

Name and address of internship site:

Department of State Hospitals -Napa 2100 Napa-Vallejo Hwy Napa, CA 94558

Name and contact information for the Internship Director:

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Description of population served:

The hospital operates approximately 1,255 beds. The commitment categories of patients treated at DSH-Napa are described below:

Civil Commitment under Lanterman-Petris-Short (LPS) Act

The majority of civilly committed patients are on Conservatorships. Conservatorships are for gravely disabled individuals who represent a danger to themselves or others due to mental illness. They have not been charged with crime but are instead referred by local community mental health programs through involuntary civil commitment procedures pursuant to the LPS Act. Typically, the patients at DSH-Napa have failed community placements and have no other residential treatment option. LPS patients are discharged when either their county places them in a different facility or they have met their discharge criteria for a lower level of care. In some cases, patients are discharged because they have successfully petitioned the court to remove the Conservatorship.

The State Hospital also serves people on Murphy's Conservatorship, which is a subset of conservatorship onto which individuals are placed when they meet the criteria for LPS conservatorship but also have pending legal charges that remain unresolved. They have usually been through competency restoration programs under the PC 1370 commitment and failed competency restoration more than once prior to being placed on Murphy's Conservatorship.

Incompetent to Stand Trial (PC 1370)

Felony defendants found incompetent by a court are placed in a State Hospital where the focus of treatment is to stabilize their condition and establish trial competency, so they can return to court to adjudicate their pending charges.



Patients who are determined to be unlikely to regain competency are returned to court to determine their future Conservatorship status.

Offenders with Mental Health Disorders (Penal Code Section /2972)

Parolees who committed one of a specified list of crimes and who were treated for a severe mental disorder connected to their original crime can be committed to a State Hospital as a condition of parole for a period not to exceed the length of their parole term. If the person still requires treatment at the end of their parole term, they can be civilly committed under PC2972, providing it is determined that they are a substantial danger to themselves or others. These commitments last for one year and may be renewed annually by the court.

Not Guilty by Reason of Insanity (PC 1026)

Patients judged by the court to be not guilty because they did not know the difference between right and wrong due to a mental disorder at the time of the felony crime are committed. They are sentence to a State Hospital for treatment for treatment. Once hospitalized discharge goals are established, and treatment focuses on meeting the established criteria. This includes addressing their mental health symptoms, substance use issues, development of a comprehensive understanding of the factors that led up to their offense and completing a plan to prevent future crimes from occurring in the future.

Common Goals Addressed in Music Therapy at DSH-Napa:

- Improve insight
- Develop healthy self-esteem
- Increase reality orientation
- Restore trial competency
- Improve interpersonal skills
- Develop relaxation skills
- Improve impulse control
- Manage emotions
- Increase self-expression

The approximate patient population breakdown for DSH-Napa as of 7/17/24 is listed below. The data below includes patients who are not in the facility because of a court appearance or who are at a general acute care hospital to receive other medical treatment.



Patient Commitments	Population	Percentage of Total at Facility
Incompetent to Stand Trial	466	43%
Lanterman Petris Short (Conserved)	113	11%
Offenders with Mental Health Disorders	41	4%
Not Guilty by Reason of Insanity	454	42%

Description of entry level requirements/competencies

Preferably, applicants have had exposure to adult psychiatric clients and/or forensic clients prior to applying. Practicum in these areas is desirable. The applicant must have good written and verbal communication skills and be open to constructive feedback. They must have an understanding of basic psychiatric diagnoses and be able to formulate treatment goals and objectives. Interns should have experience with facilitating group sessions. DSH-Napa is a medium-security facility and, as such, maintaining strong therapeutic boundaries is a priority.

Expectations regarding music skills are:

- Functional accompaniment skills on keyboard and guitar
- Ability to play percussion instruments alone or in an ensemble
- Able to transpose songs to workable and/or sing-able keys
- Basic understanding of musical styles appropriate to various populations and cultures

Description of professional staff working with the intern:

There are numerous professional staff and 20+ music therapists employed by the hospital. Interns will have the opportunity to work with art therapists, dance/movement therapists, recreation therapists, occupational therapists, physical therapists, speech therapists, social workers, psychologists, psychiatrists, chaplain services, registered nurses, LVNs, psychiatric technicians, dieticians, teachers, substance recovery counselors, and vocational services. They will have the opportunity to actively participate as a member of the interdisciplinary team.

Other on-site student training programs:

DSH-Napa offers on-site training for all clinical and nursing disciplines throughout the year in the areas of substance use, trauma informed care, neurocognitive treatment, Dialectical Behavioral Therapy and others. The Annual Rehabilitation Therapy



Summit and Multicultural Conference are opportunities for therapists from all five DSH hospitals to share best practices and innovative treatment interventions.

Availability of Space and Equipment:

Multiple spaces are available throughout the hospital for music therapy treatment, including a large, centralized music room and a smaller music room located in the Q Building. Unit-based music therapists have their own equipment: i.e. guitars, drums, pianos, and other instruments.

The centralized music room has practice rooms, recording software and equipment, a PA system, and various string, woodwind, brass, percussion, and electronic instruments.

Types of Sessions:

Group therapy is the primary treatment delivery method and groups can vary in size. Treatment groups are provided both on-unit and at centralized locations. Individual music therapy sessions are provided in specific cases when requested by the treatment team.

Philosophy of the Music Therapy Program:

We believe that providing interns with a structured program and a diverse pool of music therapy supervisors allows interns to grow in a way that feels most authentic to them. We believe in encouraging interns to tap into their unique creative strengths and musical skills to develop clinical acumen for effective treatment for patients who are living in a forensic psychiatric facility. We aim to train interns to be grounded, creative and confident, and ready to enter the workplace upon completion of their hours.

Outline of the Clinical Training Program

- 1. Prospective interns will apply for the Student Assistant Position on the CalCareers website (https://calcareers.ca.gov/) and complete the supplemental application with all requested supplemental materials.
- 2. Prospective interns will participate in a formal interview with the internship director and potential supervisors.
- **3.** Once accepted, prospective interns will complete background checks via fingerprints, a physical exam and TB test.



- 4. The Intern Verification form and evaluation of competencies will be reviewed and signed with the intern and the Internship Director at the beginning of the internship.
- 5. Orientation Interns attend new employee orientation for the first 7 business days, which includes CPR, First Aid, General Securities, Emergency Preparedness, Infection Control, Tool Control, etc.
- 6. Interns will collaborate with other Rehabilitation Therapy disciplines by attending monthly meetings and observing and co-facilitating groups. Interns will be provided with contact information for every Rehabilitation Therapist at DSH-Napa.

Description of the internship experience:

Provisions for Time Management

Interns are expected to work a 40-hour week with hours approximately 8:00am to 5:00pm Monday through Friday on-site. A customized schedule may be possible if needed with prior approval. Interns will complete a state time sheet monthly and a weekly sign in sheet to be reviewed by their supervisor. Interns are paid midmonth and should prepare to not receive the first paycheck until approximately 6 weeks following the start date. Per CalHR, Student Assistants (intermittent employees) are typically paid within ten working days after the end of the pay period.

As intermittent employees, interns accrue 8 hours of sick leave and 7 hours of vacation time for every month that they work at least 160 hours. Paid overtime is not permitted.

Internship Hours

Besides the state working hours, interns are responsible for tracking their own clinical hours, which include the above state working hours as well as the hours which are directly relate to the music therapy internship experiences. The examples of the non-state working hours include, but not limit to the hours for attending academic conferences, and other relevant trainings. Those hours are



not paid by the State. Please discuss with the internship director to determine if hours are relevant as internship hours. The internship hours tracking sheet will be signed off by the internship director at the completion of the internship.

Interns are expected to demonstrate reliable time management skills. Additional time management assignments may be added if not meeting the expectations.

Daily Sign-In/Out Sheet

Interns will sign-in and out daily in the R-ward.

Monthly Breakdown of Internship Schedule

Month One

- New employee orientation
- Orientation to primary and secondary units and supervisors
- Observe and shadow MT supervisors, treatment groups provided by other music therapists and other disciplines
- Observe treatment planning conferences and interdisciplinary meetings
- Schedule two off-site observations
- Select book or article for first book report
- Schedule and participate in weekly supervision meetings
- Week 4 meet with primary supervisor to plan schedule for remaining term (6 with supervisors, 4 hours extra)

Month Two

- Weeks 5 and 6 intern participates in and assists with scheduled groups
- Transition to assisting or co-facilitating 8 10 music therapy interventions per week. Supervisors will assign interns to complete session plans to organize their facilitation. Interns will gradually assume more group leadership responsibilities.
- Begin to participate in treatment planning conferences and interdisciplinary meetings
- Receive patient caseload. Complete two progress notes.
- Begin chart reviews.
- Present 1st book report in monthly Music Therapy meeting.

Month Three

Assume primary group facilitation of at least three music therapy groups.
 Continue co-facilitation of groups. Total group treatment hours per week 8 – 10



- Develop session plans for each group where they are the primary facilitator and provide to co-facilitators no less than 24 hours in advance of the scheduled group.
- Assess, develop goals/objectives and begin providing 1:1 music therapy session for at least one patient.
- Assume documentation and conference recording responsibilities for caseload (average of four progress notes and one to two conferences per month)
- Mid-term Evaluation
- Submit Final Project proposal

Month Four

- Establish at least one new group for the treatment term. If off unit, collaborate with other group providers.
- Continue group and individual treatment facilitation
- Continue documentation and conference recording responsibilities
- Present 2nd book report in monthly Music Therapy meeting

Month Five

- Continue group and individual treatment facilitation
- Continue documentation and conference recording responsibilities
- Facilitate special event
- Plan termination

Month Six

- Continue group and individual treatment facilitation implementing termination
- Continue documentation and conference recording responsibilities
- Present Final project
- Final evaluation

Interns will attend daily interdisciplinary meetings on the unit, monthly music therapy meetings, and monthly hospital-wide rehabilitation therapy meetings. Interns will be assigned a caseload of patients for whom they will complete clinical progress notes, treatment planning conferences, and effectively terminate at the end of internship. Interns will complete, on average, four progress notes per month and record one to two conferences per month beginning in month three. There will be monthly inservice trainings at the monthly music therapy meeting. The intern will present 2 book/article reports at this meeting.



Provisions for documentation:

Documentation requirements vary depending on how long a patient has been in the hospital. Documentation will be co-signed by the supervisor. Additionally, interns will conduct a music therapy assessment for their assigned individual patient which will include recommended treatment goals and possible interventions.

Interns are expected to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) in order to maintain patient confidentiality. Under no circumstances is an intern allowed to take patient information off of hospital grounds.

Provision for staff meetings and in-service training:

Interns will be expected to attend multiple regularly scheduled meetings. These include: daily unit morning report, monthly Music Therapy and Special Events Committee meetings, departmental and program meetings, and the Rehabilitation Therapist's Professional Practice Group monthly meetings. In-service training and continuing education are regularly provided by the hospital. These are available to interns, who are encouraged to attend, with the approval of their supervisor.

Provisions for intern self-awareness and professional growth:

Various assignments and opportunities are built into the structure of the internship to provide opportunities for increased self-awareness and professional growth. These include

- Interns are required to visit two MT-BCs outside of DSH-Napa for observation.
- Interns are encouraged to attend regional or national conferences as well as other professional seminars or workshops in the area. Internship hours will be accrued for any additional off-site education.
- Interns are required to complete and submit a weekly process journal to their supervisors and internship director. Prompts are located in the internship binder.
- Interns are also required to complete an internship soundtrack or playlist (see description below).
- Interns are required to read two books (see recommended list) or articles and present a summary at the Monthly Music Therapy meeting during their 2nd and 4th month.

Other resources available to interns include Employee Assistance Program, Peer Support Trauma Group, counseling services through your university. We also highly



encourage self-reflective practices such as, lunch time activities (staff gym, running volleyball, hiking, yoga, tai chi, taiko drumming, basketball, water polo) music improvisation, song writing, dance/movement, visual art and personal journaling.

Internship "Soundtrack/Playlist"

Much like a film is often accompanied by music/pieces/songs that amplify or clarify the experiences of the character, interns are expected to create a twelve-song playlist that expresses their internship experience. Interns are expected to draw connections as to how their song choices relate to their social, emotional, learning, stress, and coping experiences chronologically through the (approximately) 6-month internship (2 songs per month). Interns may keep a list of many songs for themselves that speak to/for them, however, they must narrow them down to six (due at the midterm review), and the other six (due at the end of the internship) for a total of twelve at the final review all together.

Song choices must be compiled in a presentation format (PowerPoint, Google Slides, PDF, etc. with links) to be digitally shared with the MT Internship director and supervisors prior to midterm and final evaluations. Interns must include written discussions (a few paragraphs each) as to the rationale for including each song/piece as well as a YouTube link to the music itself.

Provisions for formal and informal observation of the intern and constructive feedback:

Interns will be observed during all music therapy groups. Informal observation may be done by the supervising therapists or other clinicians for feedback and discussion (i.e.; social worker, psychologist). Any group co-facilitated with an MT-BC will be followed by informal supervision regarding structure, presentation, group response and/or participation as well as suggestions or comments that may assist with groups in the future. The groups led by the intern will be formally observed by the supervisor and/or internship director at least one time per month with written feedback and discussion during their supervision meeting.

Provisions for supervision:

The intern will schedule at least one hour per week to consult with their primary or secondary supervisor and once per month with the internship director. Topics which may be covered:

General Check-in



- Group and individual sessions
- Assessment of skill development
- Interpersonal dynamics
- Documentation
- Conflict resolution
- Plans for the future
- How to deal with challenging situations with patients and staff
- Professional boundaries
- Time management and organizational skills
- Cultural considerations

Provisions for administrative skills:

Interns will be required to participate on the special events committee during their internship. They will work with this committee to provide at least one music centered experience during their 6 months.

Provisions for Professional Boundaries

It is important to understand that supervisors, the internship director and all of the music therapists here at DSH-Napa are invested in the success of each intern. Therefore, relationships between music therapy interns and music therapists at DSH-Napa must remain professional in nature. Relationships that have the potential to interfere with the quality and objectivity of intern supervision must be avoided. An intern's performance must be evaluated in a manner that is fair and perceived as being such. Because of the power differential between interns, supervisors and music therapists, fraternization outside of employees' professional responsibilities is discouraged. It is also discouraged for interns and music therapists to 'follow' or 'friend' each other on social media. Interns must be aware of any transference with supervisors and take steps to manage this transference appropriately.

Supervisors are responsible for:

□ Developing performance goals collaboratively with the intern

□ Ensuring that performance goals are clearly communicated and current

□ Providing fair, constructive, and timely feedback towards performance expectations and goals

□ Providing assistance, guidance, and coaching support as needed



☐ Ensuring that interns progress in their professional development goals
☐ Conducting performance evaluations according to AMTA requirements and policies
Interns are responsible for:
☐ Communicating workload challenges
☐ Communicating any interpersonal or interprofessional stressors or distractions
☐ Communicating progress towards performance goals
☐ Identifying and communicating professional development needs and opportunities
☐ Achieving performance and professional development goals as identified in individual work plans and individual development plans.

Provisions for special requirements:

Each intern will complete a capstone project. This will be a project of the interns choosing, with approval of the supervisors and Internship Director. They will be given a list of suggestions, or they can propose one of their own. Choices must relate to mental health or music therapy, and can include a literature review, a case study, a research project, presentation, etc. If the literature review is chosen, it must utilize at least 10 peer reviewed journal articles. In addition, there will be music therapy in-service presentations during (at least half of) the monthly music therapy meetings. The topics covered may vary and will, whenever possible, cover subject areas requested by the intern.

Evaluations:

Each intern will complete a self-evaluation at the 3- and 6-months points. They will receive a 3-month, and a final evaluation in writing written in conjunction by the primary and secondary supervisors and the internship director.

Number of interns per training period:

DSH-Napa will accept no more than 2 interns per training period.



Information on transportation, available housing and stipend:

- 1. Liability coverage Interns who are not employees must have liability coverage either individually or through their school. Interns are eligible for worker's compensation coverage through DSH-Napa.
- 2. Transportation The city of Napa offers bus services. Bus services are also available north to Calistoga and south to Vallejo and San Francisco.
- 3. Stipend DSH-Napa hires interns into Student Assistant positions. Compensation will be provided per the California Human Resources pay scale.
- 4. Housing DSH-Napa offers on-grounds housing to state employees for a fee established by the State of California.

Internship Dismissal policy and procedure:

The music therapy intern is expected to adhere to AMTA National Roster Internship Guidelines, Standards of Clinical Practice, Code of Ethics, the AMTA/CBMT Music Therapy Scope of Practice, and all DSH-Napa administrative directives and policies. They are expected to make reasonable progress in order to meet the requirements of the internship program, and to be independently functioning as a professional music therapist by the completion of the internship.

The following process will be initiated if an intern fails to adhere to the above policies, or in making poor progress in meeting the requirements of the program.

- 1. Depending on the severity of an infraction, either a verbal or written warning will be given. The Internship Director will review the policy and procedure of concern with the intern, if applicable. A verbal warning will include a discussion on ways to constructively address the problems noted and a timeline for improvement. The plan will be formulated with the primary and/or secondary supervisor, and the Internship Director. The Academic Director will be notified. If improvement is noted on or before the timeline, the internship will proceed. If further improvement is called for, a formal letter of instruction will be written, see #2.
- 2. If a formal letter of instruction is called for, it will include 1) identification of the problem 2) discussion of the expected performance or conduct needing remediation 3) an agreed upon course of action for remediation, and 4) a specific time frame to meet the expected improvements. Failure to comply with the course of action could result in a dismissal of the intern. A copy of the letter of instruction will be sent to the Academic Director and the AIAC representative within two working days.



- 3. At the time frame noted for either a verbal or written warning/instruction, the internship director will meet with the primary and/or secondary supervisor to review progress. If the problem has been adequately resolved, the Academic Director and the AIAC representative will be notified of the intern's progress. If the problem has not been rectified, the intern will be dismissed. A letter of dismissal will be sent to the Academic Director and the AIAC representative within two days.
- 4. The intern may be dismissed at any time as a result of a direct violation of facility personnel policy and procedure. In some situations, dismissal will be immediate with no opportunity for remediation due to the nature of the forensic mental health environment at DSH-Napa. Situations where this may happen include: breach of safety or security measures, breach of confidentiality, serious boundary violations with a patient, or dangerous contraband. Determination of these cases will be based on Napa State Hospital Administrative Directives and/ or specific program policies, and consultation with the Chief of Rehabilitation Therapy Services. Written notification of an intern being terminated will be sent to the Academic Director and the AIAC representative within two full working days.