



1) Music Therapy as a Related Service Overview

Music therapy is the clinical and evidence-based use of music-cued interventions to accomplish individualized goals. As indicated in a clarification statement provided by the U.S. Department of Education (OSERS, 2000 & 2010) and within the California Code of Regulations (Title 5 section § 3051.21), music therapy can be provided as a related service for students who require it in order to benefit from their educational program. The purpose of music therapy services in the special education setting is to help facilitate functional educational outcomes in IEP goal areas such as academic learning, communication, social skills, motor development, behavior, and daily living skills. The music therapist also assists with the fading of musical cues and generalization of skills to the non-music setting. Coast Music Therapy supports the integration of evidence-based techniques in its programming and recommendations, including Neurologic Music Therapy techniques, Applied Behavior Analysis approaches, and best-practice autism interventions. Music therapy as a related service does not include provision of music education or sound therapy programs.

2) Staff Qualifications

Director, **Michelle Lazar, MA, MT-BC** is a Board Certified Music Therapist and Autism Specialist with a Masters Degree in Special Education and Autism from San Diego State University. Michelle has advanced level training in Applied Behavior Analysis through her graduate studies.

Coast Music Therapy staff have a minimum of a Baccalaureate degree in Music Therapy from an accredited University including 1200 hours of clinical training and Board Certification through the Certification Board for Music Therapists, which is accredited by NCCA; the same governing body for Occupational Therapy, and Board Certified Behavior Analyst certification. In addition, staff are certified Neurologic Music Therapists through Colorado State University.

3) Assessment Procedures & Eligibility Criteria

A music therapy eligibility assessment is conducted to determine whether music therapy as a related service is required in order to accommodate the student's strengths, interests, and learning preferences and make progress in IEP goal areas. Assessment procedures include records review, staff/parent input, observation, and direct trials with IEP-aligned music therapy interventions.

The following criteria are considered when determining the necessity of music therapy as a related service within the IEP:

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

4) Recommendations

When making recommendations, a continuum of options is explored based on the student's individual needs, and in consideration of the least restrictive environment where music-based educational strategies can be integrated. An emphasis is placed on strategies that can be most easily implemented across settings in order to ensure continuity for the student and maximize the opportunities for generalization of skills.



SAMPLE INDICATORS FOR MUSIC THERAPY ASSESSMENT REFERRAL THROUGH THE IEP

Students who show multiple indicators in each category are more likely to be appropriate for consideration of music therapy as a related service. This sheet is intended to be used as a springboard for discussion at IEP meetings before referring a student for assessment. If an evaluation is agreed upon, a Board Certified Music Therapist evaluates the student's responses to music-based cuing of IEP goals in addition to other assessment criteria.

GENERAL NEEDS

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

GOAL AREAS

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

MUSIC RESPONSES

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

