



July 31, 2023

Chairman Burns, Chairmen Metzger and Honorable Members of the House Professional Licensure Committee,

My name is Chrissy Daeschner, OTD, MS, OTR/L. I am the current Pennsylvania Occupational Therapy Association (2021-2025). I work at Chatham University, as the Doctoral Capstone Coordinator and at Vest Home Therapy. The Pennsylvania Occupational Therapy Association formally expresses opposition to HB 1356 regarding licensure for music therapists. This opposition is rooted on the infringement to the profession of occupational therapy and the lack of clarity in the bill regarding the scope of practice.

Occupational Therapy is the therapeutic use of everyday occupations with a person, group, or population for the purpose of enhancing or enabling participation (AOTA, 2020). Occupational therapists must have a master's or doctoral degree in occupational therapy, pass a national certification test, and be licensed the state they are practicing in. The fundamentals of the profession are based on the goals of the client, the activities of the client, the skills to perform those activities and meet those goals (AOTA, 2020). Our work encompasses the client's professional skills, volunteer opportunities, and leisure activities which could and do include music. The profession also has education standards which includes extensive course work and hands on experiences with populations across the lifespan from birth to death. Students also must pass courses in Anatomy & Physiology, Neuroscience, pediatric disabilities, adult disabilities, and mental health (ACOTE, 2018). Occupational therapy practitioners have completed and continue to work on research in cognition: including mild cognitive impairment, dementia, and other diagnoses related to the cognitive abilities of clients who have suffered an illness or injury affecting the brain. Across the state of Pennsylvania, we have NIH funded research in this field with world renown researcher Dr. Elizabeth Skidmore and Dr. Catherine Piersol.

It is disheartening that the occupational therapy profession was not approached regarding the proposed HB 1356 bill as there are many similarities in the music therapy language and treatment to the current occupational therapy scope of practice. As previously mentioned, occupational therapy education encompassed birth to death with a full focus on the development and progression of client centered therapy. Music therapy education has a 70% focus on general education and music foundation. Less than half of the education (30%) has a focus on clinical foundations and music therapy concepts. This is concerning when the scope of music therapy practice promotes treatment that would encompass the lifespan and work with clients in the autism spectrum, dementia, brain injuries, and post-traumatic stress disorder. HB 1356 specifically mentions collaboration with speech-language pathologists and audiologist, yet no mention of occupational therapy. As a profession we do not see a gap in service delivery that would warrant a license for music therapy that encroaches on the occupational therapy scope of practice and reduces the current treatment plan of clients that are referred to occupational therapy. HB 1356 also identifies multiple referral sources, this is a loose description of the current structure of referral sources,

as a physician must be the person to referral access to treatment in other professions. Even professions with direct access have restrictions prior to physician referral.

When searching for the term “music therapy” an article from US News and World Report (2022) explains that music therapists are first and foremost musicians. The use of music therapy as a support to treatment under the supervision of another practice is the most appropriate use of musicians in the clinical field. There is limited understanding at this time regarding the benefits and effects of a license for the profession as only 5 states have full licensure and an additional 6 states with a recognition. There are 11 schools in the state with less than 150 graduates per year. It’s premature to request licensure with the current language in the proposed practice act compared to the educational requirements of the profession and the infringement on the occupational therapy profession. I appreciate the opportunity for POTA to testify before you today. I’d be happy to answer any questions you may have.

A handwritten signature in black ink, appearing to read "Christine Daeschner". The signature is fluid and cursive, with a large initial "C" and "D".

Christine Daeschner, OTD, MS, OTR/L

POTA President (2021-2025)