School of Physical and Occupational Therapy
3654 Drummond Street
Montreal, Quebec
H3G 1Y5

COURSE GUIDE
B.Sc. (OCCUPATIONAL THERAPY) U-2
2000-2001

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U2 CURRICULA PLAN - 2000-2001 - OCCUPATIONAL THERAPY PROGRAM

FALL: TERM A

Academic Term (13 wks) + Exams (2 wks) = Total 15 wks

Academic Term Sept 5 - Dec 6	**Exams** Dec 7 - 21
504-321A CIRCUITRY OF THE HUMAN BRAIN 3cr	
582-455A NEUROPHYSIOLOGY 3cr	
580-335A OT PRACTICE II: Neurological Conditions Part 1 2cr	
580-337A OT PRACTICE III: Psychiatry 3cr	
580-340A ASSESSMENT OF PERFORMANCE II 2cr	
ARTS & SCIENCE COMPLEMENTARY COURSE 3cr	

WINTER: TERM B

Academic Term (13 wks) + Exams (2 wks) = Total 15 wks

Academic Term Jan 3 - Apr 10	**Exams** Apr 11 - 27
580-336B OT PRACTICE II: Neurological Conditions Part 2 4cr	
580-338B OT PRACTICE IV: Mental Health 3cr	
580-339B STRATEGIES FOR INDEPENDENT LIVING 2cr	
580-341B ASSESSMENT OF PERFORMANCE III 3cr	
ARTS & SCIENCE COMPLEMENTARY COURSE 3cr	

SUMMER: TERM C

Clinical 1 (6wks) + Clinical II (6wks) = Total 12 wks

Clinical Block April 30 - June 8	**Clinical Block** June 11 - July 20	**Clinical Block** July 23 - Aug 31
580-320C CLINICAL AFFILIATION II 6cr	580-320C CLINICAL AFFILIATION II 6cr	580-321C CLINICAL AFFILIATION III 6cr
or	**or**	
	580-321C CLINICAL AFFILIATION III 6cr	
	or	

Note: 580 - OT
582 - OT/PT
504 - Anatomy

Term A:
Sept. 5 to Dec. 6, 2000
Exam Period:
Dec. 7 to 21, 2000

Term B:
Jan. 3 to Apr. 10, 2001
Exam Period:
Apr. 11 to 27, 2001

Term C:
Two 6-week blocks
May to Sept. 2001

2000-2001 OCCUPATIONAL THERAPY PROGRAM - U2		
Course Number	**Course Name**	**Credits**
504-321A	Circuitry of the Human Brain	3
582-455A	Neurophysiology	3
580-335A	OT Practice II: Neurological Conditions - Part I	2
580-337A	OT Practice III: Psychiatry	3
580-340A	Assessment of Performance II	2
Term A	Arts & Science Complementary Course	3
580-336B	OT Practice II: Neurological Conditions - Part II	4
580-338B	OT Practice IV: Mental Health	3
580-339B	Strategies for Independent Living	2
580-341B	Assessment of Performance III	3
Term B	Arts & Science Complementary Course	3
	TERMS A & B - TOTAL CREDITS	**31**
580-320C	Clinical Affiliation II	6
580-321C	Clinical Affiliation III	6
	TERM C - TOTAL CREDITS	**12**

2000-2001 PHYSICAL THERAPY PROGRAM - U2		
Course Number	**Course Name**	**Credits**
504-321A	Circuitry of the Human Brain	3
582-455A	Neurophysiology	3
581-337A	Movement III: Neuromuscular	3
Term A	Arts & Science Complementary Course	3
Term A	Arts & Science Complementary Course	3
581-328B	Biophysical Agents	2
581-336B	Movement II: Cardiorespiratory	3
581-338B	Movement IV: Neurological	4
581-340B	Exercise Physiology	3
Term B	Arts & Science Complementary Course	3
	TERMS A & B - TOTAL CREDITS	**30**
581-320C	Clinical Affiliation II	6
581-321C	Clinical Affiliation III	6
	TERM C - TOTAL CREDITS	**12**

582-455A - NEUROPHYSIOLOGY

Credits: 3

Lecturers: H. Barbeau (Coordinator), Guest Lecturers

COURSE STRUCTURE

This course consists of twenty-four 1½ hour lectures starting September 6, 2000, Mondays 1:30 - 3:00 p.m. and Wednesdays 12:30 - 2:00 p.m..

OVERALL OBJECTIVES

Emphasis will be placed on the understanding of neurophysiological principles, concepts and mechanisms rather than on rote learning, so that the acquired neurophysiological knowledge can be integrated with and utilized in other professional courses.

SPECIFIC OBJECTIVES

Upon completion of this course, the student shall be able to:

1. Identify the various sensorimotor mechanisms at different levels of neuraxis, and relate them to the control of posture and locomotion, as well as to higher functions at the cortical level.

2. Describe the current controversies surrounding the principles of normal development, motor control and dysfunctions, as well as plasticity and readaptation.

3. Analyze the possible neurophysiological and neuropharmacological mechanisms underlying normal and abnormal sensory, motor or cognitive functions in patients suffering from lesions to the central and peripheral nervous system, be they alternations in sensory function or muscle tone, postural disturbances, paralysis, disequilibrium or perceptual impairments.

4. Describe pathophysiology and basis for movement dysfunction for each of the principal neurological disorders presented in the course.

5. Synthesize the knowledge of receptor behaviour and the effects of various afferent and supraspinal influences on spinal reflex systems and relate these to (a) existing therapeutic techniques in a comprehensive and analytical manner, as well as to (b) the design of innovative rehabilitation programs.

6. Define the rationale behind treatment approach with a given neurological problem.

7. Master the foundation of knowledge in preparation for the courses, Movement IV: Neurological (581-338B) and OT Practice II: Neurological Conditions - Part I & II (580-335A & 580-336B).

LECTURE SCHEDULE FOR 2000-2001

Section I: Information Processing in the Nervous System **(Chapters from Kandel et al, 1991)**

DATE	LECTURE	PROFESSSOR	TOPIC
Wed., Sept. 6	Lecture 1	Dr. Barbeau Dr. David	How is external information translated into the language of our brain? *Chapter 2: Nerve cells and behaviour (pp. 19-32). Chapter 3: The cytology of neurons (pp. 34-47).*
Mon., Sept. 11	Lecture 2	Dr. Barbeau	How is information transmitted from one end of the neuron to the other end? *Chapter 6: Membrane potential (pp. 81-89 and 92). Chapter 8: Voltage-gated ion channels and the generation of the action potential (pp. 104-114 & 118).*
Wed., Sept. 13	Lecture 3	Dr. Séguéla	Synaptic transmission *Chapter 9: Synaptic transmission (pp. 123-134).* *Chapter 10: Nerve-muscle transmission (pp. 135-152).*
Mon., Sept. 18	Lecture 4	Dr. Barbeau	Neurotransmitters and neurotransmitter release *Chapter 13: (pp. 194-212).* *Chapter 14: (pp. 213-224).* *Chapter 15: (pp. 225-234).*
Wed., Sept. 20	Lecture 5	Dr. Séguéla	Disease of chemical transmission *Chapter 16: Disease of chemical transmission at the nerve-muscle synapse: Myasthenia gravis (pp. 235-243).* *Chapter 56: Disorders of mood: Depression, mania, and anxiety disorders (pp.869-883).*
Mon., Sept. 25	Lecture 6	Dr. Barbeau	How are four sensory attributes - modality, intensity, duration and location - coded and processed in our brain? *Chapter 23: Coding and processing of sensory information (pp. 329-340).*

Wed., Sept. 27	Lecture 7	Dr. Séguéla	Coding of sensory modalities in the somatic system *Chapter 24: Modality coding in the somatic sensory system (pp. 341-352)*

DATE	LECTURE	PROFESSOR	TOPIC
Mon., Oct. 2	Lecture 8	Dr. Séguéla	Touch and Tactile stimulation *Chapter 25: Anatomy of somatic sensory system (PP. 353-364).* *Chapter 26: Touch (pp. 367-384).*
Wed., Oct. 4	Lecture 9	Dr. Dykes	Pain and analgesic mechanisms *Chapter 27: Pain and analgesia (pp. 385-399).*
Mon., Oct. 9			***THANKSGIVING***
Wed., Oct. 11	Lecture 10	Dr. Paquet	Vestibular mechanisms *Chapter 33: The sense of balance (pp. 500-511). Chapter 43: The ocular motor system (pp. 661-663, 667-670).*
Mon., Oct. 16	Lecture 11	Dr. Casanova	Physiology of the visual system *Chapter 28: Phototransduction and information - Processing in the retina.*
Wed., Oct. 18	Lecture 12	Dr. Paquet	Basal ganglia and Parkinson's disease *Chapter 42: The basal ganglia (pp. 647-659).*

Section II: Motor Systems of the Brain: Reflex and Voluntary Control of Movement **(Chapters from Kandel et al, 1991)**

Mon., Oct. 23		Dr. Barbeau	***MID-TERM EXAMINATION***
Wed., Oct. 25	Lecture 13	Dr. Barbeau	Muscle receptors: the stretch reflex *Chapter 36: Muscles: Effectors of the nervous system (pp. 556-564).* *Chapter 37: Muscle receptors and spinal reflexes: The stretch reflex (pp. 564-580).*
Mon., Oct. 30	Lecture 14	Dr. Barbeau	The flexion reflex and neural control of locomotion *Chapter 38: Spinal mechanism of motor coordination (pp. 581-590).* ** Neural control of stereotypic limb movements*

Wed. Nov. 1	Lecture 15	Dr. Barbeau	Lesions of the spinal cord, brain stem and stroke *Chapter 46: Clinical syndromes of the spinal cord and brain stem (pp. 711-719; 722-730).* *Appendix B: Cerebral circulation: Stroke (pp. 1041-1049).*

DATE	**LECTURE**	**PROFESSOR**	**TOPIC**
Mon., Nov. 6	Lecture 16	Dr. Barbeau	Spasticity: Underlying mechanisms Management of spasticity and of recovery of locomotion *Enhancement of locomotor recovery following spinal cord injury* ** Handbook of the Spinal Cord*
Wed., Nov. 8	Lecture 17	Dr. Forget	The sensorimotor control of movement *Chapter 35: The control of movement (pp. 533-547).*
Mon., Nov. 13	Lecture 18	Dr. Fung	Supraspinal control of posture ** Postural orientation and equilibrium* *Chapter 39: Posture (pp. 596-607).*
Wed., Nov. 15	Lecture 19	Dr. Dykes	Plasticity in the nervous system *Chapter 18: Reactions of neurons to injury (pp. 258-269).* *Chapter 65: Cellular mechanisms of learning (pp. 1009-1031).*
Mon., Nov. 20	Lecture 20	Dr. Lamontagne	Cerebellar control of movement *Chapter 41: The cerebellum (pp. 626-646).*
Wed., Nov. 22	Lecture 21	Dr. Cabana	Development of the nervous system *Chapter 21: Development as a guide to the regional anatomy of the brain. (pp. 296-308).*

Section III: Higher Cortical Functions **(Chapters from Kandel et al, 1991)**

Mon., Nov. 27	Lecture 22	Dr. Alonso	Sleep and dreaming *Chapter 51: Sleep and dreaming (pp. 792-804).*

Wed., Nov. 29	Lecture 23	Dr. Ragsdale	The neurobiology of language and aphasias *Chapter 54: Disorders of language: The aphasias (pp. 839-851).*
Mon., Dec. 4	Lecture 24	Dr. Ragsdale	Regional specialization within the two cerebral hemispheres: frontal and temporal lobes. *Chapter 53: Localization of higher cognitive and affective functions: The association cortices (pp. 823-838).* *Chapter 62: Aging of the brain: Dementia of the Alzheimer's type (pp. 974-982).*

REQUIRED TEXT

Course Pack. (Work Book)

SUGGESTED READINGS

Kandel, E.R., Schwartz, J.H. & Jessell, T.M. (1995). Essentials of Neural Science and Behaviour. (1st edition), Appleton and Lange, Connecticut.

Kandel, E.R., Schwartz, J.H. & Jessell, T.M. (1991). Principles of neural science. (3rd edition), New York: Elsevier.

Netter, F.H. (1991). CIBA Collection of Medical Illustrations Vol. 1, Nervous System Part I: Anatomy and Physiology and Part II: Neurologic and Neuromuscular Disorders. CIBA-Geigy Corporation.

* Review articles are included in your workbook.

EVALUATION

Mid-Term Examination	IBM single and multiple choice questions (Monday, October 23, 2000)	30%
Final Examination	IBM single and multiple choice questions (During exam period December 2000)	70%

580-320C - CLINICAL AFFILIATION II
580-321C - CLINICAL AFFILIATION III

Credits: 6 580-320C
6 580-321C

Coordinator: C. Storr, Academic Coordinator of Clinical Education
A. Thomas, Assistant Academic Coordinator of Clinical Education

COURSE STRUCTURE

This course commences in UI and continues at set intervals throughout the three years of the program. Fieldwork placements will be arranged with McGill teaching hospitals, McGill affiliated hospitals and centres. At times students may request fieldwork outside of the Montréal region (these regions may also include the US and overseas). The Occupational Therapy Program has developed specific guidelines pertaining to international and CAOT (Canadian Association of Occupational Therapists) placements. Please refer to page 9 for further details.

Both traditional and non-traditional fieldwork placements will be used. The latter will consist of facilities/agencies/programs which do not employ an occupational therapist.

Supervision will be provided by occupational therapists who work in various settings, depending on the type of placement offered. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience.

Every effort will be made to place students in the Montréal region. When students are placed in out-of-town facilities, travel and accommodation are the student's responsibility.

This course is structured as follows:

I Clinical Affiliation Seminars
II Traditional Fieldwork Placements
III Non-Traditional Fieldwork Placements

I CLINICAL AFFILIATION SEMINARS

Prior to the second year Clinical Affiliations, in Term B, U2 Occupational Therapy students will participate in a series of seminars which will cover issues related to occupational therapy fieldwork.

COURSE STRUCTURE

Three one-hour seminars where students are divided in two groups. There is one instructor per group.

LEARNING OUTCOMES

1. To become familiar with second year clinical affiliation objectives (traditional and non-traditional fieldwork placements);

2. To suggest methods of improving general communication skills;

3. To reflect on ethical issues he/she may be faced with;

4. To introduce the use of WebCT as a tool for cooperative peer learning.

COURSE CONTENT

- Review clinical profile
- Non-traditional placements: objectives and evaluation
- Existing and emerging roles of Occupational Therapists
- Ethical dilemmas
- Review objectives and competencies of level 2 placements

EVALUATION

Attendance will be compulsory.

II TRADITIONAL FIELDWORK PLACEMENTS

CLINICAL AFFILIATION II and III: Occupational Therapy Practice (Transition: Level 2)

LEARNING OBJECTIVES

1. To apply theoretical concepts and gain experience in:

    a) evaluating clients
    b) establishing treatment goals
    c) planning and implementing treatment
    d) modifying treatment
    e) presenting reports - written or oral;

2. To define the Occupational Therapist's role within the facility/agency/program;

3. To develop the skills necessary to carry responsibility for caseloads close to that expected of a new graduate.

EVALUATION

The Competency Based Fieldwork Evaluation (CBFE) is used to evaluate students' performance. Although each supervising therapist evaluates students' performance, it is the ACCE who assigns the letter grade.

CANADIAN ASSOCIATION OF OCCUPATIONAL THERAPY PLACEMENTS

Students who are interested in doing their first clinical placement in another province may do so by applying to the Canadian Association of Occupational Therapists (CAOT). This application process is organized by the ACCE, who will notify students of the application deadlines in the Fall of Term A. The cost for this application is $45.

Acceptance to a CAOT placement depends on the availabilities of the facilities in the different provinces.

INTERNATIONAL PLACEMENTS

POLICY

Eligibility Criteria

1. To be considered for a placement outside Canada, students must be approved by the Academic Coordinator of Clinical Education. Prior to making a recommendation, the Clinical Coordinator will require the student to demonstrate the following criteria:

    a) The student must have maintained a minimum academic standing of a **GPA of 3.5 (B+)** and have progressed through the program with no conditions.

    b) The student must maintain a B+ (75-79%) standing in each of their fieldwork placements prior to the international placement.

    c) The student must demonstrate strong interpersonal skills, including tact and diplomacy, and well developed judgement skills as documented on previous performance evaluations (Competency Based Fieldwork Evaluation (CBFE).

2. The student applying for an international placement shall agree to accept responsibility for:

    a) Cost of medical coverage (student already has access to some medical coverage, as a result of the fee paid to Student's Society).

    b) Obtaining a visa (this includes obtaining information from specific embassy/consulate re: if a specific student visa is required, if a letter from fieldwork coordinator and/or letter from facility re: purpose of stay is needed).

    c) Accommodation (at times, the clinical coordinator/immediate supervisor may be willing to assist in this area, but this cannot be counted on at all times, therefore the student is responsible for finding accommodation and assuming all costs. Often, embassies/consulates or tourism boards can help in this area).

    d) Travel (confirmation of airplane tickets should only be carried out once the fieldwork coordinator has confirmed the international placement). The student is responsible for all travel costs. Travel arrangements cannot conflict with examination period.

    e) Cost of supervision in countries where there is a fee for supervision (at times this is encountered; if it does happen, the student must to be prepared to pay this extra fee. This is not the responsibility of the University.

    f) Malpractice Insurance (each student has coverage for contingent malpractice insurance; at times, this insurance is not considered sufficient enough by certain facilities; if that is the case, the student is responsible for the payment of any extra insurance coverage requested by the facility).

PROCEDURE

NOTE: All students will be given the guidelines for international placements during the Winter Term of first year. If a student is considering this option, he/she must initiate the request for an international

placement with the Academic Coordinator of Clinical Education at least one year prior to the placement.

At least 12 months before the onset of the applicable fieldwork block, the student must request in writing, to the Academic Coordinator of Clinical Education, his/her wish to complete a fieldwork placement outside of Canada.

Exact date deadlines for international placement applications will be announced during the Fall semester of second year.

The letter should state:

1. the country of desired destination, indicating an awareness of cultural, gender and social differences and environment;
2. why the student would like to do an international placement in that country;
3. the requested placement session for completing this experience.

International placements are a privilege and are subject to the approval of the Clinical Coordinator/Occupational Therapy Faculty. The student shall obtain a letter of reference from one fieldwork supervisor and one faculty member to support the application to participate in an out-of-country placement. These letters of reference must be forwarded directly to Academic Coordinator of Clinical Education (ACCE).

Once all the documentation is submitted, the ACCE will assess the suitability of the request based on the above criteria. If there is a need, the ACCE has the right to call upon the Occupational Therapy Faculty to assess the student's eligibility for an international placement.

The student will then be advised in writing, by the ACCE, whether he/she has been granted approval for an international placement.

RESTRICTIONS

The student will be granted one international placement per academic year, in U2 and U3 respectively, for a maximum of two placements, with the following restrictions:

1. The countries chosen must be members of the World Federation of Occupational Therapy. The School reserves the right to approve the qualifications of the supervising therapist.

2. The student must choose within the list of approved international placements. The School will not develop more than five new international placements per year.

3. The School reserves the right to limit the total number of international placements organized per year.

4. Students may apply for a maximum of two international placements, overall, in the following combination:

   (a) one in the US and one overseas; or
   (b) two in the US

   Both placements cannot be overseas.

5. A second international placement may be undertaken only if the student has performed satisfactorily in the first international placement.

6. The first opportunity for a student to do an international placement will be in the summer clinical term following U2 in Clinical Affiliation III (580-321C). This will be scheduled in either the second or third block of U2 summer clinical affiliations.

7. The international placement is contingent on maintaining academic and clinical standings prior to departure. Should these conditions not be met, the ACCE reserves the right to cancel the international placement and to reassign the student locally.

RESPONSIBILITIES

Student:

The student will:

1. Commit to the placement through a letter of intent outlining the request.

2. The student will have accepted responsibility for the following:

    a) Cost of medical coverage
    b) Obtaining a visa
    c) Accommodation
    d) Travel
    e) Cost of supervision in countries where there is a fee for supervision
    f) Malpractice Insurance
    g) Cost for any cancellation

    The fee paid by the student to the Student's Society, annually, provides medical coverage; it is the student's responsibility to inquire if coverage is sufficient for travelling to the country in question.

    McGill University will also provide for worker's compensation, so in the case of a work-related accident, there is full coverage, no matter where the placement will take place (procedure to follow in the event of an accident will be made available to the student).

    McGill University also provides contingent malpractice insurance. In the event that this insurance is deemed insufficient by the facility, it is the student's responsibility to purchase additional coverage.

    Be responsible with permission of the ACCE for writing a letter to the Field Coordinator requesting placement in one of their affiliated facilities.

3. Write a letter of introduction to the National Occupational Therapy Association of the country or write to the coordinator of the school or facility requesting permission for a placement in which he/she wishes to complete his/her fieldwork. The following should be included in the letter:

    a) Permission has been granted from McGill University - Occupational Therapy Program to investigate the possibility of completing fieldwork in that country.
    b) Reasons for seeking fieldwork in that country.
    c) Dates and length of placement.
    d) A request for a list of universities or facilities to contact for fieldwork opportunities.

4. Be responsible for timely fulfilment of all requirements necessary for entry into that country i.e. student visa

(if required), medical preparation (i.e. immunization/vaccination) and coverage, financial obligations (i.e. trave and accommodations arrangements, coverage of extra malpractice insurance (if required).

5. Be knowledgeable in the language of origin of the country he/she has selected.

6. Provide the Academic Coordinator of Clinical Education with copies of correspondence between student and facility offering the placement. The student should not call or write to the facility without prior permission from the ACCE.

7. Continue correspondence with the National Association, university or facility to ensure requirements of the facility and McGill University - Occupational Therapy Fieldwork Program are met.

8. Begin fieldwork.

9. Agree to complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements and ensure that the CBFE are completed at the Mid-Term and Final. At the end of the placement the student must submit a completed copy of the CBFE to the ACCE.

   A representative from the fieldwork facility and/or the student will contact the Academic Coordinator of Clinical Education or the Associate Director of the Occupational Therapy Program if specific concerns arise during the placement.

Fieldwork Facility:

The fieldwork facility will:

1. Provide the following information in writing, in order to meet the fieldwork site approval criteria:

   a) Documents required as per institution guidelines.
   b) An abbreviated résumé of the supervising therapist(s)

   The above must be forwarded to:

   Academic Coordinator of Clinical Education
   Occupational Therapy Program
   School of Physical & Occupational Therapy
   McGill University
   3654 Drummond Street
   Montréal, Québec
   Canada H3G 1Y5
   Telephone: (514) 398-6561 / Fax: (514) 398-6360

2. Ensure that the Coordinator of Occupational Therapy Services/Occupational Therapy Clinical Supervisor at the Facility will agree to complete McGill University - School of Physical & Occupational Therapy Fieldwork Evaluation Forms.

3. Sign a cooperation agreement between McGill University and the Facility, prior commencement of clinical placement and define a back-up plan within the facility or another agency in case of cancellation of the rotation.

4. Commit to placement (specific dates to be determined and approved by both Academic Coordinator of Clinical Education and Supervising Occupational Therapist) in writing.

5. Ensure that the Occupation Therapist who will be supervising the student will have knowledge of the English or French language (oral and written, in order to be able to communicate with the Academic Coordinator of Clinical Education).

Academic Coordinator of Clinical Education:

The Academic Coordinator of Clinical Education (ACCE) will:

1. Review the student's application and will approve the request based on established Eligibility Criteria (see page 10).

2. Request an abbreviated résumé for the Occupational Therapy Department and the potential supervising therapist, including educational background and years of experience directly supervising students. Please note that in order to supervise a student, the therapist must have had at least one year of clinical experience and must be certified/registered according to the standards of the host country.

3. Ensure that two copies of a affiliation contract have been forwarded and returned signed by the receiving Facility, upon receipt of documentation fulfilling requirements of Occupational Therapy Fieldwork Education Site Approval Guidelines.

4. Forward to the Facility:

    a) a letter of confirmation for the placement
    b) a copy of the affiliation agreement signed by all parties (student(s), Facility and McGill University)
    c) an outline of the curriculum
    d) School of Physical & Occupational Therapy Course Guide(s)
    e) expectations for student performance/fieldwork objectives
    f) policies related to:
        i. student assignments in clinical settings
        ii. time loss
        iii. failure during a placement
        iv. Student Performance Report Form
        v. Student Evaluation of Placement Form

5. Notify student to finalize travel and accommodation arrangements.

6. Provide resource material for supervisor (when necessary) which will be delivered by the student.

7. Initiate contact with facility via phone or Fax or E-mail at midterm in order to obtain feedback re: progress in placement, as well as at the end of placement.

8. Write a letter of appreciation to facility and request letter of permission to forward name and address of approved facility to CAOT placement service, therefore making formal approval status of the facility.

INTERNATIONAL PLACEMENTS SCHEDULE

Fall Term (U2): reminder to students of deadline for applying for international placements

Requests after this period will not be considered

RESPONSIBILITIES OF STUDENT	SUGGESTED TARGET DATES
Request the international placement (or Item # 1)	12 months prior to placement. Student must respect deadline provided by the ACCE.
Accept responsibility for all items mentioned in #2 (or Item 2)	Immediately upon acceptance of placement by ACCE
Find the placement/facility and/or select from list of available placements and write a letter requesting a placement (or Item 3)	Immediately upon being granted approval for the placement by the ACCE
Be responsible for all requirements for entry into the country of choice (or Item 4)	ongoing
Keep ACCE informed of all communications and/or provide copies of correspondence with the facility (or Item 6)	ongoing
Continue correspondence with the facility and the University in order to ensure that all requirements are met (or Item 7)	ongoing
Must consider a contingency plan (placement in Quebec or outside Quebec) if the international placement is cancelled	ongoing
Agree to complete student evaluation of placement and ensure that PEOTS are completed at Mid-Term and Final	end of placement

III NON-TRADITIONAL COMMUNITY PLACEMENTS IN OCCUPATIONAL THERAPY

INTRODUCTION

The undergraduate program in Occupational Therapy at McGill is designed to equip the students with the skills, attitudes, and knowledge needed for a career in clinical practice and/or to enter graduate studies in Rehabilitation Science or a related discipline.

Philosophy of the New Occupational Therapy Program at McGill University

Throughout the curriculum, a life span approach is implemented. Self-directed learning is encouraged throughout the curriculum. There is an increased emphasis on health, wellness, health promotion and disease prevention. There is an increased emphasis on management, entrepreneurial and communication skills to participate in expanding professional roles (e.g. consulting, marketing, client advocacy, community program development, etc.).

New Trends in Occupational Therapy Roles

Occupational therapists are more frequently engaged in private clinical practice or employed as consultants by industry, insurance companies, schools and government agencies. There is a broadening scope of practice (i.e. promotion of health and prevention of illness and disability such that it is not just medically based).

The promotion of health and prevention of illness and disability orientation of the Health Care System in Québec

Consumers are playing a more active role in defining their needs. As a result of the restructuring of health care delivery, many rehabilitation services to various clientele (e.g. psychiatry, mental retardation, substance abuse, Alzheimer's, etc.) are based in community agencies.

The Occupational Therapy Fieldwork Program at McGill

Clinical Affiliation commences in first year and continues at set intervals throughout the three years of the program. The objectives for each fieldwork placement will vary, according to the student level. Each student will have the opportunity to develop clinical skills, clinical reasoning, and professional judgement, in a variety of settings. A total of approximately 1100 hours will be completed in the clinical/community settings; this includes a preparatory course in first, second, and third year. By the end of the program, each student will have completed five rotations, full-time. Each student is exposed to a variety of clientele (e.g. nursing homes, long-term care institutions, acute care hospitals, rehabilitation centres, CLSCs, etc.; infants, school-aged children, elderly, young adults).

GENERAL PURPOSE OF THIS PLACEMENT

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into non-traditional settings
- to produce a therapist more skilful in program development
- to gain experience in identifying clients/agency needs
- to become familiar with the sociocultural environment of the client(s)
- to gain experience in resourcefulness
- to assess program needs
- to provide staff with an increased understanding of the role of Occupational Therapy within the

community
- to produce a therapist who will be able to relate to both lay and professional people interested in health services

STRUCTURE AND ORGANIZATION

Five or six weeks full-time placement (the second U2 placement, Clinical Affiliation III - 580-321C) will consist of 6 weeks and a U3 placement will consist of 5 weeks). Each agency/program will receive at least 2 students at the same time to encourage peer teaching and learning. Each group of students will be supervised by an Occupational Therapy Faculty Member or an Occupational Therapist working in the community (from now on this person will be referred to as an off-site supervisor).

LEARNING OBJECTIVES

By the end of the placement, the student will have

- defined the occupational therapy role within the agency/program;
- identified the clientele/agency concerns or needs, as they relate to occupational therapy;
- determined how the clientele/agency needs will be met.

SUPERVISION

Each group of students will be supervised by an off-site supervisor (Member of the OEQ) for an average of one day/week. The supervision will be based on a consultative model; the supervisor will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site supervisor will also assist the student in affirming his/her role within the agency/program. Lastly, the supervisor will be used as a 'sounding board' for new ideas/concepts, as well as for new approaches to problem-solving. The students will be required to keep a journal to assist them with the reflection process as well as to use it as a planning tool for the supervisory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site supervisor.

EVALUATION

A pass/fail system will be in place. A learning contract will be utilized, in order to establish learning objectives and how they will be achieved (resources, strategies and evaluating outcomes). As well, the agency/program will provide feedback to the off-site supervisor at the end of the placement, so that pertinent information concerning student's performance can be considered.

PLAN OF ACTION

At the beginning of the placement, each student will be responsible for:

- determining the occupational therapy scope of practice within the agency/program (e.g. in a school setting, the scope of practice would be that of a consultant to the teaching staff).
- identifying the clientele/agency need(s) (e.g. identifying children with developmental delays).
- analysing the identified needs and prioritizing them, in order to determine how they will be met (e.g. targeting only first grade children, from low income families; the need will be met by developing a screening clinic). Each student will present a plan of action to the off-site supervisor and the contact

person of the agency/program by the end of the first week of the placement, or at the latest, at the beginning of the second week.

This plan will describe how the clientele/agency needs will be identified and met. When writing this plan, the student(s) should consider the following criteria:

- logical
- well sequenced
- well organized (time frame, resources to be targeted, etc.)
- realistic (in terms of time frame)
- thorough (i.e. all aspects pertaining to clientele/agency needs will be explored)

JOURNAL ENTRIES

Each student will be required to keep a journal. These entries may consist of, but not necessarily be restricted to the following:

- observations/comments about one's learning
- difficulties experienced in defining one's roles
- difficulties in obtaining information
- reflection on one's strengths and weaknesses
- reflection on Occupational Therapy theoretical frames of references as they relate to the placement

Closing comments for the journal (daily):

1. Productive tasks of the day
2. Current frustrations
3. Plan for the next day

The journal will not only help the student reflect on his/her learning, but as well, be used as a tool for communicating with the off-site supervisor.

REFERENCES

Bossers, A. et al. (1997). *Understanding the role-emerging fieldwork placement*. DJOT, April 1997, vol. 64, issue 1, pp. 70-81.

Report of the Curriculum Committee, Spring 1995. School of Physical & Occupational Therapy, McGill University.

Heubner, J. & Tryssenaar, J. (1996). *Development of an occupational therapy practice perspective in a homeless shelter: A fieldwork experience*. CJOT, April 1996, vol. 63, no. 1, pp. 24-32.

SCHEDULE

The overall program is made up of 105 credits of academic and clinical courses given over three years in seven semesters which includes the Summer Semester between second and third year. The Clinical Affiliation courses are made up of over 1000 hours of clinical placement and have a value of 18 credits. The incorporation of all

the required clinical hours into this new three-year curriculum has eliminated the necessity of four months of post-graduate internship after graduation as of May 1998.

Students are advised that the Summer Semester of 2000-2001 contains two 6-week placements excluding the holiday dates of May 21, June 24, July 1 and September 4 as applicable.

1999-2000	**Winter Term** (March - April, 2000)	**580-220B**	**6 weeks**	**0 credits**
2000-2001	**Summer Term** (May - June, 2001 or June - July, 2001)	**580-320C**	**6 weeks**	**6 credits**
2000-2001	**Summer Term** (June - July, 2001 or July - September, 2001)	**580-321C**	**6 weeks**	**6 credits**
2001-2002	**Fall Term** (November - December, 2001)	**580-420A**	**5 weeks**	**3 credits**
2001-2002	**Winter Term** (January - February, 2002)	**580-422B**	**5 weeks**	**3 credits**

FIELDWORK POLICIES

Academic Advancement

See section 4.4 Academic Advancement in the Health Sciences Calendar, page 88.

Failure Policy

Clinical Affiliation II (580-320C) and *Clinical Affiliation III (580-321C)* are given letter grades. Students must pass all required courses preceding any fieldwork placement associated with those courses. If a student fails a clinical placement, one remedial clinical placement is allowed. If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the program. The repeated placement will be arranged at the discretion of the ACCE. Satisfactory standing in all required professional courses and clinical placement is mandatory to continue in the program.

Student Attendance Policy

Students are allowed one day of absence in each fieldwork placement. If this is exceeded, the student must make up the time missed.

If the supervisor is absent, he/she must arrange for the student's supervision by another therapist. If the supervisor is a sole/charge therapist, alternative arrangements are made between the ACCE and the supervisor.

Immunization

Before entering the first clinical placement: All students must ensure that their immunization records are complete and show supporting documentation to McGill Student Health Services. McGill Student Health Services maintains an active record list that may be requested by facilities.

Failure to complete the required immunization before the Clinical Periods: This may result in a students non-admission to a clinical facility. This policy applies to all placements including international and CAOT placements.

FIELDWORK RESPONSIBILITIES

A. Clinical supervising therapist

1. To orient the student to the physical layout of the facility, to the Occupational Therapy Department/service (if applicable), to staff, patient case load and assessment/intervention orientation as well as available learning resources such as the library, ward rounds, etc.

2. To review the fieldwork information package sent by the ACCE before the student's arrival in order to plan for the fieldwork placement.

3. To review with the student the plan set out for the fieldwork placement, as well as clarify the student's expectations, preferably within two working days of the student's arrival.

4. To provide the student with learning opportunities commensurate with fieldwork objectives.

5. To provide students with on-going feedback of their performance and provide suggestions for improving that performance if necessary.

6. To monitor student practice as necessary, depending on whether or not the student is inexperienced or experienced, by:

    (a) checking assessments the student proposes to use;
    (b) checking proposed treatment programs;
    (c) checking written reports;
    (d) supervising student practice appropriate to the student's level of experience;
    (e) being available for discussions with the students.

7. To complete and present to the student a mid-term and a final evaluation, as fairly and objectively as possible, using the evaluation forms provided by the ACCE.

8. To return the completed evaluation to the ACCE within requested time lines.

B. Student

1. To behave professionally at all times, i.e., not only in respect to appearance, punctuality, and acceptance of appropriate responsibility, but also in observation of professional ethics and the patient's right to confidentiality.

2. To strive to reach a satisfactory level of professional competence in assessment, program planning, treatment, and report-writing.

3. **To be aware that each fieldwork placement is a gift for learning donated by the facility involved and that the primary function of each facility is to serve its clients or patients. It must be realized that facilities offering specific rotations are subject to last minute change.**

4. To contact the clinical supervisor a minimum of **two weeks** prior to the starting date of the placement by writing a letter to confirm time and place of arrival.

C. Academic Coordinator of Clinical Education

1. To contact facilities prior to assigning students to a facility.

2. To assign students to facilities.

3. To send the evaluations and other course material to the facility prior to the student's arrival.

4. To contact facilities while the student is completing his/her fieldwork placement, so as to receive feedback on his/her performance, as well as answer any queries from the fieldwork supervisor.

5. To mark the evaluation forms upon their return to the School, and if needed, to inform facilities of the results of their evaluation of the student.

6. To encourage students to fill out facility evaluation forms so that this information can be used to provide facilities with constructive feedback.

7. To respond appropriately to concerns or requests made by a facility.

8. To provide on-going support/training to fieldwork supervisors, both on-site and off-site.

9. To review each fieldwork placement with the student and if necessary, develop learning objectives for improved performance at the next placement.

10. To be available for counselling to students who are experiencing difficulties in their clinical placements.

11. To ensure that all fieldwork records are kept up to date.

580-335A - OT PRACTICE II: NEUROLOGICAL CONDITIONS

Section A: Conditions
Section B: OT Applied

Credits: 2

Lecturers: **Conditions:** B. Mazer, N. Paquet
OT Applied: B. Mazer, AM. Spiridigliozzi

COURSE STRUCTURE

This course is divided into 2 sections:

Section A: Conditions - 3 hours per week: lectures and self-directed learning sessions
Section B: OT Applied - 4 hours of lecture/lab per week

LEARNING OUTCOMES

The student will be able to:

1. describe the etiology, pathology, and signs and symptoms of common neurological diseases;
2. outline the medical and/or surgical approach to treatment of the above diseases;
3. appreciate the role of the occupational therapist for given case studies across the life span;
4. be able to formulate a problem list from assessment results and develop treatment objectives (short-term and long-term goals) based on the problem list;
5. be familiar with principles of Occupational Therapy treatment (i.e. neurodevelopmental, sensory integration, motor learning, Brunnstrom, task-oriented, biomechanical, rehabilitative) and utilize critical thinking skills in a problem solving approach;
6. recognize and describe abnormal motor and perceptual/cognitive skills, and determine the underlying performance components of these skills;
7. be able to develop treatment strategies based on assessment results, treatment goals, and theoretical frameworks;
8. utilize a client-centered approach in the treatment of neurological patients of all ages;
9. utilize a self-directed learning approach;
10. describe the impact of neurological conditions on occupational performance.

REQUIRED TEXTS

Perkins, G.D. (1998). *Mosby's Color Atlas and Text of Neurology*. Mosby-Wolfe.

Case-Smith et al. (1996). *Occupational Therapy for Children*.

Zoltan. (1996). *Vision, Perception and Cognition: A Manual for the Evaluation and Treatment of Neurologically Impaired Adult*, (3rd edition).

Trombly. (1995). *Occupational Therapy for Physical Dysfunction*. ***(Also required for OT Practice I: Musculoskeletal Conditions - 580-236B)***

EVALUATION

Section A: Conditions 20%

Section B: OT Applied 80%

580-336B - OT PRACTICE II: NEUROLOGICAL CONDITIONS - Part II

Section C: OT Applied

Credits: 4

Coordinators: **OT Applied:** I. Gélinas, A. Majnemer

COURSE STRUCTURE

There are 4 to 6 hours lecture/lab blocks per week.

LEARNING OUTCOMES

The student will be able to:

1. recognize unique roles and arenas of occupational therapy practice within pediatric, adult and geriatric neurological conditions;
2. apply theoretical frameworks and treatment approaches covered in Term A, to cases and problems presented in this course;
3. promote competence in occupational performance domains across the lifespan;
4. utilize a client-centered approach in the treatment of neurological patients of all ages;
5. be cognizant of the occupational therapist's role in specialized areas (e.g. neonatal intensive care unit) and with special populations (e.g. spinal cord injured);
6. be sensitive to the parent's/family's concerns as well as the ethical considerations involved in working with patients and their families;
7. utilize a self-directed learning approach.

REQUIRED TEXTS

Case-Smith et al. (1996). *Occupational Therapy for Children* .

Trombly. (1995). *Occupational Therapy for Physical Dysfunction*. ***(Also required for OT Practice I: Musculoskeletal Conditions - 580-236B)***

Zoltan. (1996). *Vision, Perception and Cognition: A Manual for the Evaluation and Treatment of Neurologically Impaired Adult*, (3rd edition).

EVALUATION

Quiz	20%
2 Assignments	40%

Final Examination 40%

580-337A - OT PRACTICE III: PSYCHIATRY

Credits: 3

Lecturers: **Section A:** F. Ianni
Section B: S. Laplante

COURSE STRUCTURE

This course is divided into two sections:

Section A: Psychiatric Conditions
Section B: OT as Applied in Psychiatry

SECTION A: PSYCHIATRIC CONDITIONS

COURSE STRUCTURE

One 2-hour block of lectures each week.

LEARNING OUTCOMES

On completion of this section the student will be expected to:

1. recognize the signs and symptoms of psychiatric disorders;
2. understand the theories of etiology;
3. be familiar with medical treatment (i.e., pharmacological, physical, psychotherapeutic).

COURSE CONTENT

This course will introduce the occupational therapy student to the mental status assessment and diagnosis of psychopathology in the adult. Major categories of psychiatric illness will be discussed in depth and will reflect current evolution in epidemiology and population demography.

Topics:

1. Phenomenology: An introduction to signs and symptoms of abnormal human psychology including the major areas of emotion, thought, perception, memory and higher cognitive spheres. Mental status examination and introduction to DSM-111R.

2. Affective Disorders: A discussion of the major categories of mood disorders including overview of the history of psychiatry and mood disorders, epidemiology, etiology, diagnosis and treatments.

3. Schizophrenic disorders and other psychoses: The evolution of society's perception of "madness" throughout the ages will briefly introduce the area of psychiatric illness. Statistics, diagnosis, etiology and current treatment modulation will be discussed.

4. Anxiety states (neuroses): An overview of the history and nosology of anxiety disorders including basic principles of psychoanalysis, phenomenology and other theoretical schools will be presented. Diagnosis and treatment.

5. Personality disorders: A discussion of the basic premises underlying the concept and classification of these issues according to DSM111R.

6. Alcoholism and substance abuse: A look at the impact of drug abuse, especially alcoholism on the individual and society. Categories of alcohol-related psychiatric disorders will be presented.

7. Geropsychiatry: An overview of psychiatric disorders of old age include dementia, affective disorders, paranoid states, etc. Diagnosis and treatment.

8. Selected topics: Introduction to eating disorders, suicidology and sexual disorders, others as announced.

REQUIRED TEXT

Kaplan and Sadock. (1998). *Synopsis of Psychiatry*. (8th edition).

EVALUATION

20% of 580-337A - OT Practice III: Psychiatry

EVALUATION METHOD

To be announced.

SECTION B: OCCUPATIONAL THERAPY AS APPLIED IN PSYCHIATRY

COURSE STRUCTURE

Section B will consist of 2 hours of lectures per week during the first semester.

LEARNING OUTCOMES

On completion of Section B the student will be expected to:

1. integrate the basic concepts of occupational therapy when applied to psychiatric conditions;

2. understand the structure and milieu provided by the psychiatric settings;

3. become familiar with the domains of concerns and the diverse therapeutic tools and methods involved in the Occupational Therapy therapeutic process;

4. understand the use of different treatment modalities and therapeutic use of activities in psychiatry.

COURSE CONTENT

Part 1: Introduction and Theories in Psychiatry

- History of Mental Health and the Psychiatric System
- Occupational Therapy - Domains of Concern
- Theories and Models - Influences on Treatment

Part 2: The Clients

- Introduction to the patient population
- Guest lecturer

Part 3: Assessment

- Assessment and Documentation
- Effective Communication and Therapeutic Use of Self
- Guest lecturer

Part 4: Treatment

- Treatment Planning, Implementation and Termination
- Therapeutic use of Activities
- Guest Lecturer
- An Overview of Child Psychiatry in Occupational Therapy
- Review of Therapeutic Process in Occupational Therapy

REQUIRED TEXTS

Wilson, M. (1996). *Occupational Therapy in Short-Term Psychiatry*. (3nd edition). London, Churchill Livingston.

Wilson, M. (1987). *Occupational Therapy in Long-Term Psychiatry*. (2nd edition). London, Churchill Livingston.

Course Pack. To be purchased.

EVALUATION

Mini-tests on readings		10%
Class assignments		10%
One case study		25%
Final Examination	(Short answers)	55%

N.B. The case study and class assignments must be submitted for this course to be completed.

580-338B - OT PRACTICE IV: MENTAL HEALTH

Credits: 3

Lecturers: S. Beaulieu (Coordinator), B. Tallant, N. Gervais

COURSE STRUCTURE

This course will consist of two-hour lectures and 2 two-hour laboratory sessions weekly for the entire term.

Section 1: Group Dynamics will include the theories of group dynamics and practical application of groups in the practice of occupational therapy.

Section 2: Therapeutic Use of Projective Techniques will include the theory of projection and the therapeutic use of projective media for treating individuals or groups across the life span.

Detailed information on the course content will be distributed at the beginning of the course.

GOAL

On completion of the course, the student should:

1. have acquired the skills and knowledge necessary to use groups and projective techniques in a therapeutic manner with clients;
2. gain some self-awareness and personal growth due to participation/observation in the group and projective process in the lab experiences.

LEARNING OUTCOMES

Section 1: Group Dynamics

On completion of the lecture series, the student will:

1. be familiar with theories of group dynamics;
2. understand group development;
3. be familiar with group observation techniques;
4. design therapeutic groups.

The acquisition of this knowledge will be evaluated through written assignments.

On completion of the laboratories, the student will have:

1. summarized the content and process of a group;
2. designed therapeutic groups;
3. led and co-led groups;
4. evaluated a group session;
5. acquired knowledge of normal behaviour in a group;
6. begun the acquisition of interpersonal and communication skills that facilitate both effective and empathetic

client relationships in a group setting;

7. demonstrated professional ethics and attitudes as well as the acceptance of the responsibilities of being a group leader.

Section 2: Therapeutic Use of Projective Techniques

On completion of the course the student will be expected to:

1. define and discuss the theory of projection;
2. define and discuss the psychotherapeutic process involved in using projective media with individual patients, groups and families;
3. discuss the development of therapeutic themes for individual patients, groups and families;
4. design treatment programs in occupational therapy selecting the appropriate projective media, themes and therapeutic environment for individual and/or groups of patients and families.

On completion of the laboratories, the student should be able to:

1. discuss and select the therapeutic use of projective media for individual patients, groups and families;
2. to discuss ways of grading, presenting, and/or adapting the projective media;
3. understand, through participation as a group member and/or observer, the therapeutic use of projective activities.

REQUIRED TEXTS

Section 1: Group Dynamics

Posthuma, B.W. (1996). *Small Groups in Counselling and Therapy. Process and Leadership.* (2nd edition). Toronto, ON, Allyn and Bacon.

Section 2: Therapeutic Use of Projective Techniques

Course Pack.

Readings will be assigned at the beginning of the course.

REQUIRED SUPPLIES

Section 1: VHS videotape

During the lab sessions, students will co-lead (in pairs) one group. This group will be videotaped to assist students in learning to analyze group content and process. **Students must supply their own videocassette.**

EVALUATION

Detailed information on the evaluation process will be distributed at the beginning of the term.

Section 1:	**Group Dynamics**	60%
Section 2:	**Therapeutic Use of Projective Techniques**	40%

580-339B - STRATEGIES FOR INDEPENDENT LIVING

Credits: 2

Lecturers: E. Gisel (Course Coordinator), C. Perlman

COURSE STRUCTURE

The course will consist of 2-hour lectures and 2-hour laboratory sessions weekly for the entire term.

LEARNING OUTCOMES

On completion of this course the student will be expected to:

1. Assess functional capacity of a patient and teach methods of self-care.
2. Demonstrate the appropriate communication skills when interacting with patients/clients.
3. Assess functional feeding skills, develop a treatment plan and strategies of intervention.
4. Assess wheelchair and adaptive equipment needs.
5. Evaluate architectural barriers and make suggestions for changes.

COURSE CONTENT

- Activities of daily living and living environment
- Dysphagia
- Self care techniques - feeding, dressing, hygiene, skin care, bowel/bladder care
- Wheelchair and positioning evaluation and prescription
- Dressing skills
- Architectural barriers
- Mobility and transfers

REQUIRED TEXTS

Trombly, C. (Ed.) (1995). *Occupational Therapy for Physical Dysfunction*, (4th edition). Baltimore, Williams & Wilkins. *(As required for 580-236B, 580-335A, 580-336B)*

Selected Readings (workbook)

EVALUATION

Written Final Examination	40%
Project	35%
Two Homework Assignments	25%

580-340A - ASSESSMENT OF PERFORMANCE II

Credits: 2

Lecturers: S. Everitt, Guest lecturers**,** T.A.

COURSE STRUCTURE

Four hours per week for 13 weeks: two hours lecture, two hours laboratory. Instructor and student-directed learning.

COURSE TOPICS

Section A **INFORMED DECISION-MAKING IN OCCUPATIONAL ASSESSMENT**

- Introduction
- Critical analysis of assessment tools
- Selection of assessment instruments
- Ethical considerations

Section B **ASSESSMENT OF NEUROMOTOR PERFORMANCE**

- Introduction
- General principles of neuromotor evaluation
- Assessment tools related to neuromotor performance

Section C **ASSESSMENT OF COGNITIVE PERFORMANCE**

- Introduction
- Assessment of cognitive function
- Neuropsychological assessment

Section D **ASSESSMENT OF PSYCHOLOGICAL PERFORMANCE**

- Introduction
- Contemporary psychological assessment in Occupational Therapy
- Subjective vs. Objective assessments

LEARNING OUTCOMES

On completion of the course the student will:

1. Have an awareness of commonly used assessment tools related to occupational performance in the areas of neurological, psychological and neuromotor abilities.

2. Be able to critically evaluate an assessment tool.

3. Be able to choose an appropriate assessment tool consistent with a client-centered approach to therapy.

COURSE OUTLINE

The course outline will be handed out at the first class.

REQUIRED TEXT

Christian, C. and Baum, C. (Eds.). (1997). *Occupational Therapy. Enabling function and well-being*. (2nd edition). Thorofare, NJ, Slack. ***(Also required for Assessment of Performance I - 580-240B)***

COURSE EVALUATION

Two laboratory presentations and hand-outs:	15% each	Total:	30%
Take-home Examination:			70%

580-341B - ASSESSMENT OF PERFORMANCE III

Credits: 3

Lecturers: B. Tallant (Coordinator), B. Mazer

COURSE STRUCTURE

Section 1: Projective Techniques

This section will consist of a two-hour lecture for the first half of the term and a two-hour weekly laboratory session. Section 1 will focus on the use of projective assessments as a measure of psychological performance.

Section 2: Advanced and Computerized Assessment of Daily Living Performance, Environmental Factors and Quality of Life

Section 2 will include advanced and computerized assessment of daily living performance and will address assessment of environmental factors and quality of life issues. A life span approach will be used where applicable.

Detailed information on the course content for each section will be distributed at the beginning of the course.

OVERALL OBJECTIVES

On completion of the course the student should:

1. be aware of the role of subjective assessments in the clinical management of the occupational therapy client;
2. be aware of the impact of quality of life on the occupational therapy client;
3. be aware of research issues in relation to assessment in occupational therapy.

LEARNING OUTCOMES

Section 1: Projective Assessments

On completion of the section the student will be expected to:

1. define and discuss the theory of projection and its relevance to assessment;
2. analyse patient's productions and associations;
3. select, administer and interpret projective assessments used in occupational therapy;
4. assess and interpret a series of patient productions for purposes of change detection;
5. discuss and compare projective assessments and their relative merits for specific psychiatric clients.

Section 2: Advanced and Computerized Assessment of Daily Living Performance, Environmental Factors and Quality of Life

On completion of this section the student will be expected to:

1. discuss and compare computerized assessments and their relative merits for different client populations;
2. formulate and apply assessment plans to differing client cases;
3. select appropriate Quality of Life Scales for different client populations;
4. select and be aware of the methods of administration and interpretation of selected assessments of performance and instrumental activities of daily living.

REQUIRED TEXTS

Section 1: Projective Assessments

Hemphill, B.J. (1983). *The Evaluative Process in Psychiatric Occupational Therapy*, Thorofare, N.J., SLACK Inc.

Course Pack.

Section 2: Advanced and Computerized Assessment of Daily Living Performance, Environmental Factors and Quality of Life

Readings will be assigned at the beginning of the course.

RECOMMENDED TEXT

Section 1: Projective Assessments

Hammer, E., (1971). *Clinical Application of Projective Drawings*, Springfield, IL, Charles C. Thomas, Pub.

EVALUATION

Detailed information on the evaluation process will be handed out to students on the first day of class.