

CONFERENCE REPORT

Where innovation meets evidence: The cutting edge of Neurologic Music Therapy and evidence-based practice in clinical settings

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CONFERENCE DETAILS

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INTRODUCTION

Having been unable to attend any conferences or training in person for around two years, Chiltern Music Therapy provided a much needed face to face, interactive and exciting conference that provided opportunities for in person networking and rich discussion across a range of disciplines. *Where Innovation Meets Evidence* was a well-organised, fully loaded day of ten presentations from a variety of different professionals who have experienced the advantages of Neurologic Music Therapy (NMT) with their clients. Delegates attending the conference comprised of a range of healthcare, therapeutic and legal professionals, all with their own unique perspective when analysing each case study presented.

My personal interest in the conference stems from my work as a music therapist and neurologic music therapist working in a neuropsychiatric setting with clients living with dementia, brain injury and mental health conditions. Also attending the conference was my colleague, Holly Bluck, who is a senior physiotherapist. We have begun some collaborative work with individual clients and were keen to hear more about this way of working from professionals in other or similar settings.

The day began with a digital introduction from Michael Thaut, founder and board member of the International Academy for Neurologic Music Therapy. He reminded us that NMT is evidence-based, endorsed and recognised medically in the US and Canada, and developing greatly throughout the UK. The day consisted of so much information in each presentation that there is not enough scope within this review to construct a detailed account of each one. Therefore, this review will focus on four key themes which emerged throughout the day: Client groups, Collaboration, Innovation meets technology, and Voice of the service user.

CLIENT GROUPS REPRESENTED THROUGH CASE STUDIES

I felt that it was important to look at the day as a whole and consider the client groups that were represented. In doing so, we can begin to consider why there might be more collaborative work happening with particular client groups and re-evaluate the suitability of NMT with a wider client base. The table below gives an overview of the range of clients groups presented in the conference and the positive impact that NMT had in terms of quality of life and functional goals.

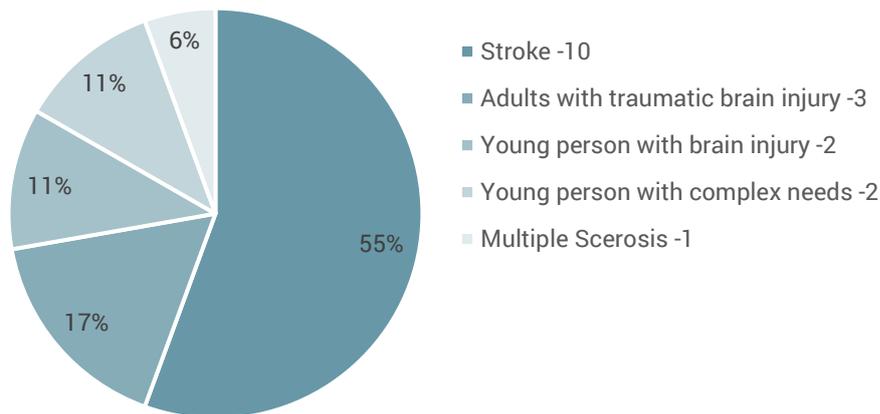


Table 1: Client group case study representation

The data set shows that a larger proportion of the case studies presented were about people who have suffered a stroke. A question that presented itself to me was: Is there more opportunity for working with this client group because the evidence base is larger with high percentage of rehabilitation success rates? And if this is the case, how can the NMT approach be extended to work with a wider client base?

Throughout the day, each professional presented a high evidence base for rehabilitation of patients who have had a stroke and it was highlighted that in order to continue receiving funding to continue NMT rehabilitation work, treatment outcome data base is required.

In my own professional practice, I have worked with many individuals with traumatic brain injury. As such, I felt that this patient group was under-represented, alongside people with organic brain injury. Further case studies in these client groups would have provided a wider discussion base. I also wondered how this client group could be further represented in the future.

COLLABORATION

A collaborative approach across disciplines was clearly evident in all case studies throughout the day. Interestingly, majority of case studies were presented by non-NMT allied health professionals such as occupational therapists, speech and language therapists, physiotherapists and psychologists. They highlighted the principles of NMT in which music drives the change in order to achieve non-musical goals identified using non-musical assessment methods.

Reflective practice identified challenges within the collaborative approach, such as ensuring collaboration rather than parallel working. However, with flexibility and joint voice, there is much scope for expanding breadth of knowledge across disciplines. For example, during joint reporting as part of multi-disciplinary team discussions. The prioritisation of goal setting through the use of Goal Attainment Scaling (GAS; Kiresuk et al., 1994) formulation was also highlighted as part of the collaborative goal setting within a multidisciplinary team.

INNOVATION MEETS TECHNOLOGY

The professionals presented examples of innovative methods that were used to continue NMT work with clients through the pandemic. For most clients, it was not possible to continue with face to face sessions due to the risk of exposure to Covid-19 as well as adhering to restrictive measures at the time. Therefore the NMT service expanded its exploration of technology to reach their clients, as did many services across the nation.

For many people, technology played a vital role during Covid-19 to maintain connection in so many ways. Video calling platforms, iPad apps, pre-recorded videos or tracks and the introduction of the Duet Portal by Chiltern Music Therapy are some of the ways in which technology was used. Remote sessions across video link helped to reduce feelings of isolation. For some families, video sessions provided an opportunity to empower parents/caregivers/siblings to become more involved in the sessions. Family members and carers played a more active role during sessions.

VOICE OF THE SERVICE USER

I feel that this was a really important aspect of representation throughout the day. One client spoke about the value of regaining independence through NMT. Family members of a young client expressed their feelings about the NMT sessions. They described the sessions as bringing joy to the young person and how the sessions gave a sense of closeness to the whole family. Gaining service user feedback through their own voice or from the subjective experience of a carer, provides valuable insight into NMT service delivery and provides anecdotal evidence of the impact of this method.

CONCLUDING THOUGHTS

As the day drew to a close, I was inspired to continue the NMT work I have begun in my current workplace with people living with dementia, brain injury and neuro-degenerative conditions. Having attended the conference with my colleague, we were re-assured that our current collaborative working was reflected in some of the presentations and were also motivated to think about ways in which continued collaboration could be developed across the multi-disciplinary team. I hope that music therapists will continue to work with clients such as those with traumatic brain injury, and develop their practice by incorporating other evidence based approaches such as NMT in their work.

REFERENCES

Kiresuk, T. J., Smith, A., & Cardillo, J. E. (1994). *Goal attainment scaling, applications, theory and measurement*. Psychology Press.