurorehabilitation – A Clinician’s Manual	Jessica Kingsley Publishers
Bates, V et al. (eds)	2014	Medicine, Health and the Arts	Routledge
British Journal of Music Therapy	1987-2016	Various articles	British Association for Music Therapy
Bruscia, K	1991	Case Studies in Music Therapy	Barcelona Publishers
Bruscia, K	1987	Improvisational Models in Music Therapy	Barcelona Publishers
Bruscia, K	1998	The Dynamics of Music Psychotherapy	Barcelona Publishers
Bunt, L & Hoskyns, S	2002	The Handbook of Music Therapy	Routledge
Bunt, L & Stige, B	2014	Music Therapy: An Art Beyond Words	Routledge

<b>13. Reading &amp; Resources</b>			
Music Therapy			
Cattanach, A	2008	Play Therapy with Abused Children	Jessica Kingsley Publishers
Cordess, C & Cox, M (eds)	1998	Forensic Psychotherapy	Jessica Kingsley Publishers
Darnley-Smith, R & Patey, H	2003	Music Therapy	Sage
Davies, A & Richards, E	2002	Music Therapy and Group Work: Sound Company	Jessica Kingsley Publishers
Davies, A, Richards, E & Barwick, N (eds)	2015	Group Music Therapy – A Group Analytic Approach	Routledge
De Backer, J & Sutton, J (eds)	2014	The Music in Music Therapy	Jessica Kingsley Publishers
Doktor, D (eds)	1994	Arts Therapies and Clients with Eating Disorders	Jessica Kingsley Publishers
Hadley, S (ed)	2003	Psychodynamic Music Therapy: Case Studies	Barcelona Publishers
Heal, M & Wigram, T	1993	Music Therapy in Health and Education	Jessica Kingsley Publishers
Malchiodi, C & Henshaw, D	2014	Creative Arts and Play Therapies for Attachment Problems	The Guilford Press
Malloch, S & Trevarthen, C (eds)	2009	Communicative Musicality - Exploring the Basis of Human Relationship	Oxford University Press
McFerran, K	2010	Adolescents, Music and Music Therapy	Jessica Kingsley Publishers
Nordic Journal of Music Therapy	1998-2016	Various Articles	Taylor and Francis
Oldfield, A	2006	Interactive Music Therapy - A Positive Approach. Music Therapy at the Child Development Centre	Jessica Kingsley Publishers
Pavlicevic, M	1997	Music Therapy in Context, Music Meaning and Relationship	Jessica Kingsley Publishers
Priestley, M	1994	Essays on Analytical Music Therapy	Barcelona Publishers
Searle, Y & Streng, I	2001	Where Analysis Meets the Arts	Karnac

<b>13. Reading &amp; Resources</b>			
<b>Music Therapy</b>			
Stige, B et al. (eds)	2010	Where Music Helps	Ashgate Publishing Ltd
Sutton, J (ed)	2002	Music, Music Therapy and Trauma - International Perspectives	Jessica Kingsley Publishers
Twyford, K& Watson, T	2008	Integrated Team working	Jessica Kingsley Publishers
Wigram, T	2004	Improvisation	Jessica Kingsley Publishers
Wigram, T & Baker, F	2005	Songwriting	Jessica Kingsley Publishers
Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy in Psychiatry	Jessica Kingsley Publishers
Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy in Developmental Disability , Paediatrics and Neurology	Jessica Kingsley Publishers
Wigram, T, Pedersen , I, N & Bonde, L,O	2002	A Comprehensive Guide to Music Therapy - Theory, Clinical Practice, Research and Training	Jessica Kingsley Publishers
Wosch, T & Wigram, T (eds)	2008	Microanalysis in Music Therapy	Jessica Kingsley Publishers
<b>Psychology</b>			
Bateman, A et al	2000	Introduction to Psychoanalysis	Routledge
Beck, A	1989	Cognitive Therapy and the Emotional Disorders	Penguin
Beck, A & Beck, J	1995	Cognitive Therapy: Basics & Beyond	Guildford
Bee, H	Latest edition	Lifespan Development	Harper & Row
Bee, H	Latest edition	The Developing Child	Harper & Row
Beebe, B & Lachmann, F	2013	The Origins of Attachment: Infant Research and Adult Treatment	Routledge
Berk, L	2012	Child Development	Pearson
Boettcher, L & Dammeyer, J	2016	Development and Learning of Young Children with Disabilities	Springer
Bor, R et al	2008	Counselling in Healthcare Settings	Cassell
Bowers, L	1998	The Social Nature of Mental Illness	Routledge
Brooks, P & Kempe, V	2012	Language Development	J Wiley & Sons

<b>13. Reading &amp; Resources</b>			
Music Therapy			
Brown, D & Pedder, J	2000	Introduction to Psychotherapy	Routledge
Burns, D	2000	Feeling Good: The New Mood Therapy	Plume
Carlson, N	2014	The Physiology of Behaviour	Allyn & Bacon
Carr, A	2006	The Handbook of Child and Adolescent Clinical Psychology	Routledge
Chandler, C	2015	Psychobiology	J Wiley & Sons
Clarkson, P	1999	Gestalt Counselling in Action	Sage
Cooper, M	2008	Essential Research Findings in Counselling and Psychotherapy: The Facts are Friendly	Sage
Davidon, G & Neale, J	Latest edition	Abnormal Psychology	J Wiley & Sons
Davison, G et al	Latest edition	Abnormal Psychology	J Wiley & Sons
Dryden, W & Reeves, A (eds)	2013	The Handbook of Individual Therapy	Sage
Eysenck, M & Keane, M	2015	Cognitive Psychology: A student's handbook	Psychology Press
Farber, B	2006	Self-Disclosure in Psychotherapy	Guilford
Freud, S	1973	New Introductory Lectures on Psychoanalysis	Penguin
Glassman, W	2008	Approaches to Psychology	Open University
Gross, R	2015	Psychology: The Science of mind and behaviour	Hodder Arnold
Hewstone, M, Fincham, F & Foster, J	2005	Psychology	J Wiley & Sons
Holmes, J	1993	John Bowlby and Attachment Theory	Routledge
Jacobs, M	2006	The Presenting Past	Sage
Jacobs, M	Latest edition	Psychodynamic Counselling in Action	Sage
Joyce, P & Sills, C	2001	Skills In Gestalt Counselling And Psychotherapy	Sage
Kahr, B	2016	Tea with Winnicott	Karnac Books
Kalat, J	Latest edition	Biological Psychology	Brooks/Col e
Kolb, B & Whishaw, I	2015	Fundamentals of Human Neuropsychology	Worth Publishers
Maltby, J, Day, L & Macaskill, A	2013	Personality, Individual differences and Intelligence	Pearson

<b>13. Reading &amp; Resources</b>			
Music Therapy			
Martin, G, N, Carlson & Buskit, W	2013	Psychology	Pearson
McLeod, J	2009	An Introduction to Counselling	Open University
Mearns, D & Cooper, M	2005	Working at Relational Depth in Counselling and Psychotherapy	Sage
Mearns, D & Thorne, B	2007	Person-Centred Counselling in Action	Sage
Nolen-Hoeksema, S, Fredrickson, B, Loftus, G.R. & Lutzs, C	Latest edition	Atkinson & Hilgard's Introduction to Psychology	Harcourt
Obholtzer, A & Zagia Roberts, V (eds)	1997	The Unconscious at Work	Routledge
Pinel, J	2013	Biopsychology	Pearson
Rogers, C	1961	On Becoming a Person	Constable
Roth, A & Fonagy, P	2005	What Works For Whom?	Guildford
Sacks, O	1985	The Man Who Mistook His Wife for a Hat	Summit
Sarafino, E	2004	Behaviour Modification: Principles of Behaviour Change	J Wiley & Sons
Schore, A	2003	Affect Dysregulation and Disorders of the self	W.W. Norton & Company
Segal, H	1986	The work of Hanna Segal	Free Association Books
Segal, J	1985	Phantasy in Everyday Life	Penguin
Seligman, M et al	Latest edition	Abnormal Psychology	Norton
Simmons, J & Griffiths, R	2008	CBT for Beginners: A Practical Guide for Beginners	Sage
Sinason, V	2010	Mental Handicap and the Human Condition	Free Association Books
Slater, A & Bremner, J	2016	An Introduction to Developmental Psychology	J Wiley & Sons
Smith, P, Cowie, H & Blades, M	2015	Understanding Children's development	J Wiley & Sons
Spinelli, E	2005	The Interpreted World	Sage
Stern, D	1985	The Interpersonal World of the Infant	Basic Books
Stern, D	2004	The First Relationship	Harvard University Press



**13. Reading & Resources**

## Music Therapy

Stern, S	2010	Forms of Vitality	Oxford University Press
Stewart, I	2007	Transactional Analysis Counselling in Action	Sage
Stewart, I	1996	Developing Transactional Analysis Counselling	Sage
Trevarthen, C et al.	1998	Children with Autism	Jessica Kingsley Publishers
Trower, P et al	1989	Cognitive-Behavioural Counselling in Action	Sage
Waddell, M	1998	Inside Lives-Psychoanalysis and the Growth of the Personality	Routledge
Welfel, E	2005	Ethics in Counselling and Psychotherapy: Standards, Research & Emerging Issues	Brooks/Cole
Wells, A	1997	Cognitive Therapy of Anxiety Disorders	J Wiley & Sons
Whitmore, D	2004	Psychosynthesis Counselling in Action	Sage
Winnicott, D	1977	The Piggle: An Account of the Psychoanalytic Treatment of a Little Girl	Hogarth Press
Winnicott, D	1971	Playing & Reality	Routledge
Woods, R (ed)	1999	Psychological Problems of Ageing	J Wiley & Sons
Yalom, I	1989	Love's Executioner	Penguin

## 17.3 Musical Resources

<b>1. Module Title</b>	C – Musical Resources
<b>2. HE Level</b>	7
<b>3. Credit Value</b>	50
<b>4. SITS module code</b>	MTH 4010
<b>5. Location of Delivery</b>	Guildhall School
<b>6a. Module Type</b>	Taught
<b>6b. Applicable in the year of study</b>	1
<b>7. Module Leader</b>	Donald Wetherick
<b>8. Department</b>	Music Therapy
<b>9. Aims of the Module</b>	

### Music therapy techniques

- To enable students to develop sensitive and creative musical resources on a variety of instruments and to apply these effectively to their work in the clinical field with individuals and groups. There are 2 sub-strands: supportive/reflective music making and technical music therapy interventions;
- To enable students to acquire a systematic knowledge and understanding of how to realise both the above approaches in the music therapy context;
- To enable students to develop skills in listening to analysing and notating their own and their client's music;
- To enable students to develop skills in improvisation and composition for clinical work covering a range of musical idioms and styles
- Principal Study / Integrative Performance
- To foster instrumental and and/or vocal skills, through performance, that will inspire and support students' vocational work as music therapists;
- To strengthen technical skills and provide established musicians with input and feedback to their principal study to extend their resources to use music clinically;
- To give them the resources to continue their own musical and artistic development through CPD after qualifying as music therapists;
- To enable students to pay critical attention to the formation of musical structures;
- To explore new repertoire and ideas about creating and performing music with individual and groups;

- To gain practical experience of developing artistic skills alongside other postgraduate students in the School in order to value the role of music therapist and widen their access to cross cultural musical language.

The Head of Music Therapy allocates students to members of the School's instrumental and vocal studies staff in liaison with other Heads of Departments. Staff are chosen based on their active interest in teaching a trainee music therapist, in order to help the student to develop their instrumental skills and musical understanding for application in their clinical work.

### **Keyboard Musicianship**

- To enable students of varied pianistic experience develop their capacity at the keyboard to explore musical issues and by implication to support their clients in music therapy practice;
- To enable students, by working on harmonisation and improvisation, to begin a process of freeing themselves from the written page;
- To develop aural awareness and an understanding of effective methods of construction used in specific musical genres.

### **Group Improvisation**

- To increase students' skill and confidence in the use of improvisation as a musical tool, experimenting with first and second study, voice and percussion (the clinical application of improvisation is developed within the "Clinical Practice and Reflection" modules of the programme);
- To cultivate expertise in improvisation (both free and structured) as a central core of the course and learning improvisational approaches used in other musical idioms from a diverse cultural range;
- To enable the students to develop the musical fluency and flexibility to learn, create and apply improvised music appropriate to a range of clinical and cultural contexts;
- To cultivate understanding of group dynamics and relationships as they occur within group improvisation.

## **10. Teaching & Assessment Methodology**

### **Method of teaching delivery:**

#### **Music therapy techniques**

- Tutor-led activities;
- Group discussion of clinical placement material;
- Role-play exploring music therapy situations and techniques;

- Teaching on idiomatic and cultural musical styles of composition and analysis assignments;
- Guidance and discussion on use of reflective learning and self-reflective account.

### **Principal Study / Integrative Performance**

- Playing to and with teacher and fellow students (as appropriate);
- Discussion and exchange with the teacher, listening to music, and observation of the teacher demonstrating;
- Duo or ensemble work with fellow students, personal practice and research;
- Reflecting on performance opportunities (as appropriate);
- Discussing ideas and personal views about music; learning new repertoire and that extends students resources on the instrument and experimenting with methods and techniques for creating music (Experimenting with use of instruments/voice on placement).

### **Keyboard Musicianship**

The practical nature of the work in class allows for feedback from tutor and students alike. This provides mutual support and also enhances the students own aural awareness and the development of heightened listening skills. Each small keyboard group class is carefully structured to the group's ability and students are encouraged to meet the challenges involved in developing new skills within a positive and supportive environment. Work will be set from week to week and the students will be encouraged to assess their own development and understanding. Written material provided by the tutor is freely available, which students are encouraged to keep as a source of information and record of the course as a whole.

### **Group Improvisation**

Group improvisation classes concentrate on creating music for the whole group, sometimes dividing into smaller groups or pairs, with frequent opportunities for feedback analysis, and at periodic points, recording.

Any written musical material required will be provided by the tutors. Students are encouraged to experiment with this within classes, and to build their own file of material for shaping and underpinning improvisation in future work.

### **Assessment:**

#### **Music therapy techniques**

A practical exam consisting of three tests, all unprepared. Students should demonstrate use of their first and/or second studies, piano and voice, as well as other instruments as appropriate, in a flexible and responsive way and appropriately to music therapy practice. A range of typical music therapy instruments will be available for test 3.

1. Individual improvisation of 3-5 mins duration to a given narrative (previously unseen), undertaken on student's choice of first/second study or piano.
2. Diatonic and structured music therapy improvisation with a tutor of 3-5 minutes duration on a given brief (previously unseen), This must be undertaken on piano .Voice may be added ( optional ).
3. Freely improvised music therapy role play with a tutor of 3-5 minutes duration on given brief (previously unseen), undertaken on student's choice of instrument/s and voice, including use of percussion instruments available, as appropriate.

Individually composed original song setting a text of the student's choice to music of 2 ½-4 minutes duration, and a performance of the song by the student.

### **Principal Study / Integrative Performance**

Formative Assessment:

Ongoing informal appraisal with teacher; end of year progress report.

Summative Assessment:

Musicianship examination. A performance lasting 10-12 minutes consisting of 2 or more contrasting pieces, at least one on your first study instrument. Students who have reached a high standard in another instrument / voice may choose to demonstrate their skill in that area. Pieces performed may be either solo, or part of an ensemble.

This examination is taken at the same time as the examination for the Keyboard Musicianship and Improvisation component, and is examined by the same assessment panel.

### **Keyboard Musicianship**

Formative Assessment:

These classes support and inform students' musical input to clinical work and this is assessed through clinical vivas and on placement.

Summative Assessment:

Musicianship examination of approximately 8-10 mins.

There are five items, of which two will have been previously prepared (marked with a \*). In all, they are designed to reflect a summary of the work covered in the course and also to test student's ability to demonstrate, at Masters level, that they are equipped to use a wide range of skills in a flexible and spontaneous way.

1. Provide an introduction accompaniment and postlude to a given melody: previously unseen;

2. Make six or more melodic variations using either a given bass –line (aural) or chord symbols: previously unseen;

3\*. Sing with pianistic accompaniment a song, with or without words, demonstrating facility in one or more modal idioms: this will have been previously prepared and memorized;

4\*. Make a piano piece in a chosen specific 'style'. (Three weeks before the exam students will be given a list of 12 suggested 'openings' from a wide range of idioms from which to complete a piece). Students make their own choice and the piece will be played from memory;

5. Improvising in an idiom chosen by the student and over a pianistic accompaniment, a piece using a 'given' rhythmic fragments (previously unheard).

This examination is taken at the same time as the examination for the Principal Study and Integrative Performance component, and is examined by the same assessment panel.

### Group Improvisation Preparation and Performance

An assessed group improvisation performance (5-7 minutes with in small groups of students to a set brief given on the day of the exam.

An individual reflection on the group process of 500-700 words is also required, to be submitted one week later.

<b>11. Learning Outcomes</b>
On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for description of the skills codes listed below:
A4, A6, A8, A9, A10, A12, A13 B1, B2, B3, B4, B5, B6, B9, B10 C1, C3, C4, C8 D2, D3, D4, D6, D8, D9

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
KIS Type		Contact Hours		
One-to-one class/tutorial		33		
Practical classes/workshops		150		
b) Assessment				
KIS Assessment Component	Detail	KIS code	% Weighting	% Pass Mark
Musicianship exam	Part A: Recital, 10-12 minutes Part B: Keyboard Musicianship, 8 – 10 minutes	KPE	40	50

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
Practical assessment	Music Therapy Techniques Exam incorporating individual improvisation task, (9-15 minutes) Original Song Task score	KPE	40	50
Practical assessment	Group Improvisation Performance, 5 - 7 minutes	KPE	10	50
Written assignment	Individual written reflection 500 – 700 words	KCW	10	50
c) Independent Study Hours		Nominal Hours		
Personal practice/study		317		
d) Total Student Learning Hours for Module		500 hours		

<b>13. Reading &amp; Resources*</b>			
Texts marked * include practical instruction and/or exercises in improvisation relevant to the module. Other texts listed discuss music and improvisation more generally.			
Musical Resources			
Author	Year	Title	Publisher
Baker, F & Wigram, T	2005	Songwriting: Methods and Techniques and Clinical Applications for music therapy clinicians, educators and students	Jessica Kingsley Publishers
Boyd, M	1999	* Bach Chorale Harmonisation/ Bach's Instrumental Counterpoint	Kahn and Averill
Brewer, M	2002	Mike Brewer's warm ups	Faber Music
Bruscia, K	1987	'Sixty-four Clinical Techniques' in: Improvisational Models of Music Therapy	(USA): Charles C Thomas
Bunt, L & Hoskyn, S	2002	* The Handbook of Music Therapy	Routledge
Butterworth, A	1994	* Stylistic Harmony, 2nd edn	Oxford University Press
Campbell, L	1986	Sketching at the Keyboard/ Sketches for Improvisation	Stainer & Bell
Chapman, J	2011	Singing and Teaching Singing	Plural Publishing
Gardstrom, S	2007	* Group Music Therapy Improvisation – essential leadership competencies	Gilsum NH: Barcelona Publishers

### 13. Reading & Resources\*

Texts marked \* include practical instruction and/or exercises in improvisation relevant to the module. Other texts listed discuss music and improvisation more generally.

#### Musical Resources

Author	Year	Title	Publisher
Magee, W (ed)	2013	Music Technology in therapeutic and health settings	Jessica Kingsley Publishers
Moon, J	2006	Learning Journals: a handbook for reflective practice	Routledge
Norton, C	1994	* Essential Guide to Pop Styles	Boosey and Hawkes
Pavlicevic, M	2003	Groups in Music: strategies from music therapy	Jessica Kingsley Publishers
Pilling, D	1950	* Harmonisation of Melodies at the Keyboard (1, 2 & 3)	Forsyth
Richards, T	1999	* Improvising Blues Piano	Schott
Riemenschneider	1941	* The Harmonised Chorales of JS Bach	Chappells
Trevarthen, C & Malloch, S	2009	The Dance of Wellbeing: Defining the Musical Therapeutic Effect in Nordic Journal of Music Therapy, 9(2), pp 3-17	Nordic Journal of Music Therapy
Wade, B	2009	Thinking Musically: experiencing music, expressing culture	Oxford University Press
Wigram, T	2004	* Improvisation: Methods and techniques for music therapy clinicians, educators and students	Jessica Kingsley Publishers
Wosch, T & Wigram, T (eds)	2008	Microanalysis in Music Therapy	Jessica Kingsley Publishers
Supplementary Reading			
Bailey, D	1993	Improvisation: its nature and practice in music	New York: Da Capo Press
Blacking, J	1995	How musical is man?	Washington: University of Washington Press
Brown, S & Pavlicevic, M	1997	Clinical Improvisation in Creative Music Therapy: Musical Aesthetic and the Interpersonal Dimension in Arts In Psychotherapy 23(5) pp 397-405	Arts In Psychotherapy
Cole, W	1997	The Form of Music	ABRSM



### 13. Reading & Resources\*

Texts marked \* include practical instruction and/or exercises in improvisation relevant to the module. Other texts listed discuss music and improvisation more generally.

#### Musical Resources

Author	Year	Title	Publisher
De Backer, J & Julie Sutton (eds)	2014	The Music of Music Therapy: Psychodynamic Music Therapy in Europe	Jessica Kingsley Publishers
Dolan, D	2005	'Back to the future: towards a revival of the lost art of classical improvisation' in The Reflective Conservatoire: ed. Odam & Bannan	Ashgate
Ed. Robbins, C. & Carol Robbins	1998	Healing Heritage: Paul Nordoff exploring the tonal language of music	Gilsum NH: Barcelona Publishers
Green, B	1987	The Inner Game of Music	Macmillan/Pan
Harvey, J	1999	Music and Inspiration	Faber and Faber
Macdonald, R & Wilson, G	2014	Musical Improvisation and Health: A Review in Psychology of Well-Being: Theory, Research and Practice 4(20) Available online at doi:10.1186/s13612-014-0020-9	Psychology of Well-Being: Theory, Research and Practice
Nachmanovitch, S	1990	Free Play: Improvisation in Life and Art	Penguin Putnam Inc.
Nordoff, P & Robbins, C	2007	* Creative Music Therapy (Revised edition)	Gilsum NH: Barcelona
Oldfield, A, Tomlinson, A & Loombe, D (eds)	2015	Flute, Accordion or Clarinet? Using the characteristics of our instruments in music therapy	Jessica Kingsley Publishers
Vella, R	2000	Musical Environments	Currency Press
Wetherick, D	2012	Book Review: Hearing in Time: Psychological Aspects of Musical Meter by Justin London (Oxford: OUP 2004) in British Journal of Music Therapy 26(2) pp31-34	British Journal of Music Therapy
Young, L	2016	Multicultural musical competence in music therapy	Music Therapy Perspectives 34(2)

## 17.4 Personal Awareness

1. Module Title	D1 – Personal Awareness
2. HE Level	7
3. Credit Value	20
4. SITS module code	MTH 4011
5. Location of Delivery	Guildhall School and Partnership Placement
6a. Module Type	Taught, Experiment
6b. Applicable in the year of study	1
7. Module Leader	Ann Sloboda
8. Department	Music Therapy
9. Aims of the Module	

### **Movement, Communication and Self-Awareness**

- Introduction to the importance of body awareness as a tool for self-development through movement, breath and alignment;
- To explore the relationship between body, mind and emotion;
- To support the training of a music therapist by enhancing the understanding of others through the powers of observation, and creating an atmosphere of trust through sensitivity of approach, calm confidence and appropriate support and touch;
- To enable a creative approach to movement and its relationship to music;
- To develop greater self-awareness, enabling freedom of expression and playful engagement;
- To enable increased presence and connection in clinical work and professional contexts;
- To develop vocal skills to present clinical material in an engaged manner.

### **Music Therapy Experiential Group**

- The central aim of this group is to provide students with both a group experience and a personal experience of taking part in an experiential music therapy group over the period of the year's training;
- The group sessions will have both music and words as media for exploration;

- The question students might find themselves reflecting on during the year is: 'what does it mean to be in an experiential group where both music and words are available for communication?';
- Students will be encouraged to relate this group experience to the practice of music therapy and in doing so will gain insight into the different levels of meaning experienced by their patients;
- The context of the group provides a safe place for expression, interaction and reflection;
- The contents of the sessions are confidential and not reported to the team;
- Sessions are facilitated by a music therapist who has no other contact with students outside the sessions.

## **10. Teaching & Assessment Methodology**

### **Method of teaching delivery:**

#### **Movement, Communication and Self-Awareness**

- Specific exercises are found to help align and use the body supportively while playing musical instruments;
- Students are encouraged to observe their own posture, movement habits, rhythms, dynamic qualities and problems and share their observations with the class, as a means to develop self-reflection and awareness;
- Students are asked to use their knowledge to observe their placements, e.g. the client's posture, mode of movement and interaction; this is then shared and discussed in class;
- Role play exercises are used to explore specific situations from both the client and therapist's angle, which are then discussed with an emphasis on sensitivity, appropriate approach and effectiveness;
- This is all done in a supportive and safe space to encourage openness and honesty;
- Vocal and physical drama exercises, ensemble work, games and improvisation are all used to help students develop their communication skills and awareness of how they relate to others.
- Students are encouraged to keep a written journal of their experiences and observations in the movement class, so that they keep a record of what they are learning and their progress. The module tutors do not see this and it is for the student's own benefit;

#### **Experiential Group**

Experiential learning over a 30 week period in a small group conducted by a music therapist. This group will take place weekly for 1.25 hours per week in the first year (30 x 1.25 hours);

## **Commitment to and use of the Group:**

The criteria for 'commitment' and 'use' of the group will be formulated within the group itself by ongoing discussion between group members including the conductor of the group. This will be entered into as part of the group process. Its purpose is to help students to understand and talk about the experience, the meaning and value of group interaction and the dynamics that arise both in a student's personal emotional awareness and that of others in the group.

## **Assessment:**

To achieve a pass from the tutor / group leader would indicate a student has achieved a satisfactory level of engagement and participation in the process of experiential learning;

Students are required to attend these sessions and regular attendance is expected and monitored: 80% attendance is compulsory to achieve a pass in this module, excluding extenuating circumstances with evidence from a third party.

## **Movement, Communication and Self-Awareness**

- In addition, there is ongoing informal assessment of the students in the classes, and any problems or issues are aired with the students at the end of the class and with staff at the staff meetings;
- The reports from these classes are an evaluation of attendance, attitude and application to the classes and an assessment of progress and development with recommendations for continued practice, where appropriate.

## **Experiential Group**

As the content is confidential, students are encouraged to monitor their own progress in the group and their ability to use the experience, and no report is written.

## **Formative Assessment excluding Personal Therapy**

Informal feedback would be given to students and any serious problems in engaging and using the experiential sessions would be raised with a warning that this could lead to a fail at the end of Year 2.

## **Individual Personal Therapy**

These are confidential and content is not reported. However, therapists are required to submit a form confirming the student has attended at least 40 sessions over the 2 years.

## 11. Learning Outcomes

On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:

A6, A7, A8, A9, A12  
B1, B2, B3, B4, B5, B6, B7, B8  
C1, C3, C4, C6, C8  
D3, D4, D5, D8

## 12. Module Pattern

### a) Scheduled Teaching & Learning Hours

KIS Type	Contact Hours
Practical classes/workshops	60

### b) Assessment

KIS Assessment Component	Detail	KIS code	% Weighting	% Pass Mark
Continuous assessment	Movement, Communication and Self-Awareness – assessment of attendance and engagement.	KPE	N/A	Pass/Fail
Written	Self-Reflective Account (1900-2100 words) of Personal and Musical Development	KPE	N/A	Pass/Fail
Continuous assessment	Experiential Group – assessment of attendance and engagement	KPE	N/A	Pass/Fail

### c) Independent Study hours

Personal practice/study	Notional Hours
Library-based study	90
	50

### d) Total Student Learning Hours for Module

200 hours

## 13. Reading and Resources\*

Author	Year	Title	Publisher
Movement and Body Awareness			
Ashley, L	2008	Essential Guide to Dance	Hodder Education
Bertherat, T	1989	The Body has its Reasons	Healing Arts Press
Cameron, J		The Artist's Way	
Feldenkrais, M	1991	Awareness Through Movement	Thorsons/Harper Collins
Gerzabek, U	1999	The Power of Breathing	Marshall
Hartley, L	1995	Wisdom of Body Moving	North Atlantic Books
Laban, R, revised by Ullman, L	2011	The Mastery of Movement	Dance Books
Levete, G	1982	No Handicap to Dance	Human Horizons

<b>13. Reading and Resources*</b>			
Lewis, P	1988	Theoretical Approaches in Dance Movement Therapy	Kendall/Hunt
Moore, C L & Yamamoto, K	1988	Beyond Words' Movement Observation and Analysis	Routledge
Newlove, J & Dalby, J	2003	Laban for All	Nick Hern Books
Tharp, T	2007	The Creative Habit, Learn it and use it for life	Simon and Schuster Paperbacks
<b>Music Therapy Experiential Group</b>			
Behr, H & Hearst, L	2005	Group Analytic Psychotherapy – A Meeting of Minds	J Wiley & Sons
Bion, W	1961	Experiences in Groups	New York: Basic Books
Chazan, R	2001	The Group as Therapist	Jessica Kingsley Publishers
Davies, A & Richards, E	2002	Music Therapy and Group Work: Sound Company	Jessica Kingsley Publishers
Kennard, D et al	2000	A Workbook of Group Analytic Interventions	Jessica Kingsley Publishers
Nitsun, M	1996	The Anti-Group	Routledge
Oakley, C	1999	What is a Group? A New Look at Theory and Practice	Rebus Press
Rose, C	2008	“The Personal Development Group” The Student’s Guide	Karnac Publication

## 17.5 Clinical Practice and Reflection 2

1. Module Title	A2 – Clinical Practice and Reflection 2
2. HE Level	7
3. Credit Value	60
4. SITS module code	MTH 4012
5. Location of Delivery	Guildhall School and Partnership Placement
6a. Module	Clinical Placement/Taught
6b. Applicable in the year of study	2
7. Module Leader	Ann Sloboda
8. Department	Music Therapy

### 9. Aims of the Module

#### Clinical Seminars

To provide a regular contained environment, which will:

- Give support and help with any difficulties experienced on placement and assist students in gaining a fuller understanding of these, and in formulating strategies to address them;
- Provide a forum for the discussion of clinical practice and wider clinical, systemic and institutional issues.

To enable the students:

- To develop greater depth and breadth of clinical practice and understanding through reflective exploration;
- To build on case study presentation skills developed in Year 1 – with emphasis on precision, clinical insight, clarity and timing;
- To use the clinical material presented as a basis for understanding techniques and methods used in music therapy.

#### Clinical Placements

- To provide regular extended practical experience of clinical music therapy during Year 2. The trainee can use their experience gained in Year 1 to take on more responsibility in the clinical setting, undertaking assessments

treatment and being involved in research and audit projects where appropriate;

- To experience different models of work by UK practitioners, and to receive supervision from a music therapist (on or off-site where appropriate);
- To participate in the life of the therapeutic team, taking part in meetings, reviews and assessments, learning to give and receive feedback.

## **10. Teaching & Assessment Methodology**

### **Method of teaching delivery:**

#### **Clinical Seminars**

- Weekly small group seminars regular student presentation of clinical case work (each student presents fortnightly);
- Students receive feedback on casework and give feedback to fellow students, offering mutual support where difficulties are experienced;
- Occasional clinical presentations by tutor;
- In-depth discussion of clinical issues arising from the material presented;
- Developing questions about practice and theory. Some discussion of key reading;
- Further coaching in and development of presentation skills;
- Facilitation of reflective thinking on students' own casework and that of peers;
- Tutors offer regular feedback and guidance, and model ways to reflect on experience;
- Undertaken a placement and learn from the presentations of others in their group.

#### **Clinical Placements**

- Integration into the setting;
- Understanding of multi-disciplinary roles;
- Weekly supervision of clinical and practice, reflecting on, describing and analysing work, and sharing and discussing ideas;
- Writing up of case notes regularly and accurately;
- Observation of the clinical work of their music therapy supervisors and other professionals on placement;
- Taking part in team meetings, ward rounds and other relevant work on placement.



## Assessment:

### Clinical Seminars & Placements

#### Formative Assessment:

- Tutor and fellow students monitor progress in an ongoing way, and sharing feedback is an important aspect of classes;
- Clinical seminars monitor understanding, reflective practice and presentation and analytical skills;
- Weekly supervision on placement informally monitors student development and discusses difficulties;
- Interim and final placement report;
- Interim report on clinical work with one client/group, 1000 -1500 words (to be submitted electronically to the Administrator of the Music Therapy department). Before submitting the interim report to the School, this should be seen and receipt acknowledged by the placement supervisor;
- Internal interim mock viva.

#### Summative Assessment:

- Final report on clinical work with one client/group, 1500-2000 words. Before submitting the final report to the School, this should be seen and receipt acknowledged by the placement supervisor;
- Final Viva Voce in term 6, 1 hour: The clinical vivas also assess the learning outcomes of the placement, as the casework content of the viva is based on clinical work undertaken on placement.

<b>11. Learning Outcomes</b>
On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:
A1, A2, A3, A4, A5, A6, A7, A8, A9, A10, A12, A13 B1, B2, B3, B4, B5, B6, B7, B8, B9, B10 C1, C2, C3, C4, C5, C6, C7, C8 D1, D2, D3, D4, D5, D6, D7, D8, D9

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
KIS Type		Contact Hours		
Lecture		45		
One-to-one class/tutorial		4		
Placement(s)		336		
b) Assessment				
KIS Assessment Component	Detail	KIS code	% Weighting	% Pass Mark
Report	Final report on Clinical Casework, 1500-2000 words.	KCW	30	50
Oral assessment	Final Viva Voce base on Year 2 Clinical Work, 1 hour exam.	KPE	70	50
c) Independent Study hours			Notional Hours	
Personal practice/study			100	
Library-based study			115	
d) Total Student Learning Hours for Module			600 hours.	

<b>13. Reading &amp; Resources*</b>			
Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant.			
Clinical Seminars and Clinical Placements			
Author	Year	Title	Publisher
Aldridge, D (ed)	2000	Music Therapy in Dementia Care	Jessica Kingsley Publishers
Authors – various		British Journal of Music Therapy	British Society for Music Therapy
Bunt, L & Hoskyns, S	2002	The Handbook of Music Therapy	Routledge/Taylor-Francis
Case Bruscia, K (ed)	1991	Studies in Music Therapy	Barcelona Publishers
Casement, P	1985	On Learning from the Patient	Routledge
Compton-Dickinson, S, Odell-Miller, H & Adlam, J (eds)	2012	Forensic Music Therapy	Jessica Kingsley Publishers
Darnley-Smith, R & Patey, H	2003	Music Therapy	Sage
Davies, A & Richards, E	2002	Sound Company: Music Therapy	Jessica Kingsley Publishers

### 13. Reading & Resources\*

Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant. Clinical Seminars and Clinical Placements

		and Group Work	
Davies,A, Richards, E & Barwick, N	2015	Group Music Therapy	Routledge
Fawcus, M (ed)	1997	Children with Learning Difficulties: a collaborative approach to their education and management	Whurr
Gray, A	1994	Introduction to the Therapeutic Frame	Routledge
Higgins, R.	1993	Approaches to Case Study	Jessica Kingsley Publishers
Main, T & , Johns, J (eds)	1989	The Ailment and other psychoanalytic essays	London Free Association Books
Miller, L et al. (eds)	2013	Closely Observed Infants	Bloomsbury
Odell Miller, H & Oldfield, A	2008	Supervision of Music Therapy	Routledge
Pavlicevic, M	1999	Music Therapy: Intimate Notes	Jessica Kingsley Publishers
Stock Whittaker, D	1995	Using Groups to Help People	Routledge
Trevarthen, C et al.	1996	Children with Autism Diagnosis and Interventions to Meet Their Needs	Jessica Kingsley Publishers
Twyford, K & Watson, T	2008	Integrated Team working	Jessica Kingsley Publishers
Wigram, T	2002	Indications in Music Therapy	BJMT (Vol 16 no.1)
Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy	Jessica Kingsley Publishers

### 13. Reading & Resources\*

Students will be recommended chapters and extracts from the following texts. They will not generally be expected to read the complete book. This is not an exclusive list and new and current material may be added as seen relevant.  
Clinical Seminars and Clinical Placements

		in Developmental Disability, Paediatrics and Neurology	
Wigram, T & De Backer, J (eds)	1999	Clinical Applications of Music Therapy in Psychiatry	Jessica Kingsley Publishers
Zinkin, L	1994	Group Analysis 27 (1) All's well that ends well. Or is it?	

## 17.6 Applied Theoretical and Research Studies

<b>1. Module Title</b>	B2 – Applied Theoretical and Research Studies
<b>2. HE Level</b>	7
<b>3. Credit Value</b>	45
<b>4. SITS module code</b>	MTH 4013
<b>5. Location of Delivery</b>	Guildhall
<b>6a. Module Type</b>	Taught/Project
<b>6b. Applicable in the year of study</b>	2
<b>7. Module Leader</b>	Donald Wetherick
<b>8. Department</b>	Music Therapy

### 9. Aims of the Module

Educational Aims:

- To introduce students to the meaning, purpose and value of research;
- To provide students with the knowledge and understanding of how research methodologies can be applied to music therapy research projects;
- To increase awareness of music therapy research literature;
- To introduce students to the main principles and methods of research into music therapy and related disciplines;
- To enable students to recognise the value of critical enquiry and reflection as regards both their own practice and the work of related disciplines;
- To embed a growing knowledge of research methodology into an awareness of different approaches of clinical music therapy practice;
- Further exploration of theoretical models in music therapy practice;
- To provide the students with the knowledge and understanding of the value of in depth, critically analytical literature reviewing;
- To be able to demonstrate the capacity to produce a clear and critically aware literature review on a set topic;
- To provide students with a working knowledge and understanding of the value of research proposals.

## 10. Teaching & Assessment Methodology

### Method of teaching delivery:

- Lectures led by tutors to help develop more knowledge of the key theoretical and research methods and literature;
- Student presentations to offer opportunities to explore research projects and to gain experience of presentation skills;
- Small and large group discussion;
- Practical classroom exercises and homework assignments: for example, on questionnaire design, interview schedules and critical reviews of research papers;
- Small group tutorials on dissertation projects:
  - Individual tutorials to be given by arrangement with supervisors
  - Peer reviewing in class on a regular basis
  - Written feedback to all students on an individual basis, e.g. to offer personal support for dissertation planning and execution;
- Research module supervisors. The module tutors will be responsible for the allocation of individual academic supervisors for this module.

### Assessment:

There are two separate linked assignments for this module:

- Critical Literature Review: Submit term 4, week 10, 3000-3500 words;
- Research Outline (incorporating critical literature review and methodology): Submit term 5, week 2, 4500-5000 words.
- Research Project Report: Submit term 6, week 2, 6000-7000 words OR narrated audio/visual presentation (20 mins) plus critical commentary 2500-3000 words.

### 11. Learning Outcomes

On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:

A1, A2, A3, A4, A5, A6, A7, A9, A10, A11  
B1, B3, B6, B7, B8, B10, B11  
C1, C2, C3, C4, C5, C6, C7  
D1, D2, D3, D4, D7, D8, D9

### 12. Module Pattern

#### a) Scheduled Teaching & Learning Hours

KIS Type	Contact Hours
Lecture	10
Seminar	10

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
One-to-one class/tutorial				10
b) Assessment				
KIS Assessment Component	Detail	KIS code	% Weighting	% Pass Mark
Written assignment	Research Proposal 4500-5000 words.	KCW	40	50
Written assignment	Research Project Report, 6000-7000 words OR Narrated AV submission (20 mins) plus Critical Commentary, 2500-3000 words.	KCW	60	50
c) Independent Study hours			Notional Hours	
Personal practice/study			420	
d) Total student learning hours for module			450	

<b>13. Reading &amp; Resources*</b>			
Core Texts			
Author	Year	Title	Publisher
Andsell,G, Pavlicevic, M & Procter, S	2004	Presenting the Evidence	Nordoff Robbins Music Therapy Centre
Andsell, G & Pavlicevic, M	2000	Beginning Research in the Arts Therapies	Jessica Kingsley Publishers
Barker, C et al	2003	Research Methods in Clinical and Counselling Psychology	J Wiley & Sons
Bell, J	1993	Doing Your Research Project	Open University
Bruscia, K	2005	Standards of Integrity for Qualitative Music Therapy Research in Voices 5(3)	Voices
Denscombe, M	2003	The Good Research Guide for Small-scale Research Projects	Open University
Farrant,C, Pavlicevic, M & Tsiris, G	2011	Towards Ethical Research	Nordoff Robbins
Gillham, B	2001	The Research Interview	Continuum
Gillham, B	2008	Developing a Questionnaire	Continuum

<b>13. Reading &amp; Resources*</b>			
Core Texts			
Murray, R	2002	How to write a thesis	Open University
Reid, K, Flowers, P & Larkin, M	2005	<a href="#">Exploring lived experience in The Psychologist 18(1) pp 20-23</a>	The Psychologist
Robson, C	2015	Real World Research	J Wiley & Sons
Smith, J	2015	Qualitative Psychology: A practical guide to research methods (3 <sup>rd</sup> edition)	Sage
Wheeler, B	2005	Music Therapy Research. Quantitative and Qualitative Perspectives	Barcelona Publishers
Wigram, T, Pedersen, I & Bonde, L	2002	A Comprehensive Guide to Music Therapy - Theory, Clinical Practice, Research and Training	Jessica Kingsley Publishers
Willig, C	2001	Introducing Qualitative Research in Psychology	Open University
Supplementary Texts			
Aldridge, D	1996	Music Therapy Research and Practice in Medicine	Jessica Kingsley Publishers
Aldridge, D (ed)	2005	Case Study Designs in Music Therapy	Jessica Kingsley Publishers
Gilroy, A & Lee, C (eds)	1995	Art and Music: Therapy and Research	Routledge
Langenberg, M, Aigen, K & Frommer, J (eds)	1996	Qualitative Music Therapy Research: Beginning Dialogues	Barcelona Publishers
Moule, P & Hek, G	2011	Making Sense of Research	Sage publication
Northedge, A	2005	The Good Study Guide	Open University
Robarts, J (ed)	2001	Music Therapy Research: Growing Perspective in Theory and Practice. Vol. 1	BSMT publication
Smeijsters, H	2005	Multiple Perspective - A Guide to Qualitative Research in Music Therapy	Barcelona Publishers
Various	2004-2015	Qualitative Inquiries in Music Therapy: a monograph series	<a href="#">Barcelona Publishers</a>
Wosch, T & Wigram, T (eds)	2007	Microanalysis in Music Therapy	Jessica Kingsley



## 17.7 Personal and Professional Awareness

<b>1. Module Title</b>	D2 – Personal and Professional Awareness
<b>2. HE Level</b>	7
<b>3. Credit Value</b>	15
<b>4. SITS module code</b>	MTH 4014
<b>5. Location of Delivery</b>	Guildhall School
<b>6a. Module Type</b>	Taught/Experimental
<b>6b. Applicable in the year of study</b>	2
<b>7. Module Leader</b>	Ann Sloboda
<b>8. Department</b>	Music Therapy

### 9. Aims of the Module

- To equip students with an appropriate repertoire of appropriate concepts and vocabulary to enable them to work effectively in interdisciplinary teams in healthcare and other settings;
- To follow up and expand on:
  - a) the subject matter of the clinical lectures given by visiting specialists
  - b) practical experience on placement
  - c) music-based and clinical classes at the Guildhall School
  - d) further reading;
- To familiarise the students with the professional and ethical requirements of the Health & Care Professions Council;
- To encourage students to question thoughtfully and appropriately and to develop strong communication skills in preparation for work in a multi-disciplinary team;
- To develop understanding and awareness of professional work and responsibilities undertaken by other arts therapists, speech and language therapists and other affiliated professionals;
- To gain an understanding of the ethical issues, including issues regarding equal opportunities, within the music therapy profession;
- To recognise the importance and value of cultural diversity within music therapy settings;
- To integrate the student's work in movement with allied disciplines and their own musical skills;

- The experiential group enables trainees to learn from each other and deepen their interpersonal resources, helping them grow in awareness through the languages of both music and words.

Continued individual personal therapy will further students' capacity to address personal issues that may restrict or impinge on their professional work.

## **10. Teaching & Assessment Methodology**

### **Method of teaching delivery:**

#### **Applied Movement**

- Specific exercises are found to help align and use the body supportively while playing musical instruments;
- Students are encouraged to observe their own posture, movement habits, rhythms, dynamic qualities and problems and share their observations with the class, as a means to develop self-reflection and awareness;
- Students are asked to use their knowledge to observe their placements, e.g. the client's posture, mode of movement and interaction; this is then shared and discussed in class;
- Role play exercises are used to explore specific situations from both the client and therapist's angle, which are then discussed with an emphasis on sensitivity, appropriate approach and effectiveness;
- This is all done in a supportive and safe space to encourage openness and honesty;
- Students are encouraged to apply their knowledge in their clinical work and research, e.g. the client's posture and mode of movement, and share and discuss this in class;
- Emphasis is placed on the integration between music and movement;
- Students are encouraged to keep a journal/record of their development and understanding of the classes and also observations in their clinical practice which they can then bring to the next class to be discussed.

#### **Music Therapy Experiential Group**

Experiential learning in a conducted small group. This group will take place for twenty weeks in the second year (20 x 1 ½ hours).

#### **Professional Practice Seminars**

- Teaching will be undertaken in large groups over 6 sessions during the year and will encourage debate and discussion of current professional issues;
- Visiting lecturers from related disciplines.

## **Music therapy techniques Seminars**

- Taught seminars on advanced music therapy techniques;
- Role plays and discussions of examples from students' own music therapy work;
- Termly group improvisation sessions developing skills taught in year 1.

## **Professional Development Profile / Professional Development Log**

Tutors will give regular guidance on identifying personal learning needs and ways to meet these and record them. There will also be guided discussion and teaching on how this relates to both the assessed Self-Reflective Account and professional requirements for Continuing Professional Development as a qualified practitioner.

### **Assessment:**

#### **Applied Movement**

- There is ongoing informal assessment of students in the classes with time given with the classes to discuss progress and any issues, and these are also aired and discussed in the staff meetings;
- The reports from the movement classes are an evaluation of attendance, attitude and application to the classes and an assessment of progress and development with recommendations for continued practice where appropriate.

#### **Music Therapy Experiential Group**

- As the content is confidential, no regular reports are provided by the facilitator to the staff team. Only if a fail is awarded will a constructive report be provided. Informally, students are encouraged to monitor their own progress in the group and their ability to use the experience;
- In assessing students' the criteria for passing this component of the module will be as follows:
  - a) 80% attendance during the year
  - b) Commitment to and use of the Group

The criteria for 'commitment' and 'use' of the group will be formulated within the group itself by ongoing discussion between group members including the conductor of the group. This will be entered into as part of the group process. Its purpose is to help students to understand and talk about the experience and

- the meaning and value of group interaction
- the dynamics that arise both in a students' personal emotional awareness and that of others in the group.

Open peer discussion can help students develop the capacity to be aware of themselves, as well as their interaction with others. This process anticipates that any student that may be in the category of 'fail' will be aware of this during the course of the year and be able to make the necessary changes in order to both pass and get value from participating.

The final decision to 'pass' or 'fail' will rest with the group conductor, taking into consideration the thinking process that has taken place in the group.

### Professional Practice Seminars

This will be assessed on a pass/fail basis taking into account attendance and contributions to debate and discussion.

### Music therapy techniques

This will be assessed on a pass/fail basis through attendance, participation and a learning diary, but the major assessment of these skills will be demonstrated in the clinical presentation in the Final Viva.

### Professional Development Profile / Professional Development Log

A log of professional learning activities undertaken during the year (no word limit) and a reflective CPD profile of 1700-2000 words.

<b>11. Learning Outcomes</b>
On successful completion of the module students will have achieved various skills and abilities. Please refer to the Programme Specification for descriptions of the skills codes listed below:
A1, A3, A4, A5, A6, A7, A8, A9, A12 B1, B2, B3, B4, B5, B6, B7, B8, B10 C1, C2, C3, C4, C5, C6, C8 D1, D2, D3, D4, D5, D6, D7, D8, D9

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
KIS Type		Contact Hours		
Seminar		54		
Practical classes/workshops		36		
b) Assessment				
KIS Assessment Component	Detail (e.g. component parts, length in time or words)	KIS code	% Weighting	% Pass Mark
Written assignment	Professional Development Profile/Log, 1700-2000 words	KCW	N/A	Pass/Fail
Continuous assessment	Applied Movement – engagement and	KPE	N/A	Pass/Fail

<b>12. Module Pattern</b>				
a) Scheduled Teaching & Learning Hours				
	participation assessed by tutor.			
Continuous assessment	Professional Practice – engagement and participation assessed by tutor.	KPE	N/A	Pass/Fail
Continuous assessment	Music Therapy Techniques - engagement and participation assessed by tutor.	KPE	N/A	Pass/Fail
Continuous assessment	Experiential Group - engagement and participation assessed by tutor.	KPE	N/A	Pass/Fail
c) Independent Study hours			Notional Hours	
Personal practice/study			30	
Library-based study			30	
d) Total Student Learning Hours for Module			150 hours.	

<b>13. Reading &amp; Resources*</b>			
Movement and Body Awareness			
Author	Year	Title	Publisher
Ashley, L	2008	Essential Guide to Dance	Hodder Education
Bertherat, T	1989	The Body has its Reasons	Healing Arts Press
Cameron, J		The Artist's Way	
Feldenkrais, M	1991	Awareness Through Movement	Thorsons/Harper Collins
Gerzabek, U	1999	The Power of Breathing	Marshall
Hartley, L	1995	Wisdom of Body Moving	North Atlantic Books
Laban, R, revised by Ullman, L	2011	The Mastery of Movement	Dance Books
Levete, G	1982	No Handicap to Dance	Human Horizons
Lewis, P	1988	Theoretical Approaches in Dance Movement Therapy	Kendall/Hunt
Moore, C L & Yamamoto, K	1988	Beyond Words' Movement Observation and Analysis	Routledge
Newlove, J & Dalby, J	2003	Laban for All	Nick Hern Books
Tharp, T	2007	The Creative Habit, Learn it and use it for life	Simon and Schuster Paperbacks
Music Therapy Experiential Group			

<b>13. Reading &amp; Resources*</b>			
<b>Movement and Body Awareness</b>			
Behr, H & Hearst, L	2005	Group Analytic Psychotherapy – A Meeting of Minds	J Wiley & Sons
Bion, W	1961	Experiences in Groups	New York: Basic Books
Chazan, R	2001	The Group as Therapist	Jessica Kingsley Publishers
Davies, A & Richards, E	2002	Music Therapy and Group Work: Sound Company	Jessica Kingsley Publishers
Kennard, D et al	2000	A Workbook of Group Analytic Interventions	Jessica Kingsley Publishers
Nitsun, M	1996	The Anti-Group	Routledge
Oakley, C	1999	What is a Group? A New Look at Theory and Practice	Rebus Press
Rose, C	2008	“The Personal Development Group” The Student’s Guide	Karnac Publication
<b>Professional Practice Seminars</b>			
Bond, T	2000	Standards and Ethics for Counselling in Action	Sage
Bunt, L & Hoskyns, S	2000	The Handbook of Music Therapy	Brunner-Routledge
Health and Care Professions Council	Various	Standards of Proficiency (Arts Therapies), Standards of Conduct, Performance and Ethics, Standards of Continuing Professional Development	HCPC
Hills, B, Norman, I & Forster, L	2000	A Study of Burnout and Multidisciplinary Team-working amongst Professional Music Therapists in British Journal of Music Therapy (Vol. 14 (1))	British Journal of Music Therapy
Huffington et al	2004	Working Below the Surface	Karnac
Obholzer, A & Roberts, V J (eds)	1994	The Unconscious at Work: Individual and Organisational Stress in the Human Services	Routledge
Stewart, D	2000	The State of the UK Music Therapy Profession. Personal qualities, working models, support networks and job satisfaction in British Journal of Music Therapy (Vol. 14 (1))	British Journal of Music Therapy

## 18. Assessment Criteria

School-wide postgraduate assessment criteria for levels 7		Technique and knowledge	Performance and/or creative output	Communication and artistic values	Professional protocols
School-wide postgraduate percentage ranges for levels 7 with descriptors	90+	Work displaying genuine mastery and integration of therapeutic/academic insight, technical command and communicative conviction comparable to a world-class professional standard			
	80-89	<p>Exceptional breadth of knowledge and skills that is comprehensive, accurate, relevant and informed by the highest expected level of scholarship.</p> <p>Exceptional understanding and integration of relevant clinical, musical and academic theory and practice.</p> <p>Exceptional knowledge of relevant clinical fields, client groups and their contexts.</p> <p>Exceptional ability to analyse, critique and evaluate complex information appropriately.</p> <p>Exceeds expected outcomes, demonstrating</p>	<p>Exceptional quality, range and flexibility of clinically appropriate musical practice on voice and/or instruments.</p> <p>An exceptional capacity to establish and sustain effective relationships and communication with clients and colleagues, including use of empathy, intuition, and awareness of diversity.</p> <p>Practice demonstrates an exceptional level of engagement with principles and theories of clinical music therapy, including listening and observation skills where appropriate.</p> <p>Performing and/or delivering tasks to an</p>	<p>Exceptional clarity of communication in written, spoken and performative tasks appropriate to different recipients.</p> <p>Exceptionally developed capacity for effective and flexible non-verbal communication, including musical artistry (in performance assessments).</p> <p>Demonstrating reflective and responsive capacity and use of supervision that exceeds expectations.</p> <p>Shows consistently effective and fluent communication within professional relationships and teamwork.</p>	<p>Understanding of regulatory, legal and ethical principles relevant to music therapy practice that exceeds expected professional level.</p> <p>Understanding of the working practices of related professionals that exceeds expected professional level.</p> <p>Understanding of professional boundaries, confidentiality and consent that exceeds expected professional level.</p>

School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
		application of improvisation, music, research and clinical skills. A highly professional level of relevant technical and presentational skills (including spoken, written and IT/AV skills).	exceptionally high standard and to agreed timescales. Demonstrating a level of creativity that exceeds expectations.	Shows exceptional initiative and imagination in managing complex situations.	
	70-79	Excellent breadth of knowledge and skills that is comprehensive, accurate, relevant and informed by a high level of scholarship. Excellent understanding and integration of relevant clinical, musical and academic theory and practice. Excellent knowledge of relevant clinical fields, client groups and their contexts. Excellent ability to analyse, critique and evaluate complex information appropriately.	Excellent quality, range and flexibility of clinically appropriate musical practice on voice and/or instruments. An excellent capacity to establish and sustain effective relationships and communication with clients and colleagues, including use of empathy, intuition, and awareness of diversity. Practice demonstrates an excellent level of engagement with principles and theories of clinical music therapy, including listening and observation skills where appropriate.	Excellent clarity of communication in written, spoken and performative tasks appropriate to different recipients. Excellent capacity for effective and flexible non-verbal communication, including musical artistry (in performance assessments). Demonstrating reflective and responsive capacity and use of supervision to an excellent level. Shows consistently effective and fluent communication within	Shows an excellent understanding of regulatory, legal and ethical principles relevant to music therapy practice. Shows an excellent understanding of the working practices of related professionals. Shows an excellent understanding of professional boundaries, confidentiality and consent.



School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
		Demonstrating excellent application of improvisation, music, research and clinical skills. A professional level of relevant technical and presentational skills (including spoken, written and IT/AV skills).	Performing and/or delivering tasks to an excellent standard and to agreed timescales. Demonstrating a consistently excellent level of creativity.	professional relationships and teamwork. Shows consistently excellent initiative and imagination in managing complex situations.	
	60-69	Demonstrates a breadth of knowledge and skills that is consistent, accurate, relevant and informed by a generally good level of scholarship. Demonstrates good understanding and integration of relevant clinical, musical and academic theory and practice. Shows a good knowledge of relevant clinical fields,	Shows a good quality, range and flexibility of clinically appropriate musical practice on voice and instruments. Demonstrates a consistently good capacity to establish and sustain effective relationships and communication with clients and colleagues, including use of empathy, intuition, and awareness of diversity. Practice demonstrates a good level of engagement	Demonstrates consistently good clarity of communication in written, spoken and performative tasks appropriate for different recipients. A consistently good capacity for effective and flexible non-verbal communication, including musical artistry (in performance assessments). Demonstrates good reflective and responsive	Shows a good understanding of regulatory, legal and ethical principles relevant to music therapy practice. Shows a good understanding of the working practices of related professionals. Demonstrates a good understanding of professional boundaries, confidentiality and consent.

School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
		<p>client groups and their contexts.            Demonstrates a consistent ability to analyse, critique and evaluate complex information appropriately. Demonstrating a good application of improvisation, music, research and clinical skills. Shows consistently good use of relevant technical and presentational skills (including spoken, written and IT/AV skills).</p>	<p>with principles and theories of clinical music therapy, including listening and observation skills where appropriate. Tasks are performed and/or delivered to a consistently good standard and to agreed timescales. Demonstrates a good level of creativity.</p>	<p>capacity and use of supervision. Shows consistently effective communication within professional relationships and teamwork. Shows good use of initiative and imagination in managing complex situations.</p>	
	50-59	<p>A satisfactory breadth of knowledge and skills that is informed by a generally accurate level of scholarship. Generally satisfactory understanding and integration of relevant clinical, musical and academic theory and practice.</p>	<p>Shows a satisfactory quality, range and flexibility of clinically appropriate musical practice on voice and instruments. Demonstrates a consistently satisfactory capacity to establish and sustain effective relationships and communication with clients and colleagues, including</p>	<p>Clarity of communication in written, spoken and performative tasks appropriate for different recipients is at a satisfactory level            A satisfactory capacity for effective and flexible non-verbal communication, including musical artistry (in performance assessments).</p>	<p>Shows a consistently satisfactory understanding of regulatory, legal and ethical principles relevant to music therapy practice. Shows a satisfactory understanding of the working practices of related professionals. Demonstrates a satisfactory understanding</p>

School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
		<p>An adequate knowledge of relevant clinical fields, client groups and their contexts.</p> <p>Generally competent and developing ability to analyse, critique and evaluate complex information appropriately.</p> <p>Demonstrating generally competent application of improvisation, music, research and clinical skills.</p> <p>A basic competence in use of relevant technical and presentational skills (including spoken, written and IT/AV skills).</p>	<p>use of empathy, intuition, and awareness of diversity.</p> <p>Practice demonstrates a satisfactory level of engagement with principles and theories of clinical music therapy, including listening and observation skills where appropriate.</p> <p>Tasks are performed and/or delivered to a satisfactory standard and to agreed timescales.</p> <p>Demonstrates a generally satisfactory level of creativity.</p>	<p>Demonstrates consistently satisfactory reflective and responsive capacity and use of supervision.</p> <p>Shows generally satisfactory communication within professional relationships and teamwork.</p> <p>Shows satisfactory use of initiative and imagination in managing complex situations.</p>	<p>of professional boundaries, confidentiality and consent.</p>
	40-49	<p>Generally inconsistent level of knowledge and skills that is informed by an unreliable level of scholarship.</p> <p>Inconsistent level of understanding and integration of relevant</p>	<p>Shows a generally inconsistent quality, range and flexibility of musical practice on voice and instruments and/or musical practice that is unreliable in its clinical appropriateness.</p>	<p>Clarity of communication in written, spoken and performative tasks is generally inconsistent and/or is not reliably differentiated for different recipients.</p>	<p>Shows limited or unreliable understanding of regulatory, legal and ethical principles relevant to music therapy practice.</p> <p>Shows a limited or unreliable understanding of</p>

School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
		<p>clinical, musical and academic theory and practice.            Unreliable knowledge of relevant clinical fields, client groups and their contexts.            Inconsistent ability to analyse, critique and evaluate complex information appropriately.            Lacks consistency in the application of improvisation, music, research and clinical skills.            Lacks competence and/or coherence in use of relevant technical and presentational skills (including spoken, written and IT/AV skills).</p>	<p>Demonstrates an inconsistent capacity to establish and sustain effective relationships and communication with clients and colleagues; use of empathy, intuition, and awareness of diversity, may be unreliable.            Practice demonstrates an inconsistent level of engagement with principles and theories of clinical music therapy; listening and observation skills (where appropriate) may be lacking or unreliable.            Tasks are not reliably performed and/or delivered to a satisfactory standard and/or to agreed timescales.            Demonstrates an unsatisfactory and/or inconsistent level of creativity.</p>	<p>Capacity for effective and flexible non-verbal communication, including musical artistry, is generally unreliable or lacking (in performance assessments).            Demonstrates generally unreliable or inconsistent reflective and responsive capacities and/or use of supervision.            Shows generally unreliable communication within professional relationships and teamwork.            Use of initiative and imagination in managing complex situations is not reliably or consistently demonstrated.</p>	<p>the working practices of related professionals.            Demonstrates a limited or unreliable understanding of professional boundaries, confidentiality and consent.</p>

School-wide postgraduate assessment criteria for levels 7		<b>Technique and knowledge</b>	<b>Performance and/or creative output</b>	<b>Communication and artistic values</b>	<b>Professional protocols</b>
	0-39	An unsatisfactory level.	An unsatisfactory level.	An unsatisfactory level.	An unsatisfactory level.