

## Tennessee Person-Centered Music Program Response Evaluation Form

### Before Music Session

Name of Nursing Home: \_\_\_\_\_

Resident ID: \_\_\_\_\_

Location of Music Session with Resident: \_\_\_\_\_

Age of Resident: \_\_\_\_\_

Gender:           M       F

Race:

\_\_\_\_ American Indian or Alaska Native       \_\_\_\_ Asian       \_\_\_\_ Black or African American

\_\_\_\_ Hispanic or Latino American       \_\_\_\_ Native Hawaiian or Other Pacific Islander

\_\_\_\_ Mixed           \_\_\_\_ White       \_\_\_\_ Other (specify): \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Description of condition of resident (i.e. posture, tremors, relaxed, wandering, reporting pain, sleeping):

All people present (resident, you, Tennessee Person-Centered Music Program partnered volunteer, nursing home staff, Tennessee Person-Centered Music Program staff, family members, etc.):

\_\_\_\_\_

Session Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Visit Number: \_\_\_\_\_ Duration of Visit: \_\_\_\_\_

Total Playing Time: \_\_\_\_\_

Songs prepared for today's session (list title of song, artist, and duration of song, if able):

Please mark if the song did or did not provide a positive response (as indicated in the columns below)

**Artist                      Song Title                      Album Title                      Genre                      Song Duration**

Ex:	The Beatles	"Here Comes The Sun"	Abbey Road	Rock	03:06
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1. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

6. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

7. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

8. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

9. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

10. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

11. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

12. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

13. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

14. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

15. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

16. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

17. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

18. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

19. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

20. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

21. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

22. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

23. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

24. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

25. \_\_\_\_\_

Response Notes:

Y	N

\_\_\_\_\_  
\_\_\_\_\_

**During Music Session**

You observed the resident (positive responses to songs played):

- |     |                              |     |                                 |     |                         |
|-----|------------------------------|-----|---------------------------------|-----|-------------------------|
| ___ | Keeping beat with foot       | ___ | Fidgeting                       | ___ | Singing/ humming        |
| ___ | Closing eyes (imagery)       | ___ | Smiling                         | ___ | Clapping                |
| ___ | Hand movements               | ___ | Mimicking playing an instrument |     |                         |
| ___ | Breathing in time with music | ___ | Shared memories                 | ___ | Softened expression     |
| ___ | Meaningful conversation      | ___ | Tremors lessened                | ___ | Other artists mentioned |

Additional observations (i.e. negative reaction to songs played, asking to end session early):

Were there distractions to the listening experience today? If so, what? \_\_\_\_\_

Did you need to adjust the music as the resident's needs/ responses changed (i.e. negative reactions to songs played, ending music session early)?

Yes

No

After your discussion with the program coach, how did the resident respond to the music played today?  
Please be as detailed as possible.

Resident showed no visible response

Resident's response to music was:

**After Music Session**

What type of music have you learned from today's session is preferred by the resident? (Select all that may apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Country and Western       | <input type="checkbox"/> Classical     | <input type="checkbox"/> Spiritual/Religious |
| <input type="checkbox"/> Big Band/ Swing           | <input type="checkbox"/> Folk          | <input type="checkbox"/> Blues               |
| <input type="checkbox"/> Jazz                      | <input type="checkbox"/> Rock and Roll | <input type="checkbox"/> Easy Listening      |
| <input type="checkbox"/> Cultural/ Ethnic Specific | <input type="checkbox"/> Other: _____  |  |

What are your own personal feelings, insights, or experiences you've gained from this music session? Please describe in as much detail as possible.