# **Music Interaction**

Quality Palliative Care in Long Term Care Alliance (QPC-LTC)





## Acknowledgement

This Document was created through research conducted by the Quality Palliative Care in Long Term Care (QPC-LTC) Alliance that includes four long term care homes, 30 researchers and Knowledge brokers and 50 community organizational partners. We would like to thank the managers and staff at Bethammi Nursing Home and Hogarth Riverview Manor for their enthusiasm and commitment to create this palliative care program implementation tool.

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Please copy and share this document. We would appreciate you referencing the source of this work as Music Interaction, Quality Palliative Care in Long Term Care, Version 1, www.palliativealliance.ca.

> For more information regarding the project please visit www.palliativealliance.ca or email our team at palliativealliance@lakeheadu.ca



This Tool Kit was based on the findings in the MSW research project "*Music Students' Experiences of Music Interaction with Residents in Two Northwestern Ontario Long Term Care Homes*".

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The music interaction sessions lasted approximately an hour and took place from mid-September to the end on March at 10:00 am on non-consecutive Fridays. The number of students participating varied from 1 to 12.

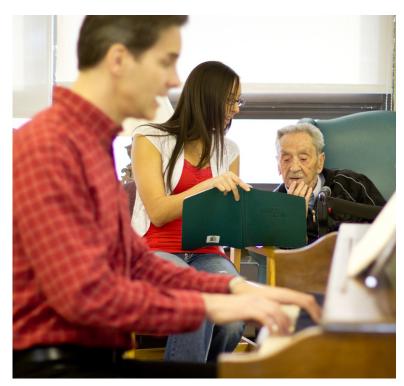
The number of residents participating varied from between 20 to 30 at each session. There were also family caregivers, Personal Support Workers and Therapeutic Recreation staff attending and involved as well.

## **Music Interaction Observation Checklist**

The students reported that they were not sure if they were having any impact on the residents in long-term care (LTC). That was when an observation tool originally created and developed by Clarissa Rentz from Kinney and Rentz (1) was adapted with permission to help guide their observations.

## **PREPARE for Music Interaction**

Please note: This project was done with university music students and the suggestions are based on their experience and recommendations, however this tool kit could be useful to, or used with other generations, students, family members of residents and volunteers.



It must also be stated that this project was in no way trying to evoke or emulate the processes, techniques, or special work done by trained professional music therapists; where the goal(s) would be to provide music therapy in a professional therapeutic capacity.

Music Interaction is about mutuality, interaction, integrating and having the students and the residents using music as a vehicle of "being with".

- Some residents of LTC might not be able to communicate verbally.
- Many residents may have mobility issues or are at risk of falling, therefore they may all be in wheelchairs or use a walking device.
- There is a big difference between a "Retirement" Home and a "Long Term Care" home. Residents in LTC, in many cases, are dependent on others for their basic care and need most of their daily activities of living like eating, bathing, getting dressed assisted or done for them.
- Resident reactions to you or the music may be alarming or distressing at first. Give yourself time to become comfortable with the unexpected. Not all communication is with words.
- There are many ways to communicate. People who may have loved music in their past will likely still love music in their advanced age.
- Don't take non-interactions or non-responses personally. Residents could be feeling tired, confused or un-well. Many things can account for their disinterest.
- If in doubt ask a staff person, for assistance.

## **DURING Music Interaction**

- This is about fun and interaction not performance and perfection.
- Use songbooks as a tool for interaction., turning pages and singing together
- Leave your baggage at the door. Time spent with residents is about them and what you can learn from them.
- Smile genuinely, people can tell if you are not having fun.
- Try something new, an instrumental piece, some contemporary music or bring in some small hand held percussion instruments.
- Speak and sing loudly so residents can hear you.
- Approach residents from the front so they can see you coming.
- Ask before moving residents in wheelchairs if it is okay with them.
- Intersperse and mingle in with the residents.
- Sit at eye level and make eye contact.
- Hold a hand if a resident offers. This too is human contact, communication and interaction.
- Observe and respect safety rules and dress codes of the facility, this is their home.



## **AFTER Music Interaction**

• Make time to debrief the experience, thoroughly talk about it.

What did you like?

What did you find confusing, frustrating shocking or frightening? Do you feel like you learned and grew musically? Explain... What were some of the expressions and reactions from residents that really impressed or surprised you, that really scared you?

What did you think about the LTC environment? Did any of the residents share the gift of a story with you? Did you learn any new ways of communicating with people who are non-verbal communicators?

Was there a certain resident that really affected you? Why? Are you more comfortable going to LTC the more often you go? What would help you feel more comfortable?

What do you think people in the "outside world" know about the people in LTC? What is your perception & perspective on this?

Did you find this a valuable learning experience? What did you learn about older people, about yourself?

- Let the students/volunteers/musicians ask lots of questions. Explain there are no "wrong" questions except the ones that don't get asked.
- Support their need to have other people, LTC staff, gerontologists, and experts in the field, to give feedback and guidance. Invite these people into the classroom/learning space to talk about the world of LTC, older people, aging, dementia, and chronic illness.
- Also consider someone who is a historian, who knows and can explain, "what it was like back in the day". Take a field trip to a museum, try to understand the long-term memories of the residents when they share a story. Why not make this an opportunity to learn some history too!
- Allow and nurture reminiscence amongst the students! Reminiscence is something the residents, if they are able, love to engage in and it is considered a great gift if they tell you their story. The students might appreciate the opportunity to talk and reminisce about their personal experiences with their own grand-parents and great-grandparents.
- These dialogues will help build confidence as the students navigate through these interactions. They also learn that they can trust and get support from each other.

## Quality Palliative Care in Long Term Care Alliance (QPC-LTC)

#### **Music Interaction Observation Checklist**

Observer:			D	ate:	
Observation of:		🗌 Group			
Participant Format:		Circular and	Circular and Interspersed		
Duration and Tin	ne of Day	y:			
Musicians:					
Type Of Music: _					
Instruments used	d:				
Category	Indicat	ors (See Defini	tions for More Ir	formation)	Comments:
1. Movement MACRO Expressions	<ul> <li>Taps fingers, toes, feet, moves body while seated.</li> <li>Sings or hums along with the music.</li> <li>Claps along with the music.</li> <li>Dances or engages others to dance during music.</li> <li>Relaxed body language, smiles, laughs during music interaction</li> </ul>				
<ul> <li>2. Movement MICRO</li> <li>Expression</li> <li>Constant Structure</li> <li>Faint smile, slight change (may take several songs)</li> <li>Constant Structure</li> <li>Moves lips along with the perhaps only to a particul</li> <li>Constant Structure</li> <li>Constant Structure</li></ul>		ngs to demonstra the music, barel ticular song. ahh accompanie d expression. re towards the m idents	te this) y audible, d by smile, usic or		

Adapted with Permission from the Greater Cincinnati Chapter Well-Being Observation Tool Designed and Created by Clarissa Rentz, MSN, ARPN-BC in Kinney and Rentz (2005)

## **Quality Palliative Care in**

## Long Term Care Alliance (QPC-LTC)

	Category	Indicators (See Definitions for More Information)	Comments:
3.	Pleasure Attention Enjoyment	<ul> <li>While engaged in the music activity, the participant has sustained attention, interested in the music.</li> <li>Requires no verbal prompting to pay attention to the music</li> </ul>	
		<ul> <li>Verbalizes a sense of pleasure, "I like this music,"</li> <li>"this feels good"</li> <li>Thanks the musician(s) verbally, shakes hands,</li> </ul>	
		Expresses satisfaction and appreciation "bravo," "delightful," " that was lovely" gives applause	
		<ul> <li>Expresses pride through reminiscence, "that is my favourite song," "they played that at my wedding."</li> <li>Shares a story or a reminiscence with others.</li> </ul>	
4.	Negative	<ul> <li>☐ Is angry during the music interaction.</li> <li>☐ Is agitated (nervous or jumpy) during music</li> </ul>	
	Anger	interaction	
	Agitation Sadness	Verbalizes or body language that shows feeling negative or anxious "I want to leave," (looks towards or moves towards the exit)	
		□ Verbalizes or body language that shows feeling	
		uncomfortable "this is too loud" (hands covering ears) ☐ Verbalizes displeasure "I don't like this kind of music" (shakes head no)	
		□ Verbalizes or has body language of feeling sad	
5.	Social Interaction	Verbally expresses feeling food about being in a group activity, "I feel like my old self," I don't feel so alone"	
		Purposeful and meaningful eye contact	
		<ul> <li>Smiling at other participants</li> <li>When joining or leaving the music, shakes hands, pats back.</li> </ul>	
	When joining or leaving the music chats with others, nods or says hello.		
		<ul> <li>Makes requests for favourite songs.</li> <li>Encourages others to join or engage with the music.</li> </ul>	

## Quality Palliative Care in Long Term Care Alliance (QPC-LTC)

### Music Interaction Observation Checklist Definition and Corresponding Observation(s)

#### Information (first section)

- Participant format, means audience or circular, see tool-kit diagrams
- Delivery means is this a concert or performance (for\* residents) or interactive, sing-a-long, participatory formats (with\* residents)
- Musicians means were the musicians Students, volunteers, jazz ensemble, professional musicians, music therapist(s), trainee(s) etc.
- Type of music means what kind of music: era favourites from songbooks, country, classical, jazz, instrumental, opera
- Instruments used means record and could include: voice, piano, guitar, saxophone, clarinet, flute etc. percussion or hand held percussion given to residents

#### 1. Movement Expression MACRO

- Large easily visible movements
- The individual is engaged and moving while the music is being played, tapping fingers, feet, toes clapping, singing along.
- Reflects enjoyment and pleasure and movement in the music interaction.
- The individual is participating in the experience of music by their expression and physical engagement not just passively being entertained.
- Dances, dancing circle formed.
- Sings or hums along audibly

#### 2. Movement Expression MICRO

- Small barely noticeable movements or changes
- The individual with severe dementia may, over the course of a few songs, begin to have a faint smile or slightly more "crinkle" to their eyes. (it may take several songs to get this engagement)
- The individual may also ever so slightly move or lean closer towards the music or towards the student/musician/volunteer sitting and singing near to them.
- Individual may barely move lips or sing inaudibly to a favourite or particular so
- Repeated observations may be required in order to observe these affects.

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## Quality Palliative Care in Long Term Care Alliance (QPC-LTC)

#### 3. Meanings of Pleasure Attention and Enjoyment

- Participant makes eye contact, eyes following the musicians or a focal point.
- Anticipates that music will soon begin.
- Alert to something about to occur in the room/music space.
- Verbal expression of pleasure while participating in music activity; or
- Non-verbal eyes crinkled, smiles, laughter, relaxed facial expression, nods positively, relaxed body language.
- Expresses gratitude to the musicians, verbally (bravo) or by applause at the end of the music piece.
- Participant is able to maintain attention to the music activity for the duration of a song.
- Participant requires rare prompts to maintain attention, or to re-engage with the music if verbal prompts or cues are required, participant returns easily to the music.
- Participant may engage in conversation with the musician(s) or others about the song during the break between songs but returns to enjoying the music once started again.
- Participant may reminisce with others about a particular song

#### 4. Negative Expressions Anger, Agitation or Sadness

- Seek a staff person's help/guidance for instances where you are not sure if the person is in pain or distressed, most LTC staff know their residents very well and will make sure that people who are not feeling well or who don't particularly like music are not present for the music or are occupied elsewhere.
- Shut down body language, frown on face, angry verbal outbursts; facial grimacing, or brows furrowed; agitation, fidgeting, irritated hand tapping, moving in chair, leg jiggling, wincing, any of these distinctly out of sync with the music, impatient, annoyed, irritated, rapid breathing, eyes wide, or frightened expression.
- Individual wants to leave the music interaction.
- Covers ears with hands.
- Flat affect or weeping quietly; verbalization of feeling sad, eyes drooping, crying, downcast face, sighing, head in hands, eyes/head turned downward and face expressionless. Expresses loss or grief.

#### 5. Social Interaction

- Verbal expression of experiencing a sense of belonging. Enjoys the company of others.
- Included and includes others in the group, participates and encourages participation.
- Attempts to socialize, by extending hand to another person, pat on the shoulder, chats with others (may not have a sustained conversation but makes effort to reach out to others) smiles, offers and receives support from others, helps (or helped) with turning pages in the songbook.
- Sings too or with other participants.
- Encourages a dance circle (sometimes people living with dementia have trouble with balance, check with a staff person first if this is something that is safe for some individuals to engage in)





## Communication

Do prepare students and/or musicians and/or volunteers for the possibility that some residents may not be able to have a long conversation or even communicate verbally at all. However, it is still possible to enjoy music. Music, like many creative arts is a retained ability and promotes well-being even when people can't verbally say so (2-3-4).





"...there was one resident who didn't talk, but every time I tried to talk to her she just kind of would look at me... and then we were singing "5'2" Eyes of Blue" and she just started belting it!"

## Limitations to Mobility

Do prepare for the residents' physical limitations, like not being mobile and mostly in wheelchairs. Prepare them by explaining the differences between a retirement home and LTC and what to expect. Manage expectations and preconceptions about the experience in advance.

"I went in there expecting a retirement home. I was expecting residents walking around like pretty much on their own."

## **Resident Reactions**

Do prepare, for not all communication being verbal, some residents might moan, hum or cry out to participate or react to the music. Some residents with severe dementia might not make any sounds at all. Yet others might only react with a "micro expression" to a favourite song. Some reactions require some explanation and guidance to avoid confusion and distress for all people involved, residents and students.

"...I think it was the first day we got there [LTC] and there was someone wailing away and I'm like oh my gosh! we're killing them...and then later on , some people came to our class and started talking about it ... it was kind of an experience for me, new learning about how they react to our music.."



## Non-Interactions; Do NOT take it Personally



Do let the students and/or volunteers and/or musicians know that resident non-interaction should not be taken personally or as a rejection. (5) There are likely many explanations for non-interactions, the resident is tired, confused or not feeling well, otherwise the experience may be very confusing, discouraging and disheartening for the student. (5)

### **Reaching Out**

Do let students know that resident reaching out with a hand may be an effort to gain contact, as this student noticed:

"the one woman I had, she wouldn't speak at all, she would just offer her hand, and she would just smile at you, she would just beam though, she was so much happier."





Sometimes just "being with" non-verbally can be enough of an interaction to communicate. However, it can take time for students to develop the confidence they need to realize that non-verbal communication is okay too.

## Smile Genuinely... Your Attitude is Infectious

People know when you are having fun. They can feel it, even if they can't remember what they had for breakfast. Many people living with dementia are more "in tune" with their emotional self and with others emotions because much of that "cognitive filtering stuff" is not in the way anymore. They can detect emotional dishonesty with uncanny accuracy (6-7).



## Songbooks are a Tool for Music Interaction



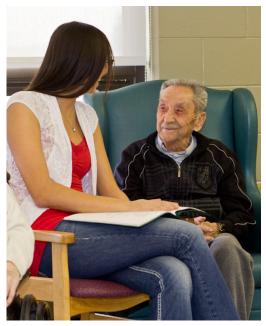
"...you want to have them [books] because sure, we know the tune, but that doesn't mean we know all the words and we were told that we should always have the books and help the residents find the pages so it is easier for them to have a book..."

Do use provided songbooks as a tool for interaction, turning pages between songs and singing the songs together.



#### **Eye Contact**

In this music interaction it was much more beneficial to sit at eye level and make eye contact with the residents to encourage participation. It lets all the people involved in music interaction know that we do indeed "see" you. You are recognized as a human being, not just as an illness, age or condition.





"I think that sitting next to them was probably the best option, because when you're standing there, they are sitting down, so you kind of have that disconnect there, and you can't see, well you can see them, but they can't really see you... I think sitting next to them is probably the best option, sitting one-on-one with them, and sitting at a table with them even would probably be best".

Music Interaction, Version 1

### Format and Arrangement

Although musicians in particular are trained to stand and sing in a choir format for performances, standing was found to be not as engaging and encouraging of participation with the residents. "...standing in a semi-circle is alright if you want to sing a song in a semicircle, and you have one song that you're singing, but at the same time, it also puts up that performer audience barrier too, so that's not very interactive I think."

#### Audience Format/Passive Arrangement



Photo above everyone is facing the piano to be "entertained" in a more passive rather than active arrangement engagement.

6 to 8	M= Musicians/Students							
	R= Residents							
3 or 4	S= Staff							
3 or 4	O=Observer/researcher							
1	P=Piano							
1	Audience Forma	Audience Format			М	М	Μ	
	Musicans/		М	Μ	Ρ	М	Μ	
	Students							
	Perfomer		R	R	R	R	R	R
	Audience	R	R	R	R	R	R	R
	Barrier	S	R	R	0	R	R	R
		R	R	R	R	R	R	R
		R	S	R	R	0	S	R

## **Circular and Interspersed/Active Arrangement**

6 to 8	M= Musicians/St	M= Musicians/Students						
R= Residents								
3 or 4 S= Staff								
3 or 4	O=Observer/rese	arc	her					
1	P=Piano							
	Circular Format	R	S	R	R	R	R	R
3	Interspersed	0	R	R	М	М	R	R
	Musicians/	R	R	R	R	R	S	R
	Students			М	М		R	0
	residents	S	R		Ρ	R	R	R
		М	R	R	R	R	М	R
		R	R	R	М	R	R	R
		R	М	R	R	0	S	R



Photo above is an example of an interactive and active circle arrangement students and residents interspersed.

## **REFRENCES:**

1-Kinney, J., & Rentz, C. (2005). Observed well-being among individuals with dementia: Memories in the Making©, an art program, versus other structured activity. *American Journal of Alzheimer's Disease and Other Dementias, 20* (4), 220-227.

2-Cohen, G. (2006). Research on creativity and aging: The positive impact of the arts on health and illness. *Generations, 30,* (1), 7-15.

3-Hannemann, B. T. (2006). Creativity with dementia patients: Can creativity and art stimulate dementia patients positively? *Gerontology*, *52*(1), 59-65.

4-Cooke, M., Moyle, W., Shum, D., Harrison, S., & Murfield, J. (2010). A randomized controlled trial exploring the effect of music on quality of life and depression in older people with dementia. *Journal of Health Psychology*, *15*(5), 765-776.doi:10.1177/1359105310368188

5-Wheeler, B. L. (2002). Experiences and concerns of students during music therapy practica. *Journal of Music Therapy, 39*(4), 274-304.

6-Cevasco, A. (2010). Effects of the therapist's nonverbal behavior on participation and affect of individuals with Alzheimer's disease during group music therapy sessions. *Journal of Music Therapy*, *47*(3), 282-299.

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