 

**Music Group information for Link Workers**

*This is a template – please feel free to save and edit before sending to your link worker(s).*

*They may also require additional information to that considered in this document.*

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| **QUESTIONS** | **NOTES** |
| Your group’s name, a contact name, email address & telephone number |   |
| When and where does the group meet? |   |
| What kind of music does the group sing or play?  |  |
| If an instrumental group, do you have instruments to lend to participants? |   |
| Is there a need to be able to read music, or can the music be learned aurally?  |  |
| Is the group auditioned, or is there a particular level of skill required?   |  |
| Are there limitations on the type of person that can join? E.g. age, gender, sexuality, ethnicity  |   |
| Does the group have appropriate safeguarding in place, e.g. · Insurance· safeguarding policy incl. working with vulnerable adults· first aid (including mental health first aid)· data protection· DBS checks· risk assessment  |   |

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| **QUESTIONS** | **NOTES** |
| Are there taster opportunities before committing?  |   |
| Is there a cost to singing or playing with the group?  |   |
| What experience, if any, does the group have of accommodating a range of conditions?  |  |
| Do the leadership and members of the group feel comfortable accommodating a range of conditions? |   |
| How will the group ensure that the patient feels welcome? Will there be a buddy, for example? Do you have a ‘group profile’ for the patient to learn about the group before arriving? |  |
| How many referrals could the group accommodate?  |  |
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