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A THESIS

Submitted in partial fulfillment of the requirements

For the degree of Master of Science

in Music Therapy

by

LAUREN ANNE KLIMEK

Molloy College

Rockville Centre, NY

2011

Music for Quality of Life: Huntington Hospital Grant Proposal

Abstract

The following grant proposal is directed towards opening a music therapy

program for the Don Monti Cancer Center at Huntington Hospital. Huntington Hospital

is a small community hospital with twenty-five beds on their oncology unit with one

attending palliative care doctor. In meeting with the palliative doctor, Dr. Joseph Milano,

I learned that there is a great need for music therapy on the oncology unit as well as on

the palliative team. Dr. Milano expressed concern in being the only palliative care doctor

on the unit often limiting the time he gets to spend in caring for each of his patients (J.

Milano, personal communication, December 14, 2010). Dr. Milano and his palliative

team, along with the oncology unit staff, support the writing of this grant as it is evident

from the research that music therapy is an effective and cost efficient non-

pharmacological treatment option for patients diagnosed with cancers. In the following

pages you will find literature and research that support the importance of having a music

therapy program available in the treatment of patients diagnosed with cancer and for the

caregivers and staff who support and take care of them.

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MOLLOY COLLEGE

Music for Quality of Life: Huntington Hospital Grant Proposal

by Lauren Anne Klimek A Master's Thesis Submitted to the Faculty of Molloy College In Partial Fulfillment of the Requirements For the Degree of Master of Science August 2011

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MUSIC FOR QUALITY OF LIFE: HUNTINGTON HOSPITAL GRANT PROPOSAL

A THESIS

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For the degree of Master of Science
in Music Therapy
by
LAUREN ANNE KLIMEK
Molloy College
Rockville Centre, NY
2011

Acknowledgements

I would like to thank my family for supporting and encouraging me throughout my educational endeavors. I would also like to thank all of my professors at Molloy College for being so passionate and thorough in preparing me for a successful career in music therapy. To William, thank you for your patience and understanding among my many crazy moments and for never giving up on me when I almost gave up on myself. And lastly but most importantly, to all my clients and patients who have touched my heart and changed my life... I thank you.

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Chapter One

Introduction

I was admitted into the hospital for a diagnosis of pancreatitis. When my results from the MRI came back and showed that I had one tumor on my neck and two growths in my under arm, my heart sank as I read the doctor's lips, "You have cancer." Through my course of treatment, music therapy has given me the support and comfort I need in coping with my unexpected illness. Music brings me hope in my times of trouble and it allows me to feel my emotions and release them in a supportive and safe environment. As pharmacological drugs, chemotherapy treatments, and radiation cure my cancer; music therapy heals my soul (Patient at Beth Israel Medical Center, 2010).

The town of Huntington is located on the gold coast of the north shore of Long Island, New York. Huntington is known for its beautiful beaches, harbor, village, real estate, and night life. North Shore Long Island Jewish Huntington Hospital is another focal point to this charming town employing 1,980 out of the 195, 289 town residents (United Sates Census, 2000) and provides health care to approximately 125, 611 patients ("Huntington Hospital 2009 Annual Report," 2010). According to Huntington's 2009 Comprehensive Annual Financial Report, Huntington Hospital is ranked number three out of the top ten employers in the town. Huntington Hospital is known for its excellence in patient care and employee satisfaction. It has earned Magnet designation for the second consecutive time and it is the only hospital on Long Island to have earned this honor twice ("Huntington Hospital Annual Report," 2010). According to the American Nurses Credentialing Center, the leading nursing credentialing organization in the United States, the Magnet designation recognizes excellence and professionalism in nursing (American Nurses Credentialing Center, 2010).

The Don Monti Cancer Center of Huntington Hospital serves an important role in the hospital's reputation as it is one of only twenty hospitals in New York State to be

designated as a comprehensive community cancer center by the American College of Surgeons Commission on Cancer ("Huntington Hospital 2009 Annual Report," 2010). The Don Monti Cancer Center is known for providing a full array of medical specialty services and offering "the same state of the art comprehensive cancer care that one would find in a large medical center with the attention to personal detail that is only found at a smaller community hospital" ("Huntington Hospital 2009 Annual Report," 2010). In the past years, the nursing staff of the Don Monti Cancer Center has worked with the hospital's center for complementary care to begin certifications to offer their patients massage therapy and Reiki. These complementary services offer the patients a choice of a non-pharmacological approach to treating their symptoms and side-effects from treatment. The hospital's first survivorship treatment plan for the oncology office practices was created by the cancer center nurses to guide the long term management of women who have completed breast cancer treatment, "making this one of the first steps taken to address the needs of more than eleven million cancer survivors nationwide" ("Huntington Hospital 2009 Annual Report," 2010). The cancer center also supports the American Cancer Society's, "Look Good Feel Better" program at the Women's Health Center. This program conducts group workshops that teach beauty techniques to female cancer patients to help them "combat the appearance-related side effects of cancer treatment" (American Cancer Society, 2010). The Women's Health Center at Huntington Hospital started as the Breast Care Center and now has expanded its services to include not only breast care but also, bone density testing, ante-partum testing and high risk obstetrics, nutritional counseling, and psychosocial counseling.

After reading about Huntington Hospital's amazing cancer care, I have decided I want to be part of their healthcare culture. I was born at Huntington Hospital on February 18, 1984 and have two sisters and one brother who were born there as well. My older sister has given birth to her two daughters there. My grand-mother, grand-father, mother, father and I were all patients there at one point in time and I have bore witness to and believe in the prestigious care this facility has given to my family so intimately and accurately. For that very reason, all my physicians belong to the North Shore Health Care System. My mother is also a nurse on the oncology unit at Huntington Hospital and this has played a huge role in my decision to take the career path I have chosen.

Ever since I was a little girl, I was always singing and dancing. Whether it was on my 'Little Tikes' tape player and microphone or the time my grandmother bought me my first real karaoke machine, I was always the one performing for family and friends on the holidays or at family functions. "Who knew this voice could come out of someone so tiny," my mother would say. At this point my fate was decided that this was a gift that I could not give up on. At the age of ten, I began taking voice lessons and took the lead in every musical from sixth grade to twelfth. I studied vocal performance at The Aaron Copland School of Music at Queens College where I really honed in on classical music and opera. There, I took lead roles in performances and thought for sure that I would pursue my master's degree in performance as I was accepted into the Brooklyn Conservatory for music. It was not until my final weeks at Queens College that I realized I wanted more from my music. Before I became a professional musician, and prior to deciding on a career, I thought someday I would become a doctor. After realizing how grueling that degree would be, I thought maybe nursing would be my path. My mother is

a nurse, my three aunts are nurses and my grand-mother was a nurse, so it must be in my blood! I knew I always wanted to help people and work closely with them. While studying my undergraduate degree, I had heard of music therapy and thought to myself, "Wow! What a concept... to use music in a way that is understood by each of us on so many different levels." This moment of insight occurred when an audience member had come up to me at the end of a concert I sang in with tears in her eyes and said, "Your voice gave me chills, I love that song and I needed this in so many ways you can't understand. Thank you." I later found out from a professor that the woman who came to me had lost her husband to prostate cancer. The song I sang was, "Pie Jesu" from Faure's Requiem and was a piece of music the couple once shared together.

From that moment on I decided to pursue my studies at Molloy College in Rockville Centre, New York where I began my master's degree in music therapy and worked as an intern at the Beth Israel Medical Center in Manhattan, New York. I am grateful to have had the experience at The Louis and Lucille Armstrong Center for Music and Medicine. I worked with various populations and on multiple units such as, oncology, hospice, psychiatric, pediatrics, family medicine, orthopedics, and multiple intensive care units. I also worked closely with the palliative team and took referrals from the doctors and social workers around the hospital. My main internship tracks were oncology, palliative care, pediatrics, and orthopedics. On these units, I attended rounds and was a vital member of the medical team. I worked in a psycho-dynamic humanistic approach and the relationships I formed with my patients were of the utmost importance to me (J.V. Loewy, personal communication, September, 2010). I served my patients in the moment and cared for their immediate needs. Since the hospital is a "revolving

door," I often only got to work with a patient one time. In that one session, I may be helping a patient develop relaxation or pain management techniques, such as deep breathing, music and meditation, music and imagery and music for tension and release (J.V. Loewy, personal communication, September, 2010). Music for tension and release guides the patient in the moment with music reflective of their body tension (J. Mondanaro, personal communication, October, 2010). Once the patient is able to embody the music in relation to their tension, the music therapist then moves the music to a place of resolution hence enabling the patient to let go of their tension. For example, a music therapist may play minor dissonant chords in a fast guitar strum for the building of tension and then release that tension by resolving the minor mode to a slow guitar strum in a major key (J. Mondanaro, personal communication, October, 2010).

On the oncology unit, I had the opportunity to track some of my patients' care as they returned to the hospital for numerous chemotherapy treatments. My work with many of these patients became quite intimate. We processed and reflected emotions or issues that arose during their hospital stay whether it is about their illness or family dynamic. The music serves as a forum for emotional release and expression that is often hard to verbalize (Magill, 2009). According to Magill (2009), "music has the ability to evoke feelings that can be blocked or suppressed," (p.71) and by working through the music many of my patients were able to address their problems and process them within a musical context whether it is actively participating in a musical activity or listening to live music played by the therapist. I have watched patients come and go through the unit and I have witnessed some of my patients not be as fortunate to leave as they take their

last breaths. In my experience, I have seen music touch and change many lives over the course of this internship.

Music Therapy also has positive effects on the caregivers and hospital staff (Murrant, 2000). I have caregivers use music for many of the same reasons my patients do. They also use the music to feel more connected to a loved one as they can share and exchange memories together. When I worked with a couple on the hospice unit, the music therapy session was used for spousal support as the husband reconnected with his wife through familiar songs that are significant to them. He held her hand and cried for the first time since her admittance onto the unit. The music supported him in his need to release those emotions in a safe environment.

Another example of caregiver support is for the hospital staff. Every Friday, at the Beth Israel Medical Center, the music therapy fellow from Spain, Natalia Garrido, and I co-led a staff drum circle on the oncology unit. The Nurse Specialist on the unit was a regular member of our group and always said how she felt more calm and relaxed after she exerts her "frustrations, stress and emotional energy," onto the drum (E. Meszaros, personal communication, January 28, 2010). Perhaps if every staff member just took a few moments to attend a music therapy group, the rate of employee burn-out and stress would decrease. Self-care for caregivers is a vital tool when managing stressful situations and being aware of how we handle these situations is important in being an effective caregiver (Murrant, 2000).

In the following pages you will find the various literature and research supportive of the idea of having a music therapy program in the hospital and especially on an oncology unit and palliative team. This literature speaks to the importance of having

music therapy available to patients and caregivers, as it provides the reader with informative data on music therapy outcome and results in the oncology community.

Chapter Two

Literature Review

Music Therapy and Its Role on the Oncology Unit

The creative process must be explored not as the product of sickness but as representing the highest degree of emotional health, as the expression of normal people in the act of actualizing themselves (May, 1975).

According to the American Music Therapy Association (AMTA) website, "Music

Therapy is an established health service within the healthcare system and uses music to address the physical, psychological, cognitive, and social functioning for patients of all ages" (American Music Therapy Association, "About AMTA", 2010). Many people who

have cancer, or have been treated for cancer, develop symptoms or side effects, such as nausea, emesis, pain, and depression that affect their quality of life (Gimeno, 2010). In New York City there are many hospitals, such as Beth Israel Medical Center and Memorial Sloan Kettering, which have numerous supportive care services, such as contemplative care, holistic wellness approaches, chaplain services and music therapy available to their patients to help them cope with their diagnosis. The role of the music therapist is to provide the patient with a non-pharmacological intervention for pain management. Magill, Coyle, Handzo and Loscalzo (1997) state that while treating cancer patients, "music therapy aims to treat the pain and suffering by working to promote comfort and well-being as it enhances a patient's sense of control" (p. 111).

The following outcome studies deal with the effects of music therapy interventions on symptom control and management of cancer patients. These studies also demonstrate the effects of having a music therapy program on an oncology unit and palliative care team. The literature highlights the positive impact of music therapy on caring for family and staff of the oncology unit, as it supports the importance of integrating music therapy with medicine.

Music Therapy for Cancer and Palliative Care

In 2006, a study on the effects of a music therapy intervention on the quality of life and distress in women diagnosed with metastatic breast cancer examined seventy women who received either three individual music therapy sessions in conjunction with their normal treatment plan or no music therapy and just their treatment plan (Hanser et al., 2006). Patients' symptoms were measured with the Hospital Anxiety and Depression Scale and quality of life with the Functional Assessment of Cancer Therapy. According

to Hanser, et al. (2006) "Visual analog scales, heart rate, and blood pressure were assessed in the music therapy group immediately before and after individual sessions" (p. 116). Results taken immediately after each music therapy session showed significant improvements in reported relaxation, comfort, happiness and heart rate (p=<.0001; p = <.0001; p = <.0001; p = <.0003), as well as a decrease in a heart rate (Hanser, et al., 2006). A research study by Burns (2001) also focused on "alleviating mood disturbances and improving quality of life in cancer patients" by examining a specific music therapy technique called "The Bonny Method of Guided Imagery (GIM)" (p. 51). GIM was developed by Helen Bonny for working with individuals and groups using music, imagery, and altered states of consciousness (Bruscia & Grocke, 2002). By using designated pre-recorded music, GIM is a "holistic process that allows a person to tap into his/her rich inner world of imagery to explore all that (s) he was, is and can be" (Brusica & Grocke, 2002, p.29). During a GIM intervention, the music therapist guides the client or patient on their musical journey while "encouraging the exploration of problems, issues, and strengths as well as hopes, fantasies and desires for the future" (Bruscia & Grocke, 2002, p.29). This method has been used with cancer patients to facilitate coping techniques that are useful throughout the treatment process, "to encourage an active role in treatment, to facilitate an emotional outlet for concerns and to provide an avenue for expressing grief and hope" (Logan, 1998 as cited in Burns, 2001, p. 56). In this study, eight participants were placed in ten weekly GIM sessions, and each participant completed a pre-test, post-test, and a six week follow up questionnaire based on the profile of mood states (POMS) and the quality of life- cancer (QOL-CA) assessments. Individuals who participated in GIM sessions scored better on both mood

scores and quality of life scores at post-test than those participating in the control group. In addition to these scores, patients' mood scores continued to improve even after their GIM sessions were complete. According to Burns (2001), results from this research study indicate that GIM was effective in improving mood and quality of life in these cancer patients (p. 51).

In 2003, Hilliard researched music therapy and its effects on patients diagnosed with terminal cancer. The study evaluated "the effects of music therapy on quality of life, length of life in care, physical status, and relationship of death occurrence to the final music therapy interventions of hospice patients diagnosed with terminal cancer" (Hilliard, 2003, p. 113). There were eighty 'home with hospice care' participants in the study and all were randomly assigned to an experimental group and control group. The experimental group received music therapy treatment in addition to their hospice treatment while the control group received just hospice treatment with no music therapy. Research tools included in this study are the Quality of Life Index-Revised (HQOLI-R), which is a self report that is given on each patient visit; and the Palliative Performance Scale which rates the functional status of the patient. All research subjects received a minimum of two music therapy visits and a repeated measures ANOVA revealed a "significant difference between groups on self-report quality of life scores for visits one and two" (Hilliard, 2003, p. 113). Research subject's quality of life in the experimental group continued to increase following the second music therapy session whereas subjects in the control group lowered after their non-music therapy session with a counselor. For example, "when Palliative Performance Scale scores declined on the third assessment in the experimental group to a mere 22, quality of life remained stable at a 210" (Hilliard,

2003, p.121), hence quality of life continued to increase while physical functioning rapidly declined. Being diagnosed with cancer or any life threatening disease can cause "distress in the form of physical, psychological, financial or spiritual concerns... music therapy can treat one's mind, body and spirit, and it continues to be used as an important component within the interdisciplinary team" (Hilliard, 2003, p.114).

In addition to improving mood and quality of life, music and imagery has also been proven to induce relaxation and reduce nausea and emesis in cancer patients (Gimeno, 2010). A study by Gimeno (2010), investigated "the effects of music and imagery (MI) versus imagery-only (IO) interventions on inducing relaxation and reducing nausea and emesis in patients with cancer undergoing chemotherapy treatment" (p.174). Data was collected by using a regression analysis to compare the frequency of nausea, emesis, and heart rate, as well as the factors contributing to them (Gimeno, 2010). Results from this study and the outcomes from the regression analyses showed that both interventions showed a decrease in the frequency of nausea and emesis, as well as a decrease in post-treatment heart rate; however, self report from patients described music and imagery to be most effective in inducing relaxation.

Live music interventions seemed to be the most effective intervention, as demonstrated in Ferrer's (2007) study by a board-certified music therapist, focusing on decreasing anxiety in patients undergoing chemotherapy treatment. In order to examine the patient's anxiety, pre and posttests consisting of questionnaires were administered to each patient. Recording of the patient's heart rate and blood pressure was also taken before and after each music therapy session. Ferrer's (2007) research design placed half of the research subjects in an experimental group, receiving twenty minutes of familiar

live music during their chemotherapy treatment, while placing the other research subjects in a control group, receiving standard chemotherapy only. Patients who received live music during their chemotherapy treatments reported decreased levels of negative reactions (nausea, anxiety and depression) to their treatment and increased levels of relaxation (Ferrer, 2007). In addition, other patients also reported their chemotherapy treatments to seem shorter as the music served as a positive focal point redirecting the attention away from the procedure and onto the music (Ferrer, 2007; Gimeno, 2010). From these research findings, Ferrer (2007) states "that the experimental group was influenced positively by the music intervention, and subjects' quality of life was improved while undergoing chemotherapy treatment" (Ferrer, 2007, p. 253).

Patients of a comprehensive cancer center were studied in a randomized clinical trial by a board-certified music therapist who examined the effectiveness of a music listening intervention in patients undergoing curative radiation therapy (RT) (Clark et al., 2006). In this study, "emotional distress (anxiety, depression and treatment-related distress) and symptoms (fatigue and pain) were measured at base-line (before they started radiation therapy), mid-treatment, and end of treatment" (Clark et al., 2006, p. 247). In this study, a Hospital Anxiety Scale (HAD) and a single-item distress numeric rating scale was used to assess emotional distress while the Profile of Mood States Scale (POMS) and a pain numeric rating scale evaluated the patient's symptoms (Clark et al., 2006). For the participants in the experimental group "there was a significant correlation between number of times/weeks music was used in relation to the change in treatment-related distress," suggesting that higher doses of music produced greater declines in stress (Clark, et al., 2006, p.261). This study showed that "at baseline, mean depression and

anxiety on the HAD were in the low to moderate range and independent t-tests indicated that control participants reported greater anxiety (M=9.04, SD=5.22) than participants in the experimental group (M=6.15, SD=4.06, p<.05)" (Clark, et al., 2006, p. 257). From these findings we can infer that music therapy holds a positive effect in reducing distress during radiation but further research proving clear differences between intervention and control conditions is needed (Clark, et al., 2006).

Music Therapy for Hospital Staff and Caregivers

During intense feelings of pain, a music therapist can offer soft singing, harmonic tones and lulling rhythms to provide soothing distraction and relaxation (Magill et al., 1997). The music therapist is always assessing the patient's pain level, functional abilities, mood state, coping skills, and music skills (Magill et al., 1997). Part of the assessment may also include the caregivers and family members and how they affect the client, as well as how they handle their own acceptance of the patient's diagnosis (Magill et al., 1997).

Music therapy treatment offers an outlet for patients and their families to express and process their feelings of fear, aggression, confusion, and sadness, many of which are generally associated with the word 'cancer' (Magill, 2001, 2006). The aims of music therapy within oncology treatment are to "facilitate well-being and improve quality of life through music-therapeutic relationships within which people can express, explore, improve communication, and process issues concerning living and dying" (Magill, 2006, p. 79).

Music therapy has been used in integrative oncology and palliative care to meet the immediate and long term needs of patients, families, caregivers, and staff members

(Magill, 2009). The staff is often over worked, leaving no time for them to process their relationships or the loss they may experience with their patients (O'Callaghan & Magill, 2009). Family members are forced to watch their loved ones go through the many physical and emotional changes of cancer, such as hair loss, weight loss, depression and anxiety (to name a few). This often leads to the family becoming stressed as they need to be strong to care for their loved ones. According to Murrant (2000), "most palliative care training for professional caregivers provides clinical and practical skills, but it does not provide adequate preparation for the reality of the emotional demands of this work, nor for the methods of self-care" (p.44). Music therapy can offer respite and support for caregivers, and it allows for emotional release to occur in a supportive and expressive environment.

According to O' Callaghan and Magill, (2009): "Staff witnessing music therapy can experience personally helpful emotions, moods, self-awarenesses [sic], and team work and thus perceive improved patient care" (p. 219). Pre-loss music therapy to bereaved caregivers of advanced cancer patients can assist caregivers during bereavement. In her qualitative study, Magill (2009) examined the long lasting ramifications of pre-loss music therapy for caregivers. Regular music therapy sessions helped these caregivers and their loved ones "transcend their suffering and acquire deepened meaning through their musical connections and reminiscences" (p. 106). Caregivers also reported the comfort they felt in knowing that music therapy helped them in preparing for their loved one's death as music created an open and rich format to share songs, stories, and moments of peace (Magill, 2009). According to Magill (2009), in music therapy, caregivers are given opportunities to bring healing gifts to their loved

ones, such as, joy, comfort, relief from distress, a sense of meaning, aesthetic beauty, and peace" (p. 74). Live music interventions give the patients and their families the opportunity to reminisce, sing, and play songs together (Magill, 2009). When feelings are difficult to express in words, music supports and encourages communication and expression between family members (Magill, 2009). According to Murrant (2000), "self-awareness is a critical starting place for self-care and those who understand how they respond to stress, and what mechanisms sustain them and prevent stress overload, are the most healthy and effective caregivers" (p.44).

In 2010, Choi examined "the effects of music, progressive muscle relaxation (PMR), and music combined with PMR on the reduction of anxiety, fatigue, and improvement of quality of life in caregivers" (p.53). Research participants were placed in control and experimental groups and were tested twice a week for the duration of two weeks. Anxiety and fatigue were assessed at each session using a pre and posttest. Anxiety levels were measured before and after treatment by the Spielberger State Trait Anxiety Inventory (STAI-S); the level of caregiver fatigue was measured by the Fatigue Visual Analogue Scale designed by the researcher; and the Caregiver Quality of Life Index-Cancer (COOLC) assessed the caregiver's quality of life during the first and last session (Choi, 2010). In this study, Choi (2010) "revealed a significant main effect for pretest and post-test on anxiety and fatigue (F (1, 28) = 51.82, p < 0.1)... statistical results indicated a significant difference in quality of life when comparing subjects as a whole across the whole treatment (F (1, 28) = 14.21, p < 0.1)" (p. 53). This study is important to the music therapy research field as it supports and demonstrates that music and relaxation can be an effective coping strategy to support caregivers and perhaps hospital staff.

Cost Effectiveness and Benefits of a Hospital Music Therapy Program

Across America, there are many hospitals and cancer centers devoted to providing patients with an integrative and multi-disciplinary approach to treating their diagnoses and symptoms. According to Sagar (2006), "integrative medicine is an evolving evidence-based specialty that uses complementary therapies in concert with medical treatment to enhance its efficacy, improve symptom control, alleviate patient distress, and reduce suffering" (p. 27). Music therapy on an oncology unit is used in coordination with pharmacological interventions to treat the patient's immediate needs and symptoms while supporting a better quality of life. Integrative medicine strives to provide a more effective and cost efficient care plan for patients and healthcare systems. According to Wesa, Gubili and Cassilexn (2008), "integrative therapies are noninvasive, inexpensive, and useful in controlling symptoms and improving quality of life (p. 343). O'Callaghan and McDermott (2004) add that "palliative medicine, with its emphasis on helping patients and families achieve the best quality of life possible, should be an integral component of cancer care" (p.152 as cited in MacDonald, 1998). Since providing quality patient care under tight fiscal restraints is difficult, "some researchers have noted that music therapy can decrease the use of some analgesics and increase the efficiency and effectiveness of staff interventions" (Romo & Gifford, 2007, p. 353). In medical facilities, music therapists function as members of an interdisciplinary team to establish music therapy sessions with groups or individuals with the intention of supporting patients with "reduction of pain and anxiety, stress management, communication, and emotional expression" (American Music Therapy Association, "About AMTA", 2010). Music therapy appears to be an effective treatment method in providing this high quality

patient care as it addresses all of the four domains of palliative care (physiological, emotional, social and spiritual) identified by Cecily Saunders (Romo & Gifford, 2007 as cited in Deans, 2004; Saunders, 2000) and requires no major financial expense as many pharmacological drugs do.

Conclusion

It is clear from this literature review that music therapy is an effective and cost efficient non-pharmacological treatment option for patients diagnosed with cancer. Music therapy can help alleviate the many symptoms associated with cancer such as, nausea, emesis, pain, anxiety, and depression (Gimeno, 2010). Music therapy can also facilitate communication among patient and family members, as well as staff members (Magill, 2009). Music therapy as integrative medicine can meet the immediate and long term needs of patients and care givers by providing a continuity of care from inpatient to outpatient by reducing suffering while improving symptom control (Magill et al., 1997).

There are many voices who contribute to this literature, but there are, however, still a limited number of quantitative studies in the field of music therapy and cancer (Hilliard, 2003). The majority of the studies are qualitative and anecdotal, and although these studies provide a thorough understanding of music therapy in this treatment milieu, quantitative studies are also needed to provide additional data regarding music's efficacy in this setting. According to Hilliard (2003), "such studies are important as they offer more opportunities for generalizing, and they better guide clinicians in their practice" (p.122). There continues to be an increasing demand in palliative care research from external sources, such as insurance providers, physicians, and hospital administrators, and music therapists will benefit from more quantitative data as they will be more evidence-

based to meet these demands (Hilliard, 2003). Qualitative and quantitative studies are both important in understanding the effects and patient experiences of music therapy. Quantitative research provides us with measurable data needed to be an evidence based practice while qualitative research illustrates the therapeutic relationship and client/patient experiences. It is necessary for both types of research to co-exist in the literature, along with mixed methods studies, such as a study containing both qualitative and quantitative research, in order to understand the efficacy and importance of this unique field of therapy.

It is evident from the literature and research that patients, staff, caregivers, and hospitals have benefited from music therapy in the areas of symptom control and management, self-care, cost efficiency, and quality of care. The grant writer plans on using many of the techniques and approaches, as described above, in her music therapy program. Since there is a wealth of data sources, the grant writer also plans on contributing new, cutting edge research to the music therapy field and to the Huntington Hospital community.

Chapter Three

Method

This grant is being developed after meeting with the oncology team including, the Palliative doctor, Dr. Joseph Milano; the Director of Cancer Services, Gail Probst; the Nurse Manager, Marie Brennan; and the Oncology Social Worker, Susan Degan, in discussing the need for a music therapy program at Huntington Hospital's Don Monti Cancer Center.

My initial idea to write this grant for Huntington Hospital came from seeing a flyer in the hospital advertising music therapy. The flyer happened to be in my father's hospital room after he received spinal fusion surgery and the flyer said, "If interested in music therapy, please ask your nurse." When I asked the nurse about the music therapy service, I later found out that music therapy consisted of a CD player with pre-recorded music that they bring into the patient's room. Huntington Hospital does not currently have a music therapist on staff. When I learned this information I decided to write this grant as it appears Huntington Hospital is aware of the benefits of music for their patients

and interested in providing that service on the units. When it came time to contact someone from the hospital about this grant, my mother provided me with the number for Gail Probst, who is the Clinical Director of the Cancer Center. I met with Mrs. Probst to discuss my thesis and grant plans and in that meeting found myself presenting my proposal plans to the nurse manager, social worker, and palliative doctor. All staff members in this meeting were very supportive of my proposal and said to let them know what they can do to get this program started (Huntington Hospital Oncology Staff, personal communication, December 14, 2010). I was then advised by Gail Probst to contact Judy DiBartolo, the Holistic Nurse and Director of the Wellness Center of Huntington Hospital. In contacting Mrs. DiBartolo, I learned of the various services the center provides for patients, such as Reiki, massage therapy, aroma therapy, and animal assisted therapy. Mrs. DiBartolo invited me to several of the wellness committee team meetings after I complete my thesis to present my proposal to the holistic staff and perhaps do demonstrations. In preparation for my presentation, I am currently putting together an information packet on music therapy and its benefits, a brochure, business cards, and an in-service video/presentation of music therapy sessions from my internship at Beth Israel Medical Center. I was also asked by Gail Probst, the Clinical Director of the Cancer Center, and the Palliative doctor, Joseph Milano, to attend palliative rounds on the first Tuesday of every month when I am ready to present my proposal and become familiar with the hospital staff and procedures. I plan on attending these rounds once my thesis is complete and I find potential granters. The Oncology Social Worker, Susan Degan, would also like me to attend some of her 'survivor therapy groups' and assist with MUSIC FOR QUALITY OF LIFE: HUNTINGTON HOSPITAL GRANT PROPOSAL some music therapy techniques. This attendance will start once I begin in-services for the

medical staff on the unit.

I was also advised by Mrs. Probst to contact Theresa Jacobellis, the Assistant Director of Community Outreach and Research. Mrs. Jacobellis is in charge of philanthropy and grant writing for the hospital. At our initial meeting, Mrs. Probst called Mrs. Jacobellis and told her that she would serve as an advisor in my proposal to the hospital and that I would be contacting her in the weeks to come. I emailed Mrs. Jacobellis and set up a meeting for February 24, 2011 where I will explain my plans to her and she will advise me on what funding foundations would be most likely to financially support my music therapy program.

In preparation for my meeting with Mrs. Jacobellis, I have researched a few foundations on my own. There is the Don Monti Memorial Research Foundation, who the cancer center is named after. The Don Monti Memorial Research Foundation recently remodeled the atrium to the cancer center and gave the center \$300,000 to remodel the hospital unit ("Huntington Hospital 2009 Annual Report," 2010). I also found the Elena Melius Foundation, which is a charitable organization located in Huntington, who has also generously donated to Huntington Hospital in the past ("The Elena Melius Foundation," 2010). Johnson and Johnson's Society for the Arts in Healthcare has long supported music therapy in healthcare and recently awarded the Beth Israel Medical Center's Louis and Lucille Armstrong Center for Music & Medicine \$75,000 for their asthma initiative program (Beth Israel Continuum Health News Letter, 2010). This foundation has also granted funds to various medical facilities around the country supporting the need for creative arts in patient healthcare.

After meeting with Mrs. Jacobellis to discuss this proposal, I am confident that I will have a better understanding and idea regarding what foundations would be the best options to pursue for this music therapy program. My ultimate goal is to propose this music therapy program to the hospital and be hired as staff. If my proposal is denied by the hospital, I am aware that I will need to find other funding, such as the ones listed above to create this program. I will also use the 'Foundation Center' at the Huntington Public Library to advance my knowledge about the United States philanthropy and organizations that would perhaps support Huntington Hospital's music therapy program.

Once I have decided who the target granters will be, I will write up a letter of inquiry and contact the necessary people in charge of the foundations. In this letter of inquiry I will present my proposal, discuss music therapy, and the need for this service at Huntington Hospital. I will also include my brochure and business card to ensure complete explanation of the music therapy program and its goals and potential outcomes.

The music therapy program will employ similar services described in the literature review and provide patients with a continuity of care from inpatient to outpatient. The music therapist will assess and evaluate music therapy services, as well as conduct research with approval from the hospital's Institutional Review Board to provide funders with quantitative and qualitative efficacy on music therapy in the treatment of cancer patients. If this program gets funded, the music therapist will also initiate a music therapy education contract with the hospital and Molloy College to ensure a placement for students and interns to train and study. Since Huntington Hospital already contracts with Molloy College's nursing program, I believe that the addition of

MUSIC FOR QUALITY OF LIFE: HUNTINGTON HOSPITAL GRANT PROPOSAL this music therapy training program will someday be an excellent placement for future

music therapists, as Huntington Hospital is a teaching hospital.

Chapter Four

Results

My Grant Writing Process

After my meeting on February 24, 2011, with the Don Monti Cancer Center director, Gail Probst, I was advised to look for funding for the proposed music therapy program through private and national foundations, as Huntington Hospital was unable to support a music therapy program and a music therapist salary at this time. I made an appointment with Huntington Hospital's grant writer, Theresa Jacobellis, to discuss the foundations I had researched. In doing my initial search, I found, the Johnson and Johnson Society for the Arts in Healthcare, the Elena Melius Foundation, and the Don Monti Memorial Research Foundation. When I brought these foundations to my meeting with Mrs. Jacobellis, I was told that I could not approach the Elena Melius Foundation or the Don Monti Memorial Research Foundation, as they were currently distributing grant money to the hospital and cancer center. I did not know that I could not use these foundations if they were already in contract with the hospital and in learning this

information, it made me more vigilant and discriminating in my future foundation searches.

In order to find appropriate foundations to support the proposed music therapy program, I used various search tool engines, such as foundationcenter.org, guidestar.org, the National Center for Charitable Statistics (nccs.org), and google.com. Once I found potential foundations, I researched their mission statements and if the proposed music therapy program matched their fields of interest. I also looked to see if they supported hospital organizations and what those organizations were. The foundations that could potentially be interested in funding the proposed music therapy program were then put onto a "grant tracker" chart (J. Carpente, personal communication, June 30, 2011) so I could list each foundation with their contact information, and how to initially approach them with a proposal. After formulating this chart it was now time to develop inquiry letters for each chosen foundation and mail them off to the director or contact person at the grant funding office.

The process of writing the inquiry letters was literally a lifting of information from my literature review and research of Huntington Hospital. The most challenging part about writing the inquiry letters was making sure that I was putting in the pertinent information in order to grab the reader's attention since the first few sentences are usually what determine whether the grant reader will continue reading. Standing out from the other competitors is a tall order, and it is important to "sell" one's idea, or in this case, program, as many foundations will only consider a grant proposal based upon one's inquiry letter.

After formatting and writing my inquiry letters, I sought the expertise of the Molloy College grant writer, Dr. Sherry Radowitz, who helped edit my writing. My inquiry letters came to be a full two pages, but Dr. Radowitz assured me that this was fine. I also used the foundation center website and compared my writing and length with award winning grant letters. In doing this, I found that many grant winners also had two-page letters. Mrs. Radowitz recommended wording and formatting that she felt best contributed to the overall appearance of the document, and I used her suggestions as she almost always wins grant awards for the college. My next step was to address these letters to my chosen foundations: the Johnson and Johnson Society for the Arts in Healthcare, the United Breast Cancer Foundation, the Balemian Family Foundation, the

After addressing my inquiry letters, I started to fill out grant applications that were available to me over the internet. The two grant applications that I found were the United Breast Cancer Foundation and the NY/NJ common grant application form. The Society for the Arts in Healthcare grant application is something I will pursue in the future as their application becomes available in September. All of the private family foundations require an initial letter of inquiry before inviting one to submit a proposal. I decided to include the NY/NJ common grant application form, as it is possible that some of the private family foundations use that same form. In filling out the applications, I used my same resources as in writing my inquiry letters, which were my literature review and research about Huntington Hospital. I also attended a web seminar offered by Morgan Giddings, who was a professor of science at the University of North Carolina and is now a top researcher in biological sciences under her own grant funded research

program. Mrs. Giddings' web seminar was very beneficial in giving me some guidance on grant writing and making my proposal have, "mass transformational value." Giddings (2011) states that: "the one core component to grant writing is mass transformational value, meaning that your idea needs to be innovative and change someone's life for the better" (Giddings, Web Seminar, 2011). In following Mrs. Giddings grant methods, I tried to promote the proposed music therapy program as best I could, stressing the positive transformation music therapy can have on the patients, families, and staff of an oncology unit. Mrs. Giddings also reported that the stimulus funding is worn out, and it is making funding very difficult (2011). With that being said, it was very important for me to possess "mass transformational value" in my grant writing, so I would stand out from the competition.

In addition to my program description, the grant applications also asked for some of the hospitals' financial information of which most can be found on their websites under their annual reports. The grant application also asked how much funds the grant writer was asking for, and I came up with the total of \$63,775.06.

The proposed music therapy budget total is based on the startup cost needed to hire a part-time music therapist, buy instruments and equipment, and cover the hospital overhead. I determined this cost by breaking down the therapist's typical work day and responsibilities, necessary instruments, and the hospital overhead at 15% of total operating expenses. In order to find out the hospital overhead, I e-mailed the Huntington Hospital grant writer, Theresa Jacobellis. She informed me of the percentage, which remains the same regardless of a full-time or part-time position, as this percentage covers the overall hospital costs of rent, administration, utilities, and insurance. To determine

the cost of instruments, I used the 2010-2011 West Music catalog, as well as Samash.com and amazon.com. When looking for a lap-top computer and computer software, I used Bestbuy.com, as they appeared to have the best prices and warrantee deals. The music therapist salary is based on how I see myself spending a typical day on the hospital unit as the director of the proposed program. I decided that twenty hours a week at \$60 an hour, for approximately six to seven hours, three days a week, would suffice for the clinical and administrative work it takes to run a successful music therapy program for forty-five weeks out of the year. A typical day would include hospital rounds; staff meetings; prep time for sessions; six, thirty to forty-five-minute, individual sessions (depending on the patient's needs); one, one-hour group session; and two hours a day dedicated to taking progress notes, doing assessments, and sorting the necessary documentation involved in running a grant funded program.

The Steps to Grant Writing

To better understand the grant writing process, I have broken it down into the following steps:

Step 1: Identifying an organization that needs services. One needs to find an organization or facility that does not have music therapy services. Once a facility is found he/she will have to show the need for music therapy and prove how the facility will benefit from these services, such as being able to provide better quality of care and patient satisfaction.

Step 2: Establishing a relationship. Contact need to be made with the facility or organization's director. After the initial introduction, a meeting should be set up where the grant writer will go in prepared with information and research on why music therapy

is an important asset to their facility and patient population. It would be beneficial to know the organization's mission statement and tie that into what the grant writer has to offer their establishment, in order to represent them in the proposed program. It is very important to make good connections throughout the grant writing process, as the better the relationship, the better the one has of being supported. Once the facility accepts the proposal to start a program, the grant writer will now be able to affiliate him/herself with a "501(c) 3 not-for-profit organization," to apply for grants. Only "501 (c) 3 not-for-profit organizations" can apply for grants because foundations and other funding sources solely distribute grants to tax exempt organizations.

Step 3: Researching grant opportunities. Once the grant writer becomes affiliated with his/her organization, he/she can go ahead and start researching potential funders. There are numerous search engines designed for this purpose. I chose to use the foundationcenter.org, and guidestar.org. The foundationcenter.org is a more thorough search as they will inform the grant writer if the foundation is still running and accepting grants and what their guidelines are. The foundation center will also show the grant writer who the foundations have awarded grants to in the past only if that foundation chooses to make that information public. One can also use community foundation searches, as there are many private family organizations who give generously to 'causes' they believe in. I chose to use the National Center for Charitable Statistics, at necs.org, to search for private family foundations in the town of Huntington because I know it is a wealthy area and that some of these private foundations have supported Huntington Hospital in the past. To access the NCCS information, all the grant writer needs to do is type in the city or town in which he/she would like to find organizations and the website

will provide a thorough list of private organizations located in the target area as well as their vicinities. In addition to these search tools, I also used google.com and found that to be helpful in finding national grant opportunities; however, all of this information is available at the foundationcenter.org. The above mentioned search engines are paramount in finding information on grants. I find it is also important to use the resources of the organization one is affiliated with, such as their grant writers, as they have the knowledge and expertise in finding appropriate foundations. It should be noted that if the organization is already being funded by foundations the grant writer is considering, then the grant writer cannot use them or even approach them for that matter.

Step 4: Meeting qualifications. As the grant writer continues to research foundations, he/she needs to make sure that their fields of interest match his/her program's description. If this information is not available, the grant writer can call the foundation's director or grant officer, if they allow phone calls. I found it helpful to develop a "grant tracker chart" (J. Carpente, personal communication, June 30, 2011) to help organize the foundations by listing their name, contact, guidelines, and what they fund (see sample in APPENDIX A). Not all of the foundations researched will be running or they may pre-select who they want to support. With the "grant tracker chart" the grant writer can keep tabs on the progress and status of his/her selected foundations.

Step 5: Writing letters of inquiry. Inquiry letters are a must when approaching any foundation. Most of the foundations require them as the first step in the application process, so it is important to make the letters as professional and unique as possible, as these letters are the foundation's first impression of the grant writer and his/her proposed program. The inquiry letters are approximately one to two pages, but should never

exceed two. The letters should look as professional as possible as their images represent the proposed program for which the grant writer is seeking funding. Inquiry letters should have a business letterhead and include citations, especially if one is citing from other sources. If the grant writer does not have a business name, he/she may want to create one, as this is more professional. In the first paragraph of the letter, the grant writer should state his/her purpose and what he/she is asking for. The rest of the letter should flow in the following order: the goal of the proposed program, why it is important to the specific population for whom the grant is intended, what is the need for the proposed program, and how the program will effect others and the community for the better. After giving all of the formal information, it is important to intertwine the program's mission statement with that of the funder. It is also beneficial to perhaps name other organizations this foundation supports or supported in the past and how those organization's programs can be regenerated in a new, deserving facility. In order to make sure the letter is good quality, the grant writer can use the foundationcenter.org to compare his/her letter with award winning recipients (see samples in APPENDIX B).

Step 6: Writing a proposal. Once the grant writer's letters are mailed, hopefully he/she will be invited by foundations to send in a proposal. The proposal process can vary from foundation to foundation, as some offer their applications on-line while others send them by mail. Either way it is good practice to complete the NY/NJ common grant application form, as some foundations use it as their application. This form is easily accessible by using google.com and typing in "NY/NJ grant application." At this point in the grant writing process, one should already have a nice compilation of research and a description of the organization's proposed program. With all of this information, the

grant writer is now ready to start filling out the grant application. Many foundations would like to know financial information about the organization that is requesting funds. This information can be found in the organization's annual report or through the director of the organization (see samples in APPENDIX C).

Step 7: Budgeting the program. Every foundation wants to know how much funding is needed for the program and how the organization arrived at this figure. In order to produce this information, it is important for the grant writer to develop a detailed budget and to defend the need for the funds. By using Microsoft Excel, one can formulate a professional spreadsheet, including the total operating expenses with line items and costs. The proposed program budget should include the music therapist's salary, instruments, equipment, and hospital overhead. The cost of overhead can be determined by the grant writer's organization. This overhead generally covers the cost of rent, utilities, administration, and insurance. Along with a budget, a detailed description is needed of how the organization will operate if the funds are granted. In my program description, I decided to break down my typical work day and the duties I would perform in operating a successful music therapy program (see sample in APPENDIX F).

Step 8: Submitting the grant application. Once the applications are completed with all of the requested information, it is time to send them off and wait to hear feedback. It may also be a good idea to call the grant officers or grant offices, to make sure that they received the proposal.

Conclusion

As one can see, there are many steps to grant writing. It is a long and intensive process that takes a lot of time and patience. The majority of the work, which involves

researching numerous foundations, is done on the Internet. There is definitely an art to grant writing, but once the grant writer has become established, there are endless opportunities to get support and funding for his/her organization.

Chapter Five

Discussion

The process of grant writing is an ongoing one, as the grant writer is continuously researching new funding opportunities that will help support their program for years to come. In doing my own research and seeking out sources from Huntington Hospital, Molloy College, and a web seminar by Morgan Giddings, I learned that the 'grant game' has changed over the past few years due to the current economy and the immense competition from other grant writers applying for the same foundations. With that being said, I learned that it is important for the grant writer's writing to be unique and powerful. If one wants funding, he/she needs to stand out from everyone else and as stated by Morgan Giddings (2011), "your grant needs to have mass transformational value" ("Why you need to get MTV," 2011). I found it difficult to find this "mass transformational value" in my grant writing as there is so much information that needs to be said in a brief yet innovative statement. This is challenging because foundations receive thousands of proposals every year and many grant officers only read the first few paragraphs, before deciding if your proposal is something their foundation wants to consider. The web seminar was helpful in giving me advice and guidelines to grant writing; however I think it would have been more beneficial for me to have taken a grant writing course.

The easiest part to this grant writing process was making a connection to the cancer center at Huntington Hospital, as my mother was a registered nurse on the unit. This is a very important aspect to the grant writing process because one needs to be affiliated with a "501 (c) 3 not-for-profit organization" to apply for grants, hence making this affiliation the back bone and support needed to pursue foundations for funding. It was helpful for me to stay in contact with my resources at Huntington Hospital, as I did get a lot of support and guidance from their grant writers. Building strong relationships within the organization is paramount and should be one of the grant writer's top priorities. In my case, I made connections with the cancer center early on by meeting with the necessary people who I knew would support me. I always stayed in touch with these people throughout the past nine months and was very gracious to them for helping me. My determination to make the proposed program a reality was always evident in my demeanor and communications to the cancer center director, Gail Probst, and it was because of this that other resources within the hospital opened up for me, such as having the ability to meet with Huntington Hospital's grant writer. Although I did receive good information and support from the cancer center director and Huntington Hospital's grant writer, there were times when I felt like I was competing for funding and was careful to not share too much information with her because of this. I also felt as if the cancer center director, Gail Probst, was more interested in the proposed music therapy program during the beginning stages of my grant proposal but became more distant throughout the process. Mrs. Probst made a comment to me that, "music therapy would be something nice to have but it is not a must have" (G. Probst, personal communication, April 25, 2011). This comment discouraged me in many ways but also inspired me to work harder

on finding potential foundations to support this program and prove to her that music therapy is a powerful asset in the cancer patient's treatment.

The actual writing of this grant was daunting but manageable. Again, it would have been more helpful to have taken a grant writing course but I was able to use various resources along the way. In addition to these resources, I also had the opportunity to sit down with a retired financial advisor, Frank Folk, who helped me understand the logistics in putting together my proposed budget. Originally, my proposed music therapy program was written for a full-time position at forty hours per week. With this full-time position, my budget became quite large and I needed guidance in figuring out fringe benefit costs. This is where the financial advisor, Frank Folk, advised me with the percentages of Medicare, social security, and insurance. After bringing these costs to a meeting with my thesis committee, Dr. Suzanne Sorel and Dr. John Carpente, I was advised that perhaps a part-time music therapy program would have a better chance at being funded by a foundation, as it would be half the cost. A full-time music therapy position would be an amazing opportunity but the reality is that in this economy, foundations are looking to cut costs everywhere. I agreed with my advisors and made significant changes to my proposal but saved my original proposed budget, as it is something beneficial to have in the future when I want to ask foundations for more funding. The budgeting of this proposed program was not difficult but it did require much detail including the exact cost of every line item.

Throughout my grant writing process I encountered some bumps in the road but also made leaps and bounds. I believe that I have a strong document to use in the future to make this program come to fruition. I have recently spoke with the cancer center

director, Gail Probst, who would like to meet with me when my thesis is complete to go over my grant proposal so we can submit it to the chosen foundations.

Grant writing is a lot of work and it is as much about the research as it is about the quality of writing. I learned a lot from the grant writing process with regards to the type of writer I am, the one I aspire to be, and the clinician I strive to be. Of course my proposed music therapy program is not funded yet, but it is exciting to know that it has the possibility of being supported. It would mean a lot to me if this music therapy program got started, as I have witnessed the healing power of music with the cancer population. I know this program would help the field of music therapy grow, and be recognized more in the field of medicine. This proposed program would also help music therapy grow on Long Island, as there seems to be limited music therapy programs among Long Island hospitals. In the future, I hope the proposed music therapy program at Huntington Hospital will demonstrate the importance of music therapy in integrative medicine and serve as a model for other hospitals to incorporate music therapy into their healthcare system.

Chapter Six

Reflection

In completing this thesis, I began to realize that this will be the last assignment I ever write as a graduate student before I enter the music therapy world as a professional. Being a graduate music therapy student taught me a lot about myself not only as a clinician, but also as a human being. I continue to analyze my growth as a student and look at how that growth led me down the path I am taking now. I would be lying if I said I am not scared to graduate and leave Molloy College because all I have been doing for the past three years is attending classes and doing assignments, but now it is time to put all of my knowledge to use. It is frightening entering into the unknown, but exciting to start a new chapter in my life. I sometimes question if I am capable of going on this journey alone, but then realize that it is all part of my own personal process.

When I came to Molloy College, I did not know much about music therapy, but knew that I wanted to help people and give them the support that music has always given me. It took me a while to get used to the music therapy material and build upon my musical skills, but over the course of my education I developed a sense of self and used this to develop my academic approach and musicianship. As an undergraduate student, I did not take my degree seriously, not because I did not care about school, but because I did not love what I was doing. However, I can honestly say that I love music therapy and am totally invested in it. I believe in the healing power of music and have witnessed this power with my own clients and patients. The most life changing experience for me throughout all of the degree requirements would have to be the times spent with patients

and clients, especially during my internship at the Louis and Lucille Armstrong Center for Music and Medicine at the Beth Israel Medical Center in Manhattan, New York. During this nine month internship. I really jumped head first into the self exploration process and how it relates to the kind of therapist I am. There are so many dynamics that occur during a therapy session and therapeutic relationship, and I was unaware of all of these until I experienced them during my clinical work. It is one thing to read about psychodynamics and another to live and work through them. I will never forget the time in our internship seminar when Dr. Suzanne Sorel said that she could remember almost every client she had during her internship. Her comment resonates so much with me because I can name every patient I saw at the Beth Israel Medical Center and their diagnosis. This is how every one of my patients has impacted my life and work. Munro (2005) states that, "our professional development is influenced as deeply by human beings as are our personal lives" (p. 276). This statement holds so much truth for me, as I am forever changed both personally and professionally by my encounters during clinical training. Whether it was a doctor on a unit with impeccable bedside manner, a nurse who went above and beyond her duties to care for her patients, or a patient with the most admirable will to survive against all odds, all these experiences have shaped my life and clinical work. Although all my internship experiences were not positive, even the difficult doctors, nurses, and patients have indirectly taught me how to respond to uncomfortable situations. I would not eliminate those unpleasant moments for anything, as they too made me the person I am today. At my internship, there was one patient on the hospice unit who summed up life's journey as we said good-bye to one another for the last time, he said "You know what Lauren... there ain't no reason to be sad... I take a

little bit from you and you take a little bit from me and we spread it all around" (Hospice Patient, personal communication, May 2011). His words beautifully describe the impact of the human connection and will forever be on my mind and in my heart.

As I transition from being a student to a professional, I have decided that I would like to maintain my work as a medical music therapist. I plan on starting my own music therapy business and hope to start the proposed music therapy program at the Don Monti Cancer Center and the Women's Health Center of Huntington Hospital. If the program does not get the funding it needs to get started at Huntington Hospital, then I will remain ambitious and I will take my proposal to another hospital. If there is one thing I have learned from being in the music therapy field, it is that there will always be the need for more programs and music therapy advocacy. I think that I have the desire and conviction to help the field of music therapy grow, and am excited to be part of its unique culture.

References

American Cancer Society of America. (2010). *Learn about cancer*. Retrieved October 30, 2010, from http://www.cancer.org/

- American Music Therapy Association. (2010). *Music therapy with specific populations*.

 Retrieved November 10, 2010, from http://www.musictherapy.org/about_ind.html
- American Nurses Credentialing Center. (2010). *Magnet recognition program*. Retrieved February 1, 2011, from http://www.nursecredentialing.org/Magnet.aspx
- Bruscia, K.E. (1998). Defining music therapy. Gilsum, NH: Barcelona Publishers.
- Bruscia, K.E & Grocke, D.E. (2002). *Guided imagery and music: The Bonny method and beyond*. Gilsum, NH: Barcelona Publishers.
- Burns, D.S. (2001). The effect of the Bonny method of guided imagery and music on the mood and life quality of cancer patients. *The Journal of Music Therapy, 38*(1), 51-65.
- Choi, Y.K. (2010). The effect of music and progressive muscle relaxation on anxiety, fatigue, and quality of life in family caregivers of hospice patients. *The Journal of Music Therapy*, 47(1), 53-63.
- Clark, M., Isaacks-Downton, G., Wells, N., Redlin-Frazier, et al. (2006). Use of preferred music to reduce emotional distress and symptom activity during radiation therapy. *The Journal of Music Therapy, 43*(3), 247-265.
- Ferrer, A.J. (2007). The effects of live music on decreasing anxiety in patients undergoing chemotherapy treatment. *The Journal of Music Therapy, 44*(3), 242-255.
- Gimeno, M.M. (2010). The effect of music and imagery to induce relaxation and reduce nausea and emesis in patients with cancer undergoing chemotherapy treatment.

 Music and Medicine, 2(3), 174-181.
- Hanser, S.B., Bauer, W.S., Kubicek, L., Healey, M., Manola, J., Hernandez, M., &

Bunnel, C. (2006). Effects of a music therapy intervention on quality of life and distress in women with metastatic breast cancer. *Journal of the Society for Integrative Oncology*, *4*(3), 116-124.

- Hilliard, R. E. (2003). The effects of music therapy on the quality and length of life of people diagnosed with terminal cancer. *The Journal of Music Therapy, 40*(2), 113-125.
- Huntington Hospital Annual Report. *A day in the life*. Retrieved February 1, 2011 from http://www.hunthosp.org/pdf/HH0410-AnnualReport-Final.pdf
- Huntington Hospital 2010 Annual Report. *Community healthline*. Retrieved July 5, 2011 from http://www.hunthosp.org/healthline.html
- Huntington Hospital About Us. *Our mission*. Retrieved November 10, 2011 from http://www.hunthosp.org/mission.html
- Look Good Feel Better. (2010). *Programs for women*. Retrieved February 1, 2011, from http://lookgoodfeelbetter.org/programs/programs-for-women
- Magill, L. (2001). The use of music therapy to address the suffering in advanced cancer pain. *Journal of Palliative Care*, 17(3), 167-172.
- Magill, L. (2006). Role of music therapy in integrative oncology. *Journal of the Society* for Integrative Oncology, 4(2), 79-81.
- Magill, L. (2009). Caregiver empowerment and music therapy: Through the eyes of bereaved caregivers of advanced cancer patients. *Journal of Palliative Care*, 25 (1), 68-75.
- Magill, L. (2009). The spiritual meaning of pre-loss music therapy to bereaved caregivers of advanced cancer patients. *Palliative and Supportive Care*, 7(1), 97-108.

- Magill, L., Coyle, N., Handzo, G., & Loscalzo, M. (1997). Cancer and pain: A creative multidisciplinary approach in working with patients and families. In J.V. Loewy (Ed.), *Music Therapy and Pediatric Pain* (107-114). Cherry Hill, NJ: Jeffrey Books.
- Magill, L., & O' Callaghan, C. C. (2011). Editorial. Music and Medicine, 3(1), 7-8.
- May, R. (1975). The courage to create. New York, NY: W. W Norton and Company.
- Munro, S.P. (2005). Moments in time. In C. Dileo & J.V Loewy (Eds.), *Music Therapy at the End of Life* (275-279). Cherry Hill, NJ: Jeffrey Books.
- Murrant, G.M. (2000). Creativity and self-care for caregivers. *Journal of Palliative Care,* 16(2), 44-50.
- New York State Department of Health. (2010). *Cancer incidence for Huntington, Suffolk County 2003-2007*. Retrieved February 1, 2011, from http://www.health.state.ny.us/statistics/cancer/registry/vol1/v1ahuntingdon.htm
- O'Callaghan, C., & Magill, L. (2009). Effect of music therapy on oncologic staff bystanders: A substantive grounded theory. *Palliative and Supportive Care*, 7(2), 219-228.
- O'Callaghan, C., & McDermott, F. (2004). Music therapy's relevance in a cancer hospital researched through a constructivist lens. *The Journal of Music Therapy*, 41(2), 151-185.
- Romo, R., & Gifford, L. A cost-benefit analysis of music therapy in a home hospice.

 Nursing Economics, 25(6), 353-359.
- Sagar, S.M. (2006). Integrative oncology in North America. *Journal of the Society for Integrative Oncology*, 4(1), 27-39.

- United States Census. (2000). *Huntington, New York population*. Retrieved February 3, 2011, from http://www.census.gov/
- Wesa, K., Gubili, J., & Cassilexn, B. (2008). Integrative oncology: Complementary therapies for cancer survivors. *Hematology Oncology Clinics of North America*, 22(2), 343-353.
- Women's Health Center at Huntington Hospital. *Our services*. Retrieved February, 3, 2011 from http://www.hunthosp.org/centers/women.html

APPENDIX A

National/Community Foundations

			· ·		
<u>Foundation</u>	Contact	Phone Number	Address	National or	What they fund
			<u>E-mail</u>	<u>Community</u>	
Albert & Bessie	Director	631-725-0145	PO Box 2580, Sag Harbor,	Community generally	Healthcare; Gifts,
Warner Fund			NY 11963-0117	NYC/Suffolk	grants and loans to
			c/o: funding exchange 666		organizations
			broadway ste. 500 New		
			York, NY 10012		
Anne Eden	Lapatin ESQ	N/A	PO Box 4287, Huntington,	Community	Gives gifts, grants,
Woodward			NY 11743-0777		loans to other
Foundation					organizations
Balemian	Robert	631-367-0105	55 Walnut Tree Ln	Community	Gives gifts, grants,
Family	Balemian		Cold Spring Harbor, NY	Initial	loans to other
Foundation			11724-0000	approach=proposal	organizations
Benjamin &	Pulier	631-754-1600	7 Cayuga TRLHarrison,	Community	Gives gifts, grants,
Seema Pulier	Freedman &		NY 10528-1819		loans to other
	Fell				organizations
Burke Family	Anthony	631-424-5400	PO Box 1905, Huntington,	Community	Gives gifts, grants,
Foundation	Burke		NY 11743-0550		loans to other
					organizations
Carolyn Miles	William T	N/A	39 Drohan St	Community	Gives gifts, grants,

Spencer	Margiotta Jr.		Huntington, NY 11743-		loans to other
Foundation	Ū		1833		organizations
Charles L Read Foundation	Saul Eisenberg	973-379-5850	111 Wohseepee Dr. Bayshore NY, 11706-7122	Massachusettes, New Jersey, New York only gives funds to pre-selected organization	Health services and related activities
Claire Friedlander Family Foundation	Peter J. Klein	N/A	223 Wall St. #441, Huntington, NY 11743	Community	Proliferation of the arts
Cosel-Pieper Family Foundation	Donna Cosel- Pieper	N/A	5 Oakleaf Ct. Huntington, NY 11743	Community	Gives gifts, grants, loans to other organizations
D'addario Music Foundation	N/A	N/A	foundation@daddario	National Letter of inquiry July 31- submitted online Proposal- September 15	Small grants to music programs
Daidola Foundation	John C. Daidola	N/A	P. O. Box 826 Huntington, NY 11743-826	Community only gives funds to pre-selected organization	Gives gifts, grants, loans to other organizations
Huntington Hartford Family Fund Inc.	Lamb & Barnosky Llp	N/A	534 Broadhollow Rd Ste 210 Melville, NY 11747-3600	Small Community Fund	Gives gifts, grants, loand to other organizations
John and Elaine Kanas Family Foundation	Kathleen Hallinan	N/A	275 Broadhollow Rd. Melville, NY 11747-4801	Community initial approach=letter	Assistance to community and health services
Judith and Donald Bechler Foundation	Donald Bechler	631-414-8400	225 Broadhollow Rd. Melville, NY 11747-4822	Community	Gives gifts, grants, loans to other organizations
Kissinger Family Foundation Inc.	Walter B. Kissinger	631-351-8864	200 Broadhollow Rd. Melville, NY 11747-4806	Community	Gives gifts, grants, loans to other organizations
Klein-Kaufman Family Foundation	Jonah Kaufman	631-271-8055	134 W Hills Rd. Huntington Station, NY 11746-3140	Community	Gives gifts, grants, loans to other organizations
Knapp-Swezey Foundation	N/A	631-678-3406	P.O. Box 2549 Patchogue, NY 11772-0886	Community	Gives gifts, grants, loans to other organizations
Marion & Ben Duffy Foundation	James A. Kelly	N/A	16 Springwood La. Huntington, NY 11743- 3675	Community	Gives gifts, grants, loans to other organizations
Michael W. McCarthy Foundation	Patrick McCarthy	(631)979-9800	400 Townline Rd. Hauppauge, NY 11788	Community	Health assistance for sufferers of cancer-gives grants
Mrs. Cheever Porter Foundation Adams & Becker	N/A	631-423-6634	22 Oakwood Rd. Huntington, NY 11743- 4231	Community	Gives gifts, grants, loans to other organizations
Neisloss Family Foundation	Stanley L. Neisloss	609-274-6968	300 Corporate Plaza Ste 301 Islandia, NY 11749-1549	Community accepts proposals all year long	Has supported LIJ Northsore Health System in the past
Rafael Brenner	James T. Ashe	631-424-6362	136 Bay Ave Huntington	Community	Gives gifts, grants,

A -1			NY 11743-1208	1	1 441
Ashe Foundation			NY 11/43-1208		loans to other organizations
Rapaport & Shallat	Schulte Roth & Zabel	N/A	Bay Pl And Forest Ct Huntington, NY 11743- 0000	Community only gives funds to pre-selected organization	Cultural interests. Have given money to Mt. Sinai. Both are doctors at Huntington Hospital
Richard & Cheryl Metrick Charitable Trust	N/A	N/A	23 Lloyd Ln Lloyd Harbor NY 11743-9704	Community	Gives gifts, grants, loans to other organizations
Robert Wood Johnson	Grant Officer	877-843-7953	Route 1 and College Rd. E P.O. Box 2316 Princeton, NJ 08543	National	Healthcare
Shoreland Foundation	Anthony Wang	631-351-0961	38 Camel Hollow Rd, Lloyd Harbor, NY 11743- 1604	Community	Gives gifts, grants, loans to other organizations
Stebbins Fund Inc	Sacks Press	212-682-6640	P.O. Box 545 Cedarhurst, NY 11516- 0545	National Applications not accepted	Gives gifts, grants, loans to other organizations. Supports hospital programs
Susan G. Komen	Grant Officer	(212) 560-9590	470 Seventh Avenue - 7th floor New York, NY 10018	National	Supported an art therapy program at Bellevue hospital in the past. Breast Cancer treatments and services.
The Society for the Arts in Healthcare	Naj Winkoff- President Or Grant officer	(202)299-9770	2437 15th Street, NW Washington, DC 20009	National Application coming out this September	Support the arts in healthcare. Supported Beth Israel Medical Center
The Yvette & Joel Mallah Family Foundation	Yvette and Joel Mallah	N/A	P.O. Box 1297 Bridgehampton, NY 11932-1297	Community National only gives to pre- selected organizations	Gave grants to Beth Israel Medical Center & to LIJ Northsore Hospitals.
United Breast Cancer Foundation	Jennifer Spina- Program Manager	1-877-UBC- 4CURE	223 Wall Street, Suite 368 Huntington, NY 11743	National	Supports holistic and alternative approaches to cancer treatment.
Verizon Foundation	Joseph E. Scaccia, Director of Finance and Operations	800-360-7955 Joseph.e.scacci a @verizon.com	1 Verizon Way Basking Ridge, NJ 07920- 1025	National	Support healthcare programs that benefit the community

APPENDIX B

Life Rhythm
Music Therapy Service
Lauren Klimek- Owner
8 North Haven Lane
East Northport, NY 11731
1-631-245-0275
Life.Rhythm@gmail.com

June 21, 2011

Naj Wikoff- President Society for the Arts in Healthcare

2437 15th St, NW Washington, DC 2009

Dear Mr. Wikoff,

I am submitting the following as an initial inquiry for the Johnson & Johnson Society for the Arts in Healthcare Organization to consider a full proposal for the start up of a music therapy program for the Don Monti Cancer Center at Huntington Hospital located in Huntington, New York. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy interventions such as, music and imagery, music and relaxation and musical improvisation. Music therapy will also support and honor the dignity and quality of life of each patient coping with this life threatening illness.

Music therapy integrated into cancer care uses the unique modality of music to provide psychotherapeutic services while addressing the individual needs of patients and their caregivers. According to the American Music Therapy Association (AMTA) website, "Music Therapy is an established health service within the healthcare system and uses music to address the physical, psychological, cognitive, and social functioning for patients of all ages" (American Music Therapy Association, "About AMTA," 2010). Integrative medicine, which is the blending of alternative therapies and Western medicine, has been used in the care of patients for many years. Integrative medicine has recently been defined as, "an umbrella term for all services...it includes self-help and support information, psychological support, symptom control, social support, rehabilitation, spiritual support, palliative care, and bereavement care."

From the year 2003-2007, there has been an annual average of 1099.4 newly diagnosed cancer cases among men and women in the town of Huntington, NY and these numbers continue to aggressively rise.³ The proposed music therapy program would aim to provide services to the men and women of the Don Monti Cancer Center and the Women's Health Center, as well as its staff and caregivers. Premised on the belief in the healing power of music, this music therapy program will help patients manage their symptoms, such as nausea, emesis, pain, and depression through live musical interventions administered by a board certified music therapist. This program will also provide caregivers and staff with self-care management and coping techniques which are necessary when caring for patients and loved ones diagnosed with cancer.

¹ American Music Therapy Association. (2010). *Music therapy with specific populations*. Retrieved November 10, 2010, from http://www.musictherapy.org/about_ind.html

^{2&}lt;sup>1</sup> Magill, L., & O' Callaghan, C. C. (2011). Editorial. Music and Medicine, 3(1), 7-8.

³ New York State Department of Health.

Huntington Hospital does not currently have a music therapist or music therapy program available to patients. On the oncology unit, nurses provide a CD player with pre-recorded music for their patients but this is not therapy as it is missing the vital component of the human relationship. Music therapy is described as "a systematic process of intervention wherein the therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of change."⁴ A music therapist on a hospital unit can foster connections between staff, caregivers, and patients, as well as assist the medical staff with administering painful or unpleasant procedures for patients as they serve to support and help refocus a patient's attention. Music therapists can run group music therapy sessions for staff which focus on releasing tension and expressing emotions in a safe positive environment resulting in a better quality of care and respect for patients. Bereavement therapy groups for family members and staff led by a board certified music therapist use the unique modality of music to process and reflect feelings and the grief associated with the loss and death of a loved one. The described music therapy program will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life.

A board certified music therapist will work part-time at twenty hours a week at approximately six to seven hours per work day, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. I plan to serve as the Don Monti Cancer Center and the Women's Health Center's music therapist as I am currently working towards board certification and New York State Licensure to practice music psychotherapy. I am qualified to serve this hospital as I have completed a nine month internship at the Beth Israel Medical Center in Manhattan, New York under the direction of Dr. Joanne Loewy at the renowned Louis and Lucille Armstrong Center for Music and Medicine, whom the Society of the Arts in Healthcare supported in the past. Since the Society for the Arts is dedicated to incorporating the arts into patient healthcare, I feel strongly that my education and experience as an intern on the oncology unit at Beth Israel Medical Center has prepared me to start this music therapy program and provide Huntington Hospital and its patients with a unique and vital approach to healthcare.

Music therapy supports and honors the dignity and quality of life of all individuals. This program will not only positively affect patients, caregivers, and hospital staff but is also likely to raise patient satisfaction scores and quality of care. I look forward to the opportunity to work with the Society for the Arts in Healthcare to build a music therapy program for Huntington Hospital as music therapy plays an integral role in the treatment of patients diagnosed with cancer.

⁴ Bruscia, K. E. (1998). Defining music therapy. Gilsum, NH: Barcelona Publishers.

Sincerely,
Lauren Klimek Owner, Life Rhythm
(Please note for the purpose of printing the margins are at 1.5". When sending an inquiry letter to foundations, margins should be 1" on all sides; font should be no smaller than 10 and length should not exceed 2 pages).
Life Rhythm Music Therapy Services Lauren Klimek- Owner 8 North Haven Lane East Northport, NY 11731 1-631-245-0275 Life Rhythm@gmail.com
June 21, 2011
Jennifer Spina- Grant Program Manager United Breast Cancer Foundation

223 Wall Street, Suite 368 Huntington, NY 11743

Dear Mrs. Spina,

I am submitting the following as an initial inquiry for the United Breast Cancer Foundation to consider a full proposal for the start up of a music therapy program for the Don Monti Cancer Center and the Women's Health Center at Huntington Hospital located in Huntington, New York. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy interventions such as, music and imagery, music and relaxation and musical improvisation. Music therapy will also support and honor the dignity and quality of life of each patient coping with this life threatening illness.

Music therapy integrated into cancer care uses the unique modality of music to provide psychotherapeutic services while addressing the individual needs of patients and their caregivers. According to the American Music Therapy Association (AMTA) website, "Music Therapy is an established health service within the healthcare system and uses music to address the physical, psychological, cognitive, and social functioning for patients of all ages" (American Music Therapy Association, "About AMTA," 2010). Integrative medicine, which is the blending of alternative therapies and Western medicine, has been used in the care of patients for many years. Integrative medicine has recently been defined as, "an umbrella term for all services...it includes self-help and support information, psychological support, symptom control, social support, rehabilitation, spiritual support, palliative care, and bereavement care."

From the year 2003-2007, there has been an annual average of 1099.4 newly diagnosed cancer cases among men and women in the town of Huntington, NY and these numbers continue to aggressively rise. The proposed music therapy program would aim to provide services to the men and women of the Don Monti Cancer Center and the Women's Health Center, as well as its staff and caregivers. Premised on the belief in the healing power of music, this music therapy program will help patients manage their symptoms, such as nausea, emesis, pain, and depression through live musical interventions administered by a board certified music therapist. This program will also provide caregivers and staff with self-care management and coping techniques which are necessary when caring for patients and loved ones diagnosed with cancer.

Huntington Hospital does not currently have a music therapist or music therapy program available to patients. On the oncology unit, nurses provide a CD player with pre-recorded

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⁶⁷ Magill, L., O' Callaghan, C. C. (2011). Editorial. Music and Medicine, 3(1), 7-8.

⁷ New York State Department of Health.

music for their patients but this is not therapy as it is missing the vital component of the human relationship. Music therapy is described as "a systematic process of intervention wherein the therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of change." A music therapist on a hospital unit can foster connections between staff, caregivers, and patients, as well as assist the medical staff with administering painful or unpleasant procedures for patients as they serve to support and help refocus a patient's attention. Music therapists can run group music therapy sessions for staff which focus on releasing tension and expressing emotions in a safe positive environment resulting in a better quality of care and respect for patients. Bereavement therapy groups for family members and staff led by a board certified music therapist use the unique modality of music to process and reflect feelings and the grief associated with the loss and death of a loved one. The described music therapy program will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life.

A board certified music therapist will work part-time at twenty hours a week at approximately six to seven hours per work day, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. I plan to serve as the Don Monti Cancer Center and the Women's Health Center's music therapist as I am currently working towards board certification and New York State Licensure to practice music psychotherapy. I am qualified to serve this hospital as I have completed a nine month internship at the Beth Israel Medical Center in Manhattan, New York under the direction of Dr. Joanne Loewy at the renowned Louis and Lucille Armstrong Center for Music and Medicine. Since the values of the United Breast Cancer Foundation aims to, "ease the stress and strain that cancer can cause a patient and their family's health and wellness," I feel strongly that my education and experience as an intern on the oncology unit at Beth Israel Medical Center has prepared me to start this music therapy program and provide Huntington Hospital and its patients with a unique and vital approach to healthcare.

Music therapy supports and honors the dignity and quality of life of all individuals. As stated, this program will not only positively affect patients, caregivers, and hospital staff but is also likely to raise patient satisfaction scores and quality of care. I look forward to the opportunity to work with the United Breast Cancer Foundation to build a music therapy program for Huntington Hospital as music therapy plays an integral role in the medical treatment of patients diagnosed with cancer.

⁸ Bruscia, K. E. (1998). Defining music therapy. Gilsum, NH: Barcelona Publishers.

MUSIC FOR QUALITY OF LIFE: HUNTINGTON HOSPITAL GRANT PROPOSAL
Sincerely,
Sincerery,
Lauren Klimek Owner, Life Rhythm

Life Rhythm

Music Therapy Services
Lauren Klimek- Owner
8 North Haven Lane
East Northport, NY 11731
1-631-245-0275
Life.Rhythm@gmail.com

Robert Balemian- Director Balemian Family Foundation 55 Walnut Tree Lane Cold Spring Harbor, NY 11724 631-367-0105

Dear Mr. Balemian,

I am submitting the following as an initial inquiry for the Balemian Family Foundation to consider a full proposal for the start up of a music therapy program for the Don Monti Cancer Center and the Woman's Health Center at Huntington Hospital located in Huntington, New York. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy interventions such as, music and imagery, music and relaxation and musical improvisation. Music therapy will also support and honor the dignity and quality of life of each patient coping with this life threatening illness.

Music therapy integrated into cancer care uses the unique modality of music to provide psychotherapeutic services while addressing the individual needs of patients and their caregivers. According to the American Music Therapy Association (AMTA) website, "Music Therapy is an established health service within the healthcare system and uses music to address the physical, psychological, cognitive, and social functioning for patients of all ages" (American Music Therapy Association, "About AMTA," 2010). Integrative medicine, which is the blending of alternative therapies and Western medicine, has been used in the care of patients for many years. Integrative medicine has recently been defined as, "an umbrella term for all services...it includes self-help and support information, psychological support, symptom control, social support, rehabilitation, spiritual support, palliative care, and bereavement care." ¹¹

From the year 2003-2007, there has been an annual average of 1099.4 newly diagnosed cancer cases among men and women in the town of Huntington, NY and these numbers continue to aggressively rise. ¹² The proposed music therapy program would aim to provide services to the men and women of the Don Monti Cancer Center and the Women's Health Center, as well as its staff and caregivers. Premised on the belief in the healing power of music, this music therapy program will help patients manage their symptoms, such as nausea, emesis, pain, and depression through live musical interventions administered by a board certified music therapist. This program will also

¹⁰ American Music Therapy Association. (2010). *Music therapy with specific populations*. Retrieved November 10, 2010, from http://www.musictherapy.org/about_ind.html

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¹² New York State Department of Health.

provide caregivers and staff with self-care management and coping techniques which are necessary when caring for patients and loved ones diagnosed with cancer.

Huntington Hospital does not currently have a music therapist or music therapy program available to patients. On the oncology unit, nurses provide a CD player with pre-recorded music for their patients but this is not therapy as it is missing the vital component of the human relationship. Music therapy is described as "a systematic process of intervention wherein the therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of change." A music therapist on a hospital unit can foster connections between staff, caregivers, and patients, as well as assist the medical staff with administering painful or unpleasant procedures for patients as they serve to support and help refocus a patient's attention. Music therapists can run group music therapy sessions for staff which focus on releasing tension and expressing emotions in a safe positive environment resulting in a better quality of care and respect for patients. Bereavement therapy groups for family members and staff led by a board certified music therapist use the unique modality of music to process and reflect feelings and the grief associated with the loss and death of a loved one. The described music therapy program will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life.

A board certified music therapist will work part-time at twenty hours a week at approximately six to seven hours per work day, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. I plan to serve as the Don Monti Cancer Center and the Women's Health Center's music therapist as I am currently working towards board certification and New York State Licensure to practice music psychotherapy. I am qualified to serve this hospital as I have completed a nine month internship at the Beth Israel Medical Center in Manhattan, New York under the direction of Dr. Joanne Loewy at the renowned Louis and Lucille Armstrong Center for Music and Medicine. Since hospital service is one of the fields of interest for the Balemian Family Foundation, I feel strongly that my education and experience as an intern on the oncology unit at Beth Israel Medical Center has prepared me to start this music therapy program and provide Huntington Hospital and its patients with a unique and vital approach to healthcare.

Music therapy supports and honors the dignity and quality of life of all individuals. As stated, this program will not only positively affect patients, caregivers, and hospital staff but is also likely to raise patient satisfaction scores and quality of care. I look forward to the opportunity to work with the Balemian Family Foundation to build a music therapy

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program for Huntington Hospital as music therapy plays an integral role in the medical treatment of patients diagnosed with cancer.

Sincerely,

Lauren Klimek Owner, Life Rhythm

Life Rhythm

Music Therapy Services
Lauren Klimek- Owner
8 North Haven Lane
East Northport, NY 11731
1-631-245-0275
Life.Rhythm@gmail.com

June 21, 2011

Kathleen Hallinan- Director John and Elaine Kanas Family Foundation 445 Broadhollow Road Melville, NY 11747-3669

Dear Ms. Hallinan,

I am submitting the following as an initial inquiry for the John and Elaine Kanas Family Foundation to consider a full proposal for the start up of a music therapy program for the

Don Monti Cancer Center and the Women's Health Center at Huntington Hospital located in Huntington, New York. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy interventions such as, music and imagery, music and relaxation and musical improvisation. Music therapy will also support and honor the dignity and quality of life of each patient coping with this life threatening illness.

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From the year 2003-2007, there has been an annual average of 1099.4 newly diagnosed cancer cases among men and women in the town of Huntington, NY and these numbers continue to aggressively rise. ¹⁶ The proposed music therapy program would aim to provide services to the men and women of the Don Monti Cancer Center and the Women's Health Center, as well as its staff and caregivers. Premised on the belief in the healing power of music, this music therapy program will help patients manage their symptoms, such as nausea, emesis, pain, and depression through live musical interventions administered by a board certified music therapist. This program will also provide caregivers and staff with self-care management and coping techniques which are necessary when caring for patients and loved ones diagnosed with cancer.

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^{15&}lt;sup>1</sup> Magill, L., O' Callaghan, C. C. (2011). Editorial. *Music and Medicine*, 3(1), 7-8.

¹⁶ New York State Department of Health.

¹⁷ Bruscia, K. E. (1998). *Defining music therapy*. Gilsum, NH: Barcelona Publishers.

as well as assist the medical staff with administering painful or unpleasant procedures for patients as they serve to support and help refocus a patient's attention. Music therapists can run group music therapy sessions for staff which focus on releasing tension and expressing emotions in a safe positive environment resulting in a better quality of care and respect for patients. Bereavement therapy groups for family members and staff led by a board certified music therapist use the unique modality of music to process and reflect feelings and the grief associated with the loss and death of a loved one. The described music therapy program will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life.

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Music therapy supports and honors the dignity and quality of life of all individuals. As stated, this program will not only positively affect patients, caregivers, and hospital staff but is also likely to raise patient satisfaction scores and quality of care. I look forward to the opportunity to work with the John and Elaine Kanas Family Foundation to build a music therapy program for Huntington Hospital as music therapy plays an integral role in the medical treatment of patients diagnosed with cancer.

Sincerely,

Lauren Klimek Owner, Life Rhythm

Life Rhythm

Music Therapy Services Lauren Klimek- Owner 8 North Haven Lane East Northport, NY 11731 1-631-245-0275 Life.Rhythm@gmail.com

June 21, 2011

James Neisloss- V. P. The Neisloss Family Foundation, Inc. 300 Corporate Plaza, Ste. 301 Islandia, NY 11749-1549 631-232-2300

Dear Mr. Neisloss,

I am submitting the following as an initial inquiry for the Neisloss Family Foundation, Inc. to consider a full proposal for the start up of a music therapy program for the Don Monti Cancer Center and the Women's Health Center at Huntington Hospital located in Huntington, New York. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy interventions such as, music and imagery, music and relaxation and musical improvisation. Music therapy will also support and honor the dignity and quality of life of each patient coping with this life threatening illness.

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19

From the year 2003-2007, there has been an annual average of 1099.4 newly diagnosed cancer cases among men and women in the town of Huntington, NY and these numbers continue to aggressively rise. The proposed music therapy program would aim to provide services to the men and women of the Don Monti Cancer Center and the Women's Health Center, as well as its staff and caregivers. Premised on the belief in the healing power of music, this music therapy program will help patients manage their symptoms, such as nausea, emesis, pain, and depression through live musical interventions administered by a board certified music therapist. This program will also provide caregivers and staff with self-care management and coping techniques which are necessary when caring for patients and loved ones diagnosed with cancer.

Huntington Hospital does not currently have a music therapist or music therapy program available to patients. On the oncology unit, nurses provide a CD player with pre-recorded music for their patients but this is not therapy as it is missing the vital component of the human relationship. Music therapy is described as "a systematic process of intervention wherein the therapist helps the client to promote health, using music experiences and the relationships that develop through them as dynamic forces of change."²¹ A music therapist on a hospital unit can foster connections between staff, caregivers, and patients, as well as assist the medical staff with administering painful or unpleasant procedures for patients as they serve to support and help refocus a patient's attention. Music therapists can run group music therapy sessions for staff which focus on releasing tension and expressing emotions in a safe positive environment resulting in a better quality of care and respect for patients. Bereavement therapy groups for family members and staff led by a board certified music therapist use the unique modality of music to process and reflect feelings and the grief associated with the loss and death of a loved one. The described music therapy program will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life.

¹⁸ American Music Therapy Association. (2010). *Music therapy with specific populations*. Retrieved November 10, 2010, from http://www.musictherapy.org/about_ind.html

^{19&}lt;sup>1</sup> Magill, L., O' Callaghan, C. C. (2011). Editorial. *Music and Medicine*, 3(1), 7-8.

²⁰ New York State Department of Health.

²¹ Bruscia, K. E. (1998). *Defining music therapy*. Gilsum, NH: Barcelona Publishers.

A board certified music therapist will work part-time at twenty hours a week at approximately six to seven hours per work day, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. I plan to serve as the Don Monti Cancer Center and the Women's Health Center's music therapist as I am currently working towards board certification and New York State Licensure to practice music psychotherapy. I am qualified to serve this hospital as I have completed a nine month internship at the Beth Israel Medical Center in Manhattan, New York under the direction of Dr. Joanne Loewy at the renowned Louis and Lucille Armstrong Center for Music and Medicine. Since some of the fields of interest for the Neisloss Family Foundation Inc., are hospital and patient care, I feel strongly that my education and experience as an intern on the oncology unit at Beth Israel Medical Center has prepared me to start this music therapy program and provide Huntington Hospital and its patients with a unique and vital approach to healthcare.

Music therapy supports and honors the dignity and quality of life of all individuals. As stated, this program will not only positively affect patients, caregivers, and hospital staff but is also likely to raise patient satisfaction scores and quality of care. I look forward to the opportunity to work with the Neisloss Family Foundation Inc., to build a music therapy program for Huntington Hospital as music therapy plays an integral role in the medical treatment of patients diagnosed with cancer.

Sincerely,

Lauren Klimek Owner, Life Rhythm

APPENDIX C



Grant Application

Please complete the application and mail to: The United Breast Cancer Foundation

Attn: Grant Manager 223 Wall Street Suite 368 Huntington, New York 11743

Organization Name: The Don Monti Cancer Center and The Women's Health Center

Address: 270 Park Avenue Huntington, NY11743

Point of Contact, Title: Life Rhythm, Lauren Klimek-Owner

Phone: Fax: Other: 1-631-245-0275 E-mail: Lauren.Klimek@gmail.com Exact amount of funds requested:

How do you intend to use these funds? I intend to use these funds to start up a music therapy program for the patients of Huntington Hospital's Don Monti Cancer Center and Women's Health Center. These funds will help establish the music therapy program by supplying instruments and funding operating costs for a board certified music therapist to offer patients a holistic and psychodynamic approach to their cancer treatment.

What kind of population (age, ethnicity, and income level) is served by your facility? All populations are served at Huntington Hospital as they provide all services to the community regardless of age, color, religion, race, nationality, disability, and sexual orientation.

What geographic area will be served? The patients and community of The Don Monti Cancer Center and The Women's Health Center will be served through funding from The United Breast Cancer Foundation.

United Breast Cancer Foundation 223 Wall Street Suite 368 Huntington, NY 11743 1-877-UBC-4CURE www.ubcf.info fax 631-549-4527

UBCF Grant Application

Please describe how your facility services the un/under insured population:

By using its charities, The Don Monti Cancer Center and The Women's Health Center, in coordination with Huntington Hospital, has the ability to provide services to its patients regardless of their ability to pay.

Within the population your facility serves, how many breast cancer (inpatient and outpatient) patients are there? Breast cancer diagnoses make up approximately 30% of cancer diagnoses at the Don Monti Cancer Center ("Community Healthline," 2009). Huntington Hospital's 2010 annual report states that there were "16,607 hospital admissions, 28,122 health center visits, and 35,086 other outpatient visits. In addition to inpatient and outpatient visits Huntington Hospital administered 3,230 nuclear medicine procedures, 5,290 mammograms, and 9,663 surgical procedures" ("Huntington Hospital 2010 Annual Report," 2011).

Please describe the program that you would like these funds to assist: Patients diagnosed with cancer go through many phases of treatment and it is often difficult for these patients to cope with their illnesses. By using the unique modality of music, patients can release emotion and tension by participating in musical experiences, such as music and imagery, music and relaxation, and musical improvisation. Music therapy in integrative medicine cannot only help patients manage their immediate symptoms, but also help patients transcend to a peaceful and comforting environment, one that is not always typical of the hospital setting. These funds would assist in the start up of a music therapy program for the patients, families, and staff of the Don Monti Cancer Center and the Women's Health Center of Huntington Hospital. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy based interventions. A board certified music therapist will work part-time, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. Music therapy will play a unique role in treating patients diagnosed with cancer and support

them in managing their physical and mental health while providing them with a better quality of life. The proposed music therapy program will be a dominant force in person centered care and will never lose sight of the importance of patient advocacy.

Please describe in detail the use of funds: With the help of the United Breast Cancer Foundation these funds will be used to support the start up of a music therapy program under the corporation of Life Rhythm, for The Don Monti Cancer Center and The Women's Health Center. These start-up costs will include the salary for a part-time music therapist, and purchase necessary instruments and office equipment. These funds will also help house the music therapy program within the hospital unit by covering the hospital overhead at 15% of the proposed program cost. This program will run for forty-five weeks, and a board certified music therapist will work twenty hours a week at approximately six to seven hours per day, providing individual and group music therapy sessions to the patients, families and staff of the Don Monti Cancer Center and the Women's Health Center. The music therapist will see approximately at six patients per work day, and the rest of the therapist's time will be spent on administrative tasks such as, attending rounds, charting, and writing assessments on all patient contact.

United Breast Cancer Foundation 223 Wall Street Suite 368 Huntington, NY 11743 1-877-UBC-4CURE www.ubcf.info fax 631-549-4527

UBCF Grant Application

Please provide your program budget: The proposed program budget is \$63,775.06. Please see the attached proposed budget form.

Information about your facility: Huntington Hospital is known for its excellence in patient care. The Don Monti Cancer Center of Huntington Hospital plays an important role in the hospital's excellent reputation, as it is one of only twenty hospitals in New York State to be designated as a comprehensive community cancer center by the American College of Surgeons Commission on Cancer ("Huntington Hospital 2009 Annual Report," 2010). In the past years, the nursing staff of the Don Monti Cancer Center has worked with the hospital's center for complementary care to begin certifications to offer their patients massage therapy, Reiki, and aroma therapy. In addition to these complementary services, there is also animal assisted therapy. These complementary services offer the patients a choice of a nonpharmacological approach to treating their symptoms and the side-effects from treatment. The hospital's first survivorship treatment plan was created by the cancer center nurses to guide the long term management of care for women who have completed breast cancer treatment, "making this one of the first steps taken to address the needs of more than eleven million cancer survivors nationwide" ("Huntington Hospital 2009 Annual Report," 2010). The Don Monti Cancer Center also supports the American Cancer Society's, "Look Good Feel Better" program at the Women's Health Center. This program conducts group workshops that teach beauty techniques to female cancer patients to help them "combat the appearancerelated side effects of cancer treatment" (American Cancer Society, 2010). According to the Huntington Hospital's Community Healthline (2009), "the Women's Health Center was the first in Suffolk County to perform stereotactic needle biopsy, and it continues to be a leader in this procedure, providing both mammography and MRI guided approaches" (2009). By being a leader in the treatment of their patients diagnosed with breast cancer, the Women's Health Center continues to be a pioneer in the field of innovations for breast cancer treatment.

Please attach resumes of all people associated with the direct operations of this **program:** Please, see attached resume for Lauren Klimek.

United Breast Cancer Foundation 223 Wall Street Suite 368 Huntington, NY 11743 1-877-UBC-4CURE www.ubcf.info fax 631-549-4527

New York/New Jersey Area Common Application Form Cover Sheet

Date of application: July 2011

Name of organization to which grant would be paid. Please list exact legal name:

The Don Monti Cancer Center and The Women's Health Center at Huntington Hospital **Purpose of grant (one sentence):** This grant will be used to develop a music therapy program for the patients, families, and staff of the Don Monti Cancer Center and the Women's Health Center at Huntington Hospital.

Address of organization: 270 Park Avenue, Huntington, NY 11743

Telephone number: 631-351-2343 **E-mail:** gprobst@hunthosp.org

Executive director: Gail Probst RN

Contact person and title (if not executive director): Lauren Klimek

Is your organization an IRS 501(c) (3) not-for-profit? (Yes or No): Yes

If no, please explain:

.

Grant request: \$63,775.06

Check one (based on the organization's priorities and the funder's guidelines):

General support: X

Project support

Total organizational budget (for current year): \$63,775.06

Dates covered by this budget (mo/day/year): 09/01/2011-09/01/2011

Total project budget (if requesting project support): \$		
Dates covered by project budget (mo/day/year):		
Project name (if applicable):		

PROPOSAL SUMMARY:

Patients diagnosed with cancer go through many phases of treatment and it is often difficult for these patients to cope with their illness. By using the unique modality of music, patients can release emotion and tension by participating in musical experiences, such as music and imagery, music and relaxation, and musical improvisation. Music therapy in integrative medicine cannot only help patients manage their immediate symptoms, but also help patients transcend to a peaceful and comforting environment, one that is not always typical of the hospital setting. These funds would assist in the start up of a music therapy program for the patients, families, and staff of the Don Monti Cancer Center and the Women's Health Center of Huntington Hospital. This music therapy program will focus on treating the immediate physical and emotional needs of patients diagnosed with cancer by using music therapy based interventions. A board certified music therapist will work part-time, running individual and group music therapy sessions. The music therapist will take referrals from the oncology staff, as well as the palliative doctor. Music therapy assessments and progress notes will be gathered to ensure ongoing evaluation of the effects and outcomes of this service. Patient satisfaction surveys, as well as IRB approved research studies, will be conducted to support the efficacy of music therapy with this population and the important role it serves in integrative medicine. Music therapy will play a unique role in treating patients diagnosed with cancer and support them in managing their physical and mental health while providing them with a better quality of life. The proposed music therapy program will be a dominant force in person centered care and will never lose sight of the importance of patient advocacy.

I. NARRATIVE:

A. Background

Huntington Hospital is a small community hospital that was founded in 1916 by a charitable act. The hospital now holds 408 inpatient beds and has numerous specialty centers, including the Don Monti Cancer Center and the Women's Health Center. As of January 19, 2011, the hospital employed 1,413 full time employees, and 294 part time employees. In addition to paid employment, approximately 50% of patient care is represented by Huntington Hospital volunteers. The hospital's mission is "to provide a full range of inpatient, outpatient, and specialized services within an environment nurtured by respect and safety" ("Our Mission," 2011). The Don Monti Cancer Center and the Women's Health Center at Huntington Hospital provides all services to the community regardless of age, color, religion, race, nationality, disability, and sexual orientation. By using its charities, The Don Monti Cancer Center and The Women's Health Center, in coordination with Huntington Hospital, has the ability to provide services to their patients regardless of their ability to pay. Huntington Hospital is known for its excellence in patient care, and it has earned Magnet designation for the second

consecutive time, and is the only hospital on Long Island to have earned this honor twice ("Huntington Hospital 2009 Annual Report," 2010). The Magnet designation award recognizes excellence and professionalism in nursing (American Nurses Credentialing Center, 2010). The Don Monti Cancer Center of Huntington Hospital plays an important role in the hospital's reputation, as it is one of only twenty hospitals in New York State to be designated as a comprehensive community cancer center by the American College of Surgeons Commission on Cancer (Huntington Hospital 2009 Annual Report, April, 2010). The Don Monti Cancer Center works closely with the Women's Health Center to provide its patients with a full array of continued care services, which aide in the long term management of care for women who have completed breast cancer treatment. The Women's Health Center works with the American Cancer Society's. "Look Good Feel Better" program to conduct workshops that teach beauty techniques to female cancer patients to help them "combat the appearance-related side effects of cancer treatment" (American Cancer Society, 2010). The Don Monti Cancer Center is known for providing a full array of medical specialty services and offering "the same state of the art comprehensive cancer care that one would find in a large medical center with the attention to personal detail that is only found at a smaller community hospital" ("Huntington Hospital 2009 Annual Report," 2010). When compared to larger hospitals, Huntington has a more intimate and personal environment, which enables them to provide better patient care.

B. Funding Request

The funds requested will be used to support the start up of a music therapy program for The Don Monti Cancer Center and The Women's Health Center. These start-up costs will include the salary for a part-time music therapist, and the purchase of necessary instruments and office equipment. These funds will also help house the music therapy program within the hospital unit by covering the hospital overhead at 15% of the proposed program cost. This program will run for forty-five weeks, and a board certified music therapist will work twenty hours a week at approximately six to seven hours per day, providing individual and group music therapy sessions to the patients, families and staff of the Don Monti Cancer Center and the Women's Health Center. The music therapist will run approximately six individual and one group music therapy sessions per work day, and the rest of the therapist's time will be spent on administrative tasks, such as, attending rounds, charting, and writing assessments on all patient contacts.

C. Evaluation

The effects of music therapy on the care of patients diagnosed with cancer will be measured by ongoing assessments of individual and group therapy sessions. Patient satisfaction surveys will also be given to ensure quality of care. Individual and group goal plans will be implemented to help patients achieve their goals and optimal wellness. This program will be a success, as I will always use a person centered approach, never neglecting the immediate needs and symptoms of my patients. Music therapy is a unique and versatile therapeutic tool that has the ability to speak volumes when words cannot. By the end of the funding period, I expect to see patient satisfaction scores increase, as well as staff satisfaction, which ultimately results in better quality of care for patients. I also expect to see more continued management of care for patients, their families, and the staff, as music therapy can provide this through individual consults and group therapy.

Music therapy has been successful in the treatment of patients diagnosed with cancer by using musical experiences, such as music and imagery, music and relaxation, and improvisation. These same therapy techniques will be used in the proposed music therapy program. I am certain that music therapy will be just as successful at the Don Monti Cancer Center and the Women's Health Center, as I have witnessed the healing power of music as a music therapy intern at the renowned Louis and Lucille Armstrong Center for Music and Medicine at the Beth Israel Medical Center in Manhattan, New York. This training has thoroughly prepared me to work with patients diagnosed with cancer, and it will be an honor and a privilege to witness their remarkable journey.

I. ATTACHMENTS

A. Financial Information

- 1. Please see the attached financial statement for the most recent fiscal year.
- **2.** Please see the attached most recent operating expense budgets for the most recent fiscal year.
- **3.** There are currently no foundation or corporate supporters of the proposed music therapy program.
- **4.** I intend to solicit funding from The Johnson and Johnson Society for the Arts in Healthcare, the United Breast Cancer Foundation, the Balemian Family Foundation, the Neisloss Family Foundation, Inc., and the John and Elaine Kanas Family Foundation, for the proposed music therapy program

B. Other Supporting Materials

1. Below you will find a list of the board of directors and their affiliations:

The Don Monti Cancer Center Board of Directors

Gail Probst, RN, AOCN

Director of Cancer Services

Biriis Akhund, MD

Chief, Oncology/Hematology, Cancer Committee Chairman

Huntington Hospital Board of Directors

Bernard M. Rosof MD

Chairman of the Board

Rosalyn C. Gordon

Vice Chairman

Lewis S. Meltzer, Esq.

Vice Chairman

Harry F Mariani

Secretary

William H. Frazier

Treasurer

Fred J. Buckholtz

Assistant Treasurer

Kevin F. Lawlor

President and CEO

- 2. The copy of Huntington Hospital's IRS letter is not available at this time.
- 3. Please see below the one paragraph resume of Lauren Klimek who will be serving as the Don Monti Cancer Center and the Woman's Health Center's music therapist:

Lauren Klimek

Education

Molloy College- Master's of Science in Music Therapy Recipient of Honorable Mention, Class of 2011 Queens College- Bachelor's of Music Performance

Clinical Experience

Intern at the Beth Israel Medical Center- The Louis and Lucille Armstrong Center for Music and Medicine (September 2010-June2011)

- 4. You can find the 2010 Huntington Hospital Annual Report at: http://www.hunthosp.org/pdf/hh0411_annualreport-finallores.pdf
- 5. The articles about the Don Monti Cancer Center and the Women's Health Center can be found at:

http://www.hunthosp.org/pdf/HH0410-AnnualReport-Final.pdf http://www.hunthosp.org/pdf/HH0810_CancerAnnualReport.pdf http://www.hunthosp.org/pdf/HH1209-HealthLine.pdf

New York Regional Association of Grantmakers • 505 Eighth Ave, Suite 1805 • New York, NY 10018-6505 • 212/714-0699 • http://www.nyrag.org

The Council of New Jersey Grantmakers • 101 West State Street • Trenton, NJ 08608 • 609/341-2022

APPENDIX D

Huntington Hospital 2010 Financial Statement Fiscal Year Ending on December 31, 2010

A. Financial Information

Operating Revenue

\$303,211,000
\$25,544,000
\$277,667,000

Operating Expenses

Salaries	\$124,281,000
Employee Benefits	\$42,633,000
Supplies and Other Expenses	\$85,340,000
Depreciation and Interest	\$14,303,000
Total Operating Expenses=	\$266,557,000
Operating Income	\$11,110,000
Non-Operating Income	\$6,373,000
Excess of Revenue Over Expenses	\$17,483,000

Assets

1100000			
Cash and Investment	\$115,144,000		
Accounts receivable (net of allowances for	\$28,816,000		
uncollectible accounts)			
unconceriore decounts)			
Supplies, Prepaid Expenses and Other Assets	\$8,777,000		
Endowment and Special Purpose Funds	\$8,445,000		
Assets Whose Use is Limited	\$17,007,000		
Land, Buildings, Equipment	\$289,217,000		
7D 4 1 A 4	0300 317 000		
Total Assets=	\$289,217,000		

Liabilities

Accounts Payable and Accrued Expenses	\$38,111,000
Accrued Retirement Benefits	\$73,422,000
Bonds and Leases Payable	\$41,272,000

Other Liabilities	\$37,055,000
Total Liabilities=	\$189,860,000
Equity=	\$99,357,000
	6200 217 000
Total Liabilities and Equity=	\$289,217,000

Huntington Hospital 2010 Annual Report. *Community healthline*. Retrieved July 5, 2011 from http://www.hunthosp.org/healthline.html

APPENDIX E

LAUREN A. KLIMEK

8 North Haven Lane East Northport, NY 11731 Lauren.Klimek@gmail.com 631.245.0275

EDUCATION

Molloy College, Rockville Centre, NY

Masters of Science in Music Therapy, August 2011 Honorable Mention Recipient 2011

City University of New York- Queens College Aaron Copland School of Music, Flushing, NY

Bachelors of Music in Vocal Performance, May 2008 Trained in Classical, Opera, Chamber, and Jazz

CLINICAL INTERNSHIP PRACTICUM

Beth Israel Medical Center Louis & Lucille Armstrong Center for Music and Medicine New York, New York

September 2010-June 2011

 Worked as a music therapy intern on hospital units such as, oncology, hospice, family medicine, orthopedics, pediatrics, psychiatric, surgical intensive care unit, medical

- intensive care unit.
- Attended daily medical rounds and served as part of the medical team in receiving patient referrals.
- o Conducted patient assessments.
- Charted progress notes.
- o Documented individual treatment/goal plans.
- Conducted music therapy sessions with a musician from the music and health clinic at the Philips Ambulatory Care Center of Beth Israel Medical Center.
- Conducted individual music therapy sessions with a co-therapist for an adolescent diagnosed with autism.
- Led a drum circle for the staff of the oncology unit.
- Conducted research with the spine team on the orthopedics unit researching music therapy and its effects on perception of pain for people undergoing spinal fusion.
- Conducted research on the surgical intensive care unit researching the effects of environmental music therapy on the perception of noise in the surgical intensive care unit.

CLINICAL FIELDWORK

Northport Veterans Affairs Medical Center Northport, NY

Fall 2008-Spring2009

Alternatives for Children East Setauket, NY

Spring 2009-Fall 2009

Bronx Psychiatric Center Bronx, NY

Spring2010

Professional Experience

New York State Office for People with Developmental Disabilities, Independent Support Services Direct Support Contractor

August2008-Present

- o Provide direct support to young adults with varying intellectual disabilities.
- Assist young adults with life skills, social interaction, job coaching, and community integration.
- Work with a young woman diagnosed with William's Syndrome and a young man diagnosed with Fragile X Syndrome.

KIDS Plus Inc. Foundation

August 2010-Present

Northport, NY

Music Instructor

Lead music therapy based group sessions for special needs children.

Private Business

2005-Present

East Northport, NY

Private Voice Instructor

- Vocally train individuals to compete in NYSSMA and various vocal competitions.
- O Coach two young women diagnosed with Asperger's Syndrome.

Malverne School of Music Malverne, NY

September 2006 - November 2008

Voice and Piano Teacher

Provided voice and piano instruction to young children, adolescents, and adults.

APPENDIX F