

Guidelines for Proposal for Independent Study Int'l HARP THERAPY Program

Your Independent Study portion of the program consists of 80 hours of training in a supervised area related to hospital/hospice experience, other related health care areas or in music development.

If you are proposing to do your independent study work in the hospital/hospice or other health care area, you will need a supervisor to oversee your development. This supervisor may be a nurse, doctor, caregiver, chaplain, or instructor; and is responsible that you conduct yourself with appropriate behavior in the health care facility and being available to answer questions that may arise. The responsibility of the supervisor is to watch over you, generally speaking, approve your charted time, and provide a summary evaluation for our records. It is also the responsibility of the mentor to point out to you any interactions that may arise that are questionable.

If you are proposing that your Independent Study consist of further music development, have had experience in health care areas and the instructors feel that your time be best spent in music development, then you may engage a teacher for your supervisor. 40 hours of your Independent Study may consist of both lesson study and up to 6 hours per week of practice time. Please keep in mind that the time spent on practice be of diligent and thorough concentration - not merely just playing. In a music school, a whole day's practice (8 hours) may consist of only one phrase of music. Each note is played with attention and the hand becomes conditioned to the amount of strength to execute the phrase to its fullest potential. If you are spending this time learning repertoire, then the hour each day needs to be devoted to focusing on memory retention as well as effective interpretation of the music. Remember that in the work that we are doing, LESS is MORE and not to overplay or clutter the music. It is a time to develop the ear to the simplicity of the single vibrating note. The teacher is responsible for tracking your progress and your final evaluation. (The teacher/mentor may wish to attach a sheet to the form provided for additional comments)

As a practitioner of Harp Therapy and as a graduate of the program, you will understand the necessity of setting these standards to ensure that our practitioners are trained both musically and in sensitivity and knowledge in the area they choose to work in. It is through this mentorship that you will be able to grow and to continue on with your life at home without having to go away to school for this training.

The Int'l Harp Therapy Program has a wonderful collaboration with San Diego Hospice and Planetree Hospitals worldwide. For those students who are able to spend 2 weeks to a month in the San Diego area or in the presence of a Planetree Hospital, and who have been selected by both the IHTP, SDH or the Planetree Hospital, an opportunity of high distinction will be available. As a leading teaching and research Hospice in the World, San Diego Hospice will provide you with a certificate for your training at the facility. A min. of 30 hours at hospice with 1 to 1 patient work is required. This is a unique opportunity for the person who has the flexibility and resources to apply for this prestigious opportunity.

If you have a situation that does not fit in the above categories, please feel free to propose your method of independent study.

You may divide your 80 hours between music development and on-site training.

Goals will be developed by both yourself and the instructors of the program based on your evaluation sheet and observations. Be specific when developing your goals. The preliminary proposal/self-evaluation sheet with instructors comments will be returned to you. From there, you will formulate your outline for your Independent Study and send a copy to the IHTP and keep your copy for a follow-up self-evaluation and comments from your mentor. You will receive a copy of the final evaluation form with your supervisor's notes to include in your portfolio and a copy will be on file with the Program.

To begin the process for Independent Study, fill out the Self-evaluation form with Preliminary Proposal on the reverse side. This will be returned to you with comments for developing your final proposal. The final proposal outline form is in the folder with a time log and forms for journal entries. It is important that you document your experiences, both for yourself and for future work situations. 40 hours of the Independent can be started after Module 1 however, the remainder of your Independent Practicum should take place after you have learned how to find resonant tone and modulate from mode to mode in Module 2.

Your certificate from SD Hospice will be awarded upon successful completion of your modules and portfolio. It is recommended that you attempt to finish the program within two years. It is easier to stay on course, hold a certificate and have the title of graduate without letting time take it away from you. We do realize other circumstances may delay the process. If you have any questions, please do not hesitate to ask.

PROPOSAL for Independent Study

List your goals and objectives, division of time, of place of study.

Name and address of Supervisor/s:

COMMENTS FROM THE INSTRUCTORS (IHTP)

Independent Study Student Summary

Please summarize your experience in terms of goals that you put forth and any other information regarding your experiences.

Signed _____

COMMENTS FROM UWRGTXXUQT

What would you consider to be the practitioner's strengths?

What areas do you feel were greatly improved upon?

Are there any areas you suggest the practitioner be aware of?

Personal Comments:

Signed _____

JOURNAL ENTRY

Date _____

Place _____

Observations, experiences, insights and feelings, frustrations and joys, or knowledge gained.

JOURNAL ENTRY

Date _____

Place _____

Observations, experiences, insights and feelings, frustrations and joys, or knowledge gained.

Self Evaluation for Independent Study Int'l HARP THERAPY Program

Name _____

Address _____

Tel.(Fax or email) _____

SELF-EVALUATION

1. As a result of your time with the International HARP THERAPY Program, which audience of people do you think you would like to reach out to?
2. Which audience of people do you think would be hard for you to be involved with?
3. What do you consider your strengths as a result of this program?
4. What do you consider your weaknesses to be?
5. List health care situations that you have participated in. What did you feel were the pros and cons for yourself in these situations.
6. What do you think about your level of playing at this point and where would you like to see your musical abilities go from here?



*International
Harp Therapy
Program*

**Instructors
& Advisors**

Christina Tourin
Director
Harp Instructor

Judith Hitt, R.N.
Resonant Kinesiology Instructor
Reiki

Dr. Charles Lewis
Medical Director
Inpatient Care Center
San Diego Hospice

Barbara Crowe
Music Therapy

Karen Schneider
Counseling

Dr. Richard Groves
Sacred Art of Living

Jacque Bell
Alexander Technique

William Jackson
Music Therapy

Dr. Richard McQuellon
Psychology

Betty Truitt
Vice President
Videographer

Mathew Simone
Legal Advisor

Joseph Mamer
Financial Advisor

Greetings,

You are being asked by a student of the International Harp Therapy Program to serve as a supervisor during their 40-80 hour practicum. I'd like to take this opportunity to explain what your role will be.

During the time that the Harp Practitioner gains this valuable experience, it is important that there be a person who receives feedback from patients and their families. Many times a patient will indicate to the student that it was a great experience so as not to hurt feelings. It is important for us to know if indeed the music was beneficial. By supervising the students, the supervisor can obtain more objective information. You will also have the opportunity to comment on the interpersonal skills of the student.

We ask that the supervisor spend at least 3-6 sessions with the student, preferably evenly spaced over the 40-80 hours. There is a form that will help you in your assessment of the student's progress. If you are not familiar yourself with areas of question, please simply indicate those areas with N/A. You will receive a gift pack of musical CDs.

In addition, we will ask you to provide the International Harp Therapy Program office with an evaluation that, of course, should be very honest. It is our goal to make sure the students meet certain standards of our program.

You will find that our students work with the energies of sound. Some of their musical procedures may be a bit foreign meaning that you will not always hear actual tunes being played. They are trained to find the resonant tone of individuals and then use an improvisational method of attending a person based on their resonance. At other times, you will hear repertoire being played. You are not required to comment on the process of resonance, only the outcome - did the patient appear to relax, enjoy, or have symptoms alleviated from this process?

Some of our students choose to divide their practicum experience between two areas. Should this be the case, you would supervise them for 3 sessions.

If you have any questions, please contact us.

Sincerely,

Christina Tourin, Director

"A Harp Player for every Hospice and Hospital by 2020"

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COMMENTS FROM SUPERVISOR

What would you consider to be the practitioner's strengths?

What areas do you feel were greatly improved upon?

Are there any areas you suggest the practitioner be aware of?

Personal Comments:

Signed: _____

Supervisor Evaluation

Practitioner _____

Supervisor: Name _____

Address _____

Telephone # _____

Date Supervised: _____

Institution/Setting: _____

	Highly Appropriate	Very Good	Moderately Appropriate	Needs Improvement	N/A
1. Personal Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Personal Courtesy & Deliverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Entry to Patient Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Eye Contact with Patient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Choice of Music employed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Length of duration _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Tempo _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Volume _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Interaction with Patient Met patients needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Improvisational Capabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Resonance identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Matched breathing patterns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Manner of exiting room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____
