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Survey of Music Therapists' use of Telehealth with Older Adults

Demographic Questions

1. Current age: [dropdown]

   <18 - 90

2. Gender: [dropdown]
   Female
   Male
   Transgender Female
   Transgender Male
   Non-conforming/Non-binary
   Other (please specify) _____

3. How many years have you been a music therapist? [dropdown]

   1 - 60 dropdown

4. In which state do you currently reside? [dropdown]

5. What is the higher level of education you have completed?

   Bachelor's degree

   Master's degree

   Doctoral degree

   Other (please specify) _____

Music Therapy Services via Telehealth

General questions

6. How long have you been providing Telehealth with Older Adults?

   0-6 months

   7-12 months

   13-18 months

   19-24 months

   > 24 months

7. In general, how has your session length changed compared with face-to-face session length?

   shorter

   same

longer

other (please specify) _____

8. Where is the client during the Telehealth sessions? (select all that apply).

at their home

in the home of someone else

at a facility

I do not know

other (please explain)_____

9. Do you plan to continue with Telehealth sessions in the future?

Definitely yes

Probably yes

Might or might not

Probably not

Definitely not

Financial questions

10. How much do you or does your organization charge for a Telehealth group session PER HOUR?

[dropdown]

Free

$1-$50

$51-$75

$76-$100

>$100

I do not know

11. How much do you or does your organization charge for a Telehealth individual session PER

HOUR? [dropdown]

Free

$1-$50

$51-$75

$76-$100

>$100

I do not know

12. How does this rate compare to your typical (face-to-face) session rates? [dropdown]

    less than

    same

    higher

    I do not know

Technology Used by MT questions

13. What technology do you use to implement telehealth sessions with older adults? (select all that apply)

    smartphone/tablet

    laptop computer

    desktop computer

- I use the following with a SMARTPHONE/TABLET for telehealth services (select all that apply)

    built-in microphone

    built-in web-camera

    external microphone

    external web-camera

- I use the following with a LAPTOP COMPUTER for telehealth services (select all that apply)

    built-in microphone

    built-in web-camera

    external microphone

    external web-camera

- I use the following with a DESKTOP COMPUTER for telehealth services (select all that apply)

    built-in microphone

    built-in web-camera

    external microphone

    external web-camera

14. What platform do you typically use? (select all that apply)

    Zoom

    Skype

FaceTime

Doxy.me

GoToMeeting

SimplePractice

TheraNest

other (please specify) _____

15. What factors impact your platform choice? (open-ended)

16. What types of technological glitches do you experience? (select all that apply)

video

audio

other (please specify) _____

17. How frequently do you typically experience technological glitches that impact therapeutic aims?

video

0-3 times per hour session

4-6 times per hour session

7-10 times per hour session

11+ times per hour session

audio

0-3 times per hour session

4-6 times per hour session

7-10 times per hour session

11+ times per hour session

other (please specify) _____

18. How are you connected to the internet? (select all that apply)

WiFi

Hardwired (Ethernet cable)

I do not know

other (please specify) _____

Technology Used by Client questions

19. What technology do your clients typically use for telehealth sessions? (select all that apply)

smartphone/tablet

laptop computer

desktop computer

I do not know

- My clients use the following with a SMARTPHONE/TABLET for telehealth sessions (select all that apply)

built-in microphone

built-in web-camera

external microphone

external web-camera

I do not know

- My clients use the following with a LAPTOP COMPUTER for telehealth sessions (select all that apply)

built-in microphone

built-in web-camera

external microphone

external web-camera

I do not know

- My clients use the following with a DESKTOP COMPUTER for telehealth sessions (select all that apply)

built-in microphone

built-in web-camera

external microphone

external web-camera

I do not know

Clinical Considerations

20. What service delivery formats have you used for the Telehealth sessions with older adults? (select all that apply)

individual client alone in a private space

individual client in a private space with a helper/staff/family member

group of clients in a shared gathering space

virtual group, with clients joining from multiple individual locations

other (please explain)_____

21. Select all of the music therapy interventions you have used with older adults in Telehealth sessions?

Gait Training with Music

Imagery with Music

Instrument Play

Iso-Principle

Life Review with Music/ Music Cued Reminiscence

Living Legacy Project

Movement to Music

Music Listening

Progressive Muscle Relaxation with Music

Sensory Stimulation with Music

Songwriting

Therapeutic Singing

other (please specify) _____

22. Please indicate your experience of using the following music therapy interventions when using Telehealth.

	Works well in telehealth	Does not work well in telehealth
Gait Training with Music		
Imagery with Music		
Instrument Play		
Iso-Principle		
Life Review with Music/ Music Cued Reminiscence		
Living Legacy Project		
Movement to Music		
Music Listening		
Progressive Muscle Relaxation with Music		
Sensory Stimulation with Music		

Songwriting		
Therapeutic Singing		
other (please specify)		

23. Which PHYSICAL/PHYSIOLOGICAL areas are you addressing in telehealth sessions with older adults? (select all that apply)

        auditory perception

        motor skills

        pain (physical)

        physiological symptoms

        range of motion

        relaxation

        sensorimotor skills

        sensory perception

        sensory processing

        strength and endurance

        other (please specify) _____

        NONE

24. Which SOCIALl areas are you addressing in telehealth sessions with older adults? (select all that apply)

        ability to empathize

        family dynamics

        group cohesion and/or a feeling of group membership

        interactive response

        participation/engagement

        sense of self with others

        social skills and interactions

        support systems

        other (please specify) _____

        NONE

25. Which EMOTIONAL areas are you addressing in telehealth sessions with older adults? (select all that apply)

        abuse and trauma

adjustment to life changes or temporary or permanent changes in ability

aesthetic sensitivity

affect, emotion and moods

agitation

aggression

anticipatory grief

anxiety

bereavement

depression

grief and loss

self-esteem

self-motivation

other (please specify) _____

NONE

26. Which COGNITIVE areas are you addressing in telehealth sessions with older adults? (select all
   that apply)

attention (i.e., focused, sustained, selective, alternating, divided)

executive functions (e.g., decision making, problem solving)

impulse control

initiation

memory

neurological and cognitive function

pain (psychological)

on-task behavior

reality orientation

self-awareness and insight

sensory orientation (e.g., maintenance attention, vigilance)

stress management

other (please specify) _____

NONE

27. Which SPEECH/LANGUAGE AND COMMUNICATION areas are you addressing in telehealth
   sessions with older adults? (select all that apply)

enunciation and vocal production

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4   language skills
5   oral motor control
6
7   respiratory function
8   verbal and nonverbal communication
9
10   other (please specify) _____
11   NONE
12
13
14
15
16
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18

28. Which SPIRITUAL areas are you addressing in telehealth sessions with older adults? (select all that apply)

        spirituality

        other (please specify) _____

        NONE

29. Which PERSONAL AUTONOMY, INDEPENDENCE AND WELLNESS areas are you addressing in telehealth sessions with older adults? (select all that apply)

        ability to use music independently for self-care

        activities of daily living

        autonomy

        coping skills

        functional independence

        danger to self or others (e.g., suicidality, self-injurious behavior)

        generalization of skills

        music and other creative responses

        quality of life

        responsibility for self

        wellness

        other (please specify) _____

        NONE

MT Materials

30. What instruments do you (as the music therapist) use for the Telehealth sessions with older adults? (select all that apply)

        guitar

        keyboard

        drums

        autoharp

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electronic instruments

guiro

jingle sticks

maracas

ocean drum

Orff instruments

shaker eggs

tambourine

tone chimes

woodblock

wrist bells

other (please specify) _____

NONE

31. What equipment and props do you (as the music therapist) use for the Telehealth sessions with older adults? (select all that apply)

balloons

balls

canes

CD/MP3 player

smartphone

hats

hoops

parachute

paper plates

scarves

co-oper band

octaband

canopy scarf

other (please specify) _____

NONE

Client Materials

32. Have you provided kits of instruments and/or props to older adult clients to use in Telehealth sessions?

Yes

No

33. What instruments do your clients use for the Telehealth sessions with older adults? (select all that

apply)

guitar

keyboard

drums

autoharp

electronic instruments

guiro

jingle sticks

maracas

ocean drum

Orff instruments

shaker eggs

tambourine

tone chimes

woodblock

wrist bells

other (please specify) _____

NONE

34. What equipment and props do your clients use in Telehealth sessions? (select all that apply)

balloons

balls

canes

CD/MP3 player

smartphone

hats

hoops

parachute

paper plates

scarves

co-oper band

octaband

canopy scarf

other (please specify) _____

NONE

Consent

35. Have you incorporated a separate Telehealth informed consent document with older adults?

Yes

No

36. How have you ensured informed consent of clients when providing Telehealth services with older adults?

Document co-signed by client

Verbal consent

I have not ensured informed consent

I do not know

Other (please specify) _____

Evaluation of Telehealth

37. What are the strengths you find with a Telehealth format when working with older adults? (open-ended)

38. What challenges do you find with a Telehealth format when working with older adults? (select all that apply)

vocal strain

eye strain

longer prep time

lack of confidence

other (please specify) _____

39. How has Telehealth changed or modified the services that you provide with older adults? (open-ended)

Therapeutic Areas of Focus

Therapeutic Areas of Focus Addressed in Telehealth (n = 65)

Area of Focus [a]	n
Quality of life	63
Participation/engagement	61
Affect, emotions and moods	58
Relaxation	57
Anxiety	48
Attention	46
Spirituality	46
Memory	45
Adjustments to life changes or temporary or permanent changes in ability	44
Interactive response	44
Depression	43
Coping skills	42
Musical and other creative responses	42
Social skills and interactions	41
Wellness	40
Support systems	39
Verbal and non-verbal communication	37
Group cohesion and/or feeling of group membership	34
Sense of self with others	33
Agitation	32
Pain (e.g., physical, psychological)	32
Reality orientation	32
Executive functions (e.g., decision making, problem solving)	31
Neurological and cognitive function	31
Ability to use music independently for self-care	30
Stress management	30
Physiological symptoms	26
Grief and loss	25
Self-esteem	25
Self-motivation	25
Self-awareness and insight	24
Respiratory function	23
Anticipatory grief	22
Range of motion	22
Motor skills	21
Family dynamics	20
Sensory orientation (e.g., maintenance attention, vigilance)	20
Autonomy	18
On-task behavior	17
Strength and endurance	17
Initiation	16
Bereavement	15
Enunciation and vocal production	14
Ability to empathize	13
Auditory perception	13
Sensory processing	13
Sensorimotor skills	12
Functional independence	11
Oral motor control	11
Aesthetic sensitivity	10

Area of Focus [a]	n
Activities of daily living	9
Aggression	9
Generalization of skills	9
Language skills	9
Sensory perception	8
Impulse control	7
Responsibility for self	6
Abuse and trauma	1
Danger to self or others (e.g., suicidality, self-injurious behavior)	1
Other [b]	12

[a] CBMT Board Certification Domains (2020, III.A.2); [b] Other = social isolation (7), sensory stimulation (2), spiritual support (2), expression, sense of normality, and terminal agitation.