



School of Physical and Occupational Therapy
3654 Drummond Street
Montreal, Quebec
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COURSE GUIDE

B.Sc. (OCCUPATIONAL THERAPY) U-3

1999-2000

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U3 CURRICULA PLAN - 1999-2000 - OCCUPATIONAL THERAPY PROGRAM

FALL: TERM A

WINTER: TERM B

Academic Term (9 wks) + Exams (1 wk) + Clinical IV (5 wks) = Total 15 wks

Clinical I (5 wks) + Academic Term (8 wks) + Exams (2 wks) = Total 15 wks

Academic Term Sept 7 - Nov 5	Exams Nov 8 - 12	Clinical Block Nov 15 - Dec 17	Clinical Block Jan 4 - Feb 4	Academic Term Feb 8 - Apr 14	Exams Apr 16 - 30
582-401A RESEARCH METHODS 3cr		580-420A CLINICAL AFFILIATION IV 3cr	580-422B CLINICAL AFFILIATION V 3cr	582-445B ADMINISTRATION / MANAGEMENT 4cr	
580-424A SPLINTING & ORTHOTICS 2cr				580-440B PRE & VOCATIONAL REHABILITATION 2cr	
580-436A OT PRACTICE V: Medical & Surgical Conditions 3cr				580-441B ADVANCED TECHNOLOGY/ ERGONOMICS 2cr	
580-438A PSYCHOSOCIAL THEORIES IN OT 3cr				580-437D OT & COMMUNITY MENTAL HEALTH 3cr	
580-437D OT & COMMUNITY MENTAL HEALTH Q				PROFESSIONAL SPECIALTY COURSE (Term A or B) 2cr	

Note: 580 - OT
 582 - OT/PT
 A - Fall Term
 B - Winter Term
 D - Fall and Winter Term
 Q - Course continues into next Term

Term A: Sept. 7 to Dec. 17, 1999

Courses: Sept. 7 to Nov. 12, 1999 (to include exam week)

Clinical: Nov. 15 to Dec. 17, 1999

Term B: Jan. 4. to Apr. 28, 2000

Clinical: Jan. 4 to Feb. 4, 2000

Courses: Feb. 7 to Apr. 10, 2000

Exams: Apr. 12 to Apr. 28, 2000

1999-2000 OCCUPATIONAL THERAPY PROGRAM - U3		
Course Number	Course Name	Credits
582-401A	Research Methods	3
580-424A	Splinting and Orthotics	2
580-436A	OT Practice V: Medical & Surgical Conditions	3
580-437D	OT & Community Mental Health	3
580-438A	Psychosocial Theories in OT	3
580-440B	Prevocational & Vocational Rehabilitation	2
580-441B	Advanced Technology/Ergonomics	2
582-445B	Administration/Management	4
Term A or B	One professional specialty course	2
580-420A	Clinical Affiliation IV	3
580-422B	Clinical Affiliation V	3
TERMS A & B - TOTAL CREDITS		30

1999-2000 PHYSICAL THERAPY PROGRAM - U3		
Course Number	Course Name	Credits
582-401A	Research Methods	3
581-432A	Pain Management	3
581-433A	Coordinated Rehabilitation I	3
581-420A	Clinical Affiliation IV	3
581-421B	Clinical Affiliation V	3
581-434B	Biomechanics	3
581-435B	Coordinated Rehabilitation II	3
581-438B	Fitness/Injury Management	2
582-445B	Administration/Management	4
582-446B	Current Topics in Rehabilitation	2
582-447B	Specialized Areas of Practice	2
TERMS A & B - TOTAL CREDITS		31

582-401A - RESEARCH METHODS

Credits: 3

Coordinator/Lecturer: N. Korner-Bitensky

Topic Experts: S. Wood-Dauphinee, N. Korner-Bitensky, I. Gélinas, B. Mazer, J. Fung, L. Snider, N. Paquet, P. McKinley

STRUCTURE

Two 2-hour interactive sessions per week for nine weeks in addition to 1 hour weekly of self-directed learning or seminar work.

OBJECTIVES

This course is not designed to create a researcher. It will enable the graduating therapist to make sense of the vast amount of literature in rehabilitation.

Upon completing the course the student will be able to:

1. Search various computer and off-line data sources to review a topic of interest.
2. Critique an article, presentation at a conference or seminar. This ability to critique will enable the student to make informed treatment choices with clients.
3. Understand how to choose a measurement tool for use in clinical practice. The choice will vary according to the student's purpose.
4. Sit on an Ethics Committee that reviews rehabilitation protocols. Almost all hospitals have formed or are now forming Ethics Committees.
5. Design a program evaluation. There are many new programs being initiated in rehabilitation. With these initiatives comes the responsibility of evaluation.
6. Understand various research designs and when they are used.
7. Be aware of the main areas of research in rehabilitation that are currently underway.
8. Be able to prepare a questionnaire for use with other health professionals, with family or with clients. Questionnaire design requires special knowledge if the responses are to be of any value.
9. Understand the study of cost, cost-effectiveness and cost-benefit. These issues are especially relevant for therapists today!
10. Last but not least, it is hoped that the student will see participation in research as a way of life for the graduate therapist and not a dreaded event to be discarded after graduation.

COURSE SCHEDULE

Day and Time to be announced

# 1	<i>overview, surveys, sampling frame</i>	# 2	<i>questionnaire design, outcome measures</i>
#3	<i>statistics that tell the wrong story</i>	#4	<i>cross-sectional studies</i>
#5	<i>reliability, validity, diagnostics</i>	#6	<i>cohort studies</i>
#7	<i>case-control studies</i>	#8	<i>association versus cause</i>
#9	<i>randomized clinical trials</i>	#10	<i>evidence based therapy</i>
			In class Quiz (45 minutes)
#11	Thanksgiving Holiday	#12	<i>quasi-experimental design</i>
#13	<i>asking a research question/ethics in research</i>	#14	<i>cross-over studies</i>
#15	<i>critical review process</i>		<i>single subject design</i>
#17	<i>program evaluation</i>	#16	<i>critical review process</i>
		#18	<i>cost, cost-effectiveness, gambles</i>
		Articles to be placed in topic leaders box.	
#19	<i>selected topics discussion</i>	#20	<i>seminars for selected topics</i>
	In class Quiz (45 minutes)		<i>held in small classrooms (TBA)</i>

REQUIRED TEXT

No required text. Syllabus and readings will be supplied. Reference readings for specific topics are indicated.

EVALUATION

Oral Presentation of Topic	10 %
Written Presentation of Topic	25 %
Quiz #1	30 %
Quiz #2	35 %

582-445B - ADMINISTRATION/MANAGEMENT

Credits: 4

Lecturers: E. Aston-McCrimmon (Co-Coordinator), L. Snider (Co-Coordinator), C. Storr (Co-Coordinator)
P. Allard, A. Di Re, Guest Lecturers

COURSE STRUCTURE

The course will consist of lectures/seminars/presentations over an eight week period on Monday and Wednesday mornings from 9:30 a.m. - 12:30 p.m. starting February 7, 2000.

OBJECTIVES

As the practice of Physical and Occupational Therapy shifts from a hospital/rehabilitation base to ambulatory care, the community and the private sector, increased business and management skills are needed. This course is designed to incorporate business administration as it pertains to the health field to include organizational and management knowledge for the development of skills and behaviours required to support practice both in the public and the private sector. It incorporates an understanding of organizational and change theory, as well as marketing and entrepreneurial strategies.

These skills and behaviours in administration and management are developed and refined with experience gained following graduation, and are not expected to be well developed in the entry-level practitioner.

Thus, the skills and behaviours anticipated in the new graduate will involve knowing where and how to obtain the supports, mentoring and resources to fulfill the responsibilities related to administration and management functions which may be required in the work situation. Life-long learning in the area of administration/management is an anticipated outcome.

The goal of this course therefore is to sensitize students to the administrative and management processes appropriate for the changing roles that the physical or occupational therapy graduate will have in the years to come.

Based on a knowledge of organizational theory, management, health care and human resource policies, the student shall be able to:

1. discuss the professions of Occupational and Physical Therapy in relation to legislation, health professional organizations and unionization;
2. relate professional ethics and the law to professional practice;
3. discuss how the dimensions of Codes of Ethics apply to the practice of Occupational Therapy, Physical Therapy and other health professions;
4. given real or simulated public and private rehabilitation facility situations:
 - a) identify the administrative tasks involved in their management;
 - b) identify and prepare pertinent facility records and reports and indicate how they are used and maintained;

- c) design a rehabilitation facility for each setting taking into account the specific client population needs and the economic, architectural and resource factors and merits;
 - d) plan a marketing strategy for each of the designed facilities;
 - e) outline a total quality management control program including risk and utilization parameters;
5. be sensitive to the intricacies of interpersonal relationships and team interactions within the health care system;
6. identify, critique and provide positive reinforcing recommendations for interpersonal relationships and team management.

COURSE CONTENT

A. Principles of Organizational Theory:

- C organizational design and behaviour theory
- C development and strategy
- C organizational change theory and strategy
- C organizational restructuring
- C governance

B. Principles of Management Theory to Include:

- C development of mission and mandate
- C leadership theory
- C facilitation of teams
- C program and service delivery planning
- C matrix and program management and evaluation
- C quality management, quality improvement, quality assurance, risk management
- C policies and procedures - purpose and development
- C departmental planning in public and private sectors

C. Strategic Information Management:

- C outcome/effectiveness indicators and charting
- C management information, productivity and service utilization
- C client-based information systems (case mix, grouping, methodologies and clinical records)
- C market and business analysis
- C privacy/confidentiality requirements and responsibilities

D. Human Resource Policy, Planning and Management:

- C recruitment, selection, retention, evaluation
- C compensation systems
- C supervision, delegation and facilitation
- C Labour relations - impact on workplace, work teams, conflict resolution
- C curriculum vitae/resume - preparing and interpreting
- C job interview process, job preview process
- C employee assistance, e.g. stress management counselling
- C alternative employment contracts
- C equity issues

E. Fiscal Resource Management Including:

- C budgeting process
- C productivity

C cost-effectiveness

F. Modes of Service Delivery Including:

C institutional practice

C private practice

C community based practice including health management organizations (HMO's), local community health clinics (CLSC's)

C industrial/worksite based practice

C evidence-based practice

G. Standards of Practice Issues:

C efficiency

C efficacy

C appropriateness

C cost effectiveness

C outcome measures

C ethical/legal considerations

H. Marketing and Entrepreneurial Strategies:

C environmental analysis

C developing the business plan and requests for proposal

C outsourcing on non-core competencies, e.g. technical writing, public relations

C strategic marketing

- business marketing, strategic business planning

- social marketing

REQUIRED TEXTS

Scott, R. (1998). *Professional Ethics: A Guide for Rehabilitation Professionals*. Mosby.

Parsons, A.H. & Parsons P.H. *Health Care Ethics*. Wall & Emerson Inc.

The Professional Code - L'Éditeur Officiel du Québec.

Schuch, C.P. & Sekerak, D.K. (1996). *Management in Rehabilitation, A Case-Study Approach*. Philadelphia, PA. F.A. Davis Company.

RECOMMENDED READINGS

Bailey, D.M. & Schwartzberg, S.L. *Ethical and Legal Dilemmas in Occupational Therapy*. F.A. Davis.

Blair, J. & Gray, M. (1985). *The Occupational Therapy Manager*. The American Occupational Therapy Association.

Hickok, R.J. *Physical Therapy Administration and Management*, (2nd edition). American Physical Therapy Association.

Physiotherapy/Occupational Therapy Workload Measurement System. Health and Welfare Canada, 1988.

Purtilo, R. (1993). *Ethical Dimensions in the Health Professions*. W.B. Saunders.

The Canadian Patient's Book of Rights - Lorne Elkin Rozovsky.

Treatment and Progress Records: A Guide to the Preparation and Keeping of Treatment and Progress Records
- Canadian Physiotherapy Association.

Walter, J. (1993). *Physical Therapy Management*. Mosby.

Clinical Practice Guidelines, A Discussion Paper for the Canadian Physiotherapy Association - The Canadian
Physiotherapy Association, May 1996.

STUDENT EVALUATION

Presentation	10%
Paper	45%
Written Short Answer Examination	45%

580-420A - CLINICAL AFFILIATION IV

580-422B - CLINICAL AFFILIATION V

Credits: 3 580-420A
 3 580-422B

Coordinator: C. Storr, MBA, OT(C), erg.
 Academic Coordinator of Clinical Education - Occupational Therapy Program
 A. Thomas, erg.
 Professional Assistant - Fieldwork

COURSE STRUCTURE

These fieldwork placements will take place in two 5 week periods, scheduled between November 1999 and February 2000. Fieldwork placements will be arranged with McGill teaching hospitals, with McGill affiliated hospitals and centres, as well as with other facilities/agencies in the Quebec region. At times students may request fieldwork rotations outside of the Quebec region (these regions may include the US and overseas). The Occupational Therapy Program has developed specific guidelines pertaining to international placements. Please refer to page 14 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.

This course is structured as follows:

- I Fieldwork Seminars**
 - II Traditional Fieldwork Placements**
 - III Non-Traditional Fieldwork Placements**
-
-

I FIELDWORK SEMINARS

In Term B, U3 students will participate in a series of 2 seminars which will cover issues related to entry level clinicians.

STRUCTURE

To be announced.

LEARNING OBJECTIVES

The student will:

1. be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA;
2. acquire strategies in improving his/her employability.

CONTENT

- C** Licensure: OE, CAOT/AOTA
- C** Job interviews/Curriculum vitae
- C** Options after graduation: Graduate studies

EVALUATION

Attendance will be compulsory.

At the beginning of Term A, each U3 student will meet with the Academic Clinical Coordinators, to review the fieldwork placements completed in the summer of 1999, as well as discuss the student's strengths and weaknesses. As well, a profile of the student's fieldwork experiences will be compiled so as to determine priorities and choices for U3 fieldwork placements.

A form will be filled out by each student, at the end of each fieldwork placement. Once completed, the student will share his/her comments with the supervisor; a copy of this form will be sent to the Academic Coordinator of Clinical Education.

At the end of each year, each student will evaluate the clinical affiliation component (this will include the fieldwork seminars, as well as evaluating the work of the ACCE). At the end of each year, facilities having participated in the supervision of students will also evaluate the work of the ACCE.

II TRADITIONAL FIELDWORK PLACEMENTS

CLINICAL AFFILIATION IV and V: OT Practice (Consolidation: Level 3)

LEARNING OBJECTIVES

To enable the student to:

1. further pursue the application of theoretical concepts to the fieldwork setting;
2. continue gaining experience in:
 - (a) evaluating clients
 - (b) establishing treatment goals
 - (c) planning and implementing treatment
 - (d) modifying treatment
 - (e) presenting reports - written or oral;
3. continue defining the Occupational Therapist's role within the facility/agency/program;
4. master the skills necessary to carry responsibility for caseloads to that expected of a new graduate.

EVALUATION

Since 1987-1988, the Performance Evaluation of Occupational Therapy Students (PEOTS) has been used to evaluate students in traditional fieldwork placements. Based on the CAOT Skills Profile, PEOTS was developed

in order to provide an evaluation of student’s clinical skills. Although each supervising therapist evaluates student performance, it is the ACCE who determines the PEOTS score.

III NON-TRADITIONAL PLACEMENTS

Please refer to page 21 for further details on learning objectives and evaluation methods.

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.

1997-1998	Winter Term (March - April, 1998)	580-220B	6 weeks	0 credits
1998-1999	Summer Term (May 3 - June 11, 1999 or June 14 - July 23, 1999)	580-320C	6 weeks	6 credits
1998-1999	Summer Term (June 14 - July 23, 1999 or July 26 - September 3, 1999)	580-321C	6 weeks	6 credits
1999-2000	Fall Term (November 15 - December 17, 1999)	580-420A	5 weeks	3 credits
1999-2000	Winter Term (January 4 - February 4, 2000)	580-422B	5 weeks	3 credits

FIELDWORK POLICIES

Academic Advancement

See section 4.4 Academic Advancement in the Health Sciences Calendar, page 81.

Failure Policy

580-420A and 580-422B are pass or fail courses. Students must pass all required courses preceding any fieldwork placement associated with those courses. If a student fails a fieldwork placement, one remedial fieldwork 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 placements are mandatory to be able to continue in this 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 to find a solution.

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 packages 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.
4. To contact the fieldwork supervisor 10 days prior to the starting date of the placement, to confirm time and place of arrival and receive any necessary last minute instructions.

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 appropriate information 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, help him work out plans 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.

GUIDELINES FOR 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 (specifically under professional relationships and professional competency section of the Performance Evaluation of Occupational Therapy Students (PEOTS), with a minimum rating of S (requiring supervision).
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. 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).
 - 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 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 Fall 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.

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 year, in U2 and U3, 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 develop not 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 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.

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. travel 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. Apply for a placement in Québec/outside Québec for the following reason: if the international placement is cancelled (host country cancels, student does not maintain academic/fieldwork standing), the student will still be able to complete the required fieldwork.
9. Begin fieldwork.
10. Agree to complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements and ensure that the PEOTS are completed at the Mid-Term and Final. At the end of the placement the student must submit a completed copy of the PEOTS 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 and ensure that the PEOTS are completed at the Mid-Term 2nd final. The student must submit a completed copy of the PEOTS to the ACCE.

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 Canadian Association of Occupational Therapists (CAOT) Occupational Therapy Fieldwork Education Site Approval 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 14).
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 cooperation agreement 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 cooperation 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 (U1): orientation and introduction to International Placements (hand out guidelines)

Winter Term (U1): reminder to students of deadline for applying for international placements

Integration Block (U1): deadline for initiating request for an international placement in second year

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 <u>all</u> 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 <u>consider</u> 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

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, CLSC's, etc.; infants, school-aged children, elderly, young adults).

GENERAL PURPOSE OF THIS PLACEMENT

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

- C to provide staff with an increased understanding of the role of Occupational Therapy within the community
- C 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 (a 2nd year placement, rotation #3, will consist of 6 weeks and a 3rd year 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).

OBJECTIVES

By the end of the placement, the student will have

- C defined the occupational therapy role within the agency/program;
- C identified the clientele/agency concerns or needs, as they relate to occupational therapy;
- C 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.

**580-436A - OT PRACTICE V:
MEDICAL & SURGICAL CONDITIONS**

Credits: 3

Lecturer: A. Thomas (Coordinator)

STRUCTURE

This course is divided in two sections:

Section A: Conditions

Section B: Occupational Therapy Applied to Medical & Surgical Conditions

LEARNING OBJECTIVES

The student will be able to:

1. describe the etiology, pathophysiology and clinical features of medical and surgical conditions seen in rehabilitation;
2. outline the medical and/or the surgical approach to the treatment of these conditions;
3. understand how these conditions impact on an individual's occupational performance;
4. assess the performance components and environmental conditions which are affected by these conditions;
5. using a case-based learning format will be able to develop treatment strategies based on assessment results, treatment goals and theoretical frameworks;
6. utilize a self-directed learning approach;
7. understand the client-centred, team approach that is ideally employed with this population based on the combined OT/PT seminars which occur in the first week of classes.

REQUIRED TEXT

Trombly, C. (1995). *Occupational Therapy for Physical Dysfunction*, (4th edition). Williams & Wilkins.
(As required for 580-236B, 580-335A, 580-336B, 580-339B)

EVALUATION

Section A: Mid-Term examination 40%

Section B: Final Examination 60%

580-437D - OT AND COMMUNITY MENTAL HEALTH

Credits: 3

Lecturers: F. Colas, Occupational Therapy Faculty

COURSE STRUCTURE

This course is divided into two parts::

Part I: Focus on Occupational Therapy in the Community Mental Health

Part II: Focus on Occupational Therapy in the Community

PART 1: FOCUS ON OCCUPATIONAL THERAPY IN COMMUNITY MENTAL HEALTH

STRUCTURE

This part consists of one 2½ hour case based lecture or seminar per week for eight weeks to focus on the chronic psychiatric patient and their integration or reintegration into the community.

LEARNING OBJECTIVES

The student therapist will:

1. acquire understanding of a model of community health as it relates to the impact of sociodemographic risk factors/socio cultural conditions as they impact on the practice of occupational therapy in the community;
2. understand the role of the occupational therapist in prevention and education in the community;
3. critically analyse selected community programs in the context of a community health model.

CONTENT

A detailed course outline will be handed out on the first day of class.

REQUIRED READINGS

Course Pack.

EVALUATION

Mid-term Examination 50%

PART II: FOCUS ON OCCUPATIONAL THERAPY IN THE COMMUNITY

STRUCTURE

This course consists of one 2½ hour lecture or case-based seminar per week for eight weeks to focus on sociodemographic risk factors as they apply to international community health.

LEARNING OBJECTIVES

The student therapist will gain an understanding of the clients needs, assets and limitations and how to enable the client to determine the most appropriate match for living, working, and leisure/social needs in the community.

CONTENT

A detailed course outline will be distributed during the first class of Part II.

REQUIRED READINGS

Course Pack.

EVALUATION

To be announced.

580-438A - PSYCHOSOCIAL THEORIES IN OT

Credits: 3

Lecturers: B. Tallant (Coordinator)

COURSE STRUCTURE

This course will consist of 4½ hours per week for nine weeks of lectures and/or problem-solving case-based discussions.

LEARNING OBJECTIVES

The course is designed to acquaint the student with the current theoretical frames of reference used in occupational therapy for clients with psychosocial dysfunction. The implementation of these theories in the practice of occupational therapy will be discussed. On completion of this section the student will be expected to:

1. define the terminology inherent in each of the theories;
2. discuss and compare the theories and their relevant merits for specific psychiatric clients and/or group of clients with psychosocial dysfunction;
3. design treatment programs in occupational therapy selecting the appropriate theoretical frame of reference, evaluation procedures, therapeutic activities and relationships for a specific individual and/or group of clients with psychosocial dysfunction.

CONTENT

Theoretical Frames of Reference

- Object Relations Frame of Reference
- Life Span Developments Frame of Reference
- Behavioral Frame of Reference
- Cognitive - Behavioral Frame of Reference
- Occupational Behavior Frames of Reference
 - Model of Human Occupation (MOHO)
 - Canadian Model of Occupational Performance (CMOP)

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

REQUIRED TEXTS

Bruce & Borg. (1993). *Psychosocial Occupational Therapy: Frames of Reference for Intervention*, (2nd edition), Thorofare, NJ, Slack Inc.

Readings will be assigned on the first day of class.

RECOMMENDED TEXT

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

Stein, F. & Cutler, S.K. (1998). *Psychosocial Occupational Therapy: A Holistic Approach*, San Diego, Singular Publishing Group, Inc.

EVALUATION

Will be explained in detail on the first day of class.

580-440B - PREVOCATIONAL AND VOCATIONAL REHABILITATION

Credits: 2

Lecturer: E. Levine

COURSE STRUCTURE

Lectures will provide a background knowledge of work theory and its direct application to prevocational and vocational rehabilitation. The course will provide sample of assessment and reporting procedures currently in use in this field. There will be discussions of prevocational and vocational training in the following areas:

1. Adult Psychiatry (including substance abusers)
2. The physically impaired, specifically the work and car accident victim

The course consists of 4 hours per week for eight weeks.

LEARNING OBJECTIVES

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

1. define and discuss work theory;
2. define and discuss ergonomics and its application in rehabilitation;
3. appreciate how to design prevocational/vocational programmes selecting appropriate media and techniques for varying patient populations;
4. apply report writing techniques.

CONTENT

- C Work theory
- C Ergonomics
- C Prevocational Training with the psychiatric adult and substance abuser
- C Jacob's assessment
- C Physical work capacities
- C Evaluation of ability to return to a specific job
- C Work simulation vs. Work samples
- C Adaptability of work site
- C Various populations - Head trauma, back, cardiac, cumulative trauma disorders
- C Visits to various centres

REQUIRED READINGS

The articles prepared for this class are required.

Supplementary reading: Grandjean, E. *Fitting the Task to the Man*.

EVALUATION

Work Analysis	40%
Site-Visit Report	20%
Final Examination	40%

580-441B - ADVANCED TECHNOLOGY/ERGONOMICS

Credits: 2

Coordinator: Occupational Therapy Faculty

COURSE STRUCTURE

The course consists of 3½ hours per week for eight weeks.

LEARNING OBJECTIVES

1. To provide general theory on computer hardware and software for therapeutic use and as assistive technology used in enabling occupational performance.
2. To provide “hands on” experience with the equipment most frequently encountered in the clinical setting.
3. To meet clients using adapted equipment and to visit centres where microcomputer technology is used.

CONTENT

A detailed course outline will be distributed on the first day of class.

REQUIRED READINGS

Course notes and required readings.

EVALUATION

To be announced.

582-402B - ADVANCED RHEUMATOLOGY

Credits: 2

Lecturers: S. Sofer, A. Pagnotta

COURSE STRUCTURE

The condensed course will be taught on Sundays; 6 hours per weekend, and consists of seminars and/or clinical demonstrations at the Jewish Rehabilitation Hospital. The date of the first class will be announced.

Students will be expected to do required readings for specific sessions (to be identified).

Exercises in evaluation and treatment planning will be incorporated using clinical case studies.

LEARNING OBJECTIVES

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

1. describe the pathology, clinical features and current trends of interdisciplinary treatment for rheumatic diseases;
2. assess clients with rheumatic diseases, identify problems and provide solutions which enhance occupational performance taking into consideration the total management of the client in the hospital, home and community;
3. function as an inter-disciplinary team member in establishing treatment goals for clients with rheumatic diseases.

CONTENT

I Content will include discussion of major rheumatic diseases such as:

1. Polyarthritis:
 - a) Rheumatoid Arthritis
 - b) Juvenile rheumatoid Arthritis
 - c) Ankylosing Spondylitis
 - d) Psoriatic Arthritis
 - e) Reiter's Syndrome
2. Connective Tissue Disorders:
 - a) Systemic Lupus Erythematosus
 - b) Scleroderma
 - c) Polymyositis and Dermatomyositis
3. Degenerative Joint Disease

4. Other:
 - a) Fibro Myalgia
 - b) Polymyalgia Rheumatica

II Detailed Assessments in the following areas:

1. Musculoskeletal
2. Self-care
3. Function
4. Hand
5. Foot
6. Environmental Barriers

III Treatment interventions in the area of:

1. Patient Education
2. Assistive devices and adaptive equipment
3. Splinting
4. Footwear
5. Surgery
6. Exercises and Physical Modalities

REQUIRED TEXTS

Course Pack.

Pagnotta, A. and Sofer, S. (1988). *Rheumatic Disease: Assessment Battery*. Jewish Rehabilitation Foundation. *(Available for purchase at the Jewish Rehabilitation Hospital)*

EVALUATION

Mini Quizzes (lecture material)	25%
Lab Exam (hand and foot evaluation)	15%
Final Exam (combination of multiple choice and essay questions)	60%

582-403B - PAEDIATRICS

Credits: 2

Lecturers: L. Snider

COURSE STRUCTURE

This course consists of 3½ hours per week for eight weeks.

LEARNING OBJECTIVES

Upon completion of this course, the student will be:

1. familiar with a variety of paediatric Occupational Therapy treatment approaches, and will have had the opportunity to apply these in lab sessions and in treatment of a child;
2. familiar with the most commonly used (locally) Occupational Therapy paediatric assessment tools, and will have had the opportunity to use these in lab sessions as well as in evaluation of both a normal child and a paediatric client;
3. able to select an appropriate assessment approach for a specific paediatric client and to conduct a comprehensive assessment of that client;
4. able to analyse assessment results and to formulate a problem list, based on the documented strengths and weaknesses, and to establish clear goals of treatment;
5. able to plan and carry out a treatment session based on the assessment findings and treatment goals formulated, and to critically assess own performance;
6. able to present and discuss the assessment results, and the treatment goals/approach in an organized and professional manner;
7. familiar with local resources pertinent to paediatric clientele, and with accessing them.

CONTENT

Detailed information on the course content, readings and evaluation process will be distributed at the beginning of the term.

REQUIRED TEXTS

Class Notes.

EVALUATION

To be announced.

582-410B - CHILD & ADOLESCENT PSYCHIATRY

Credits: 2

Lecturer: Occupational Therapy Faculty

NOTE: This course will not be offered in 1999-2000.

COURSE STRUCTURE

This course consists of 3½ hours of weekly lectures for eight weeks.

LEARNING OBJECTIVES

Upon completion of this course, the student will be:

1. familiar with a variety of individual, group and family based occupational therapy treatment approaches currently being used in early childhood, pre-adolescent and adolescent psychiatry;
2. able to discuss the practical aspects of occupational therapy practice in child psychiatry, including: treatment rooms used; guidelines regarding how to begin - terminate - transfer cases; assessment set-up; client feedback; purchasing of equipment/materials;
3. familiar with common patient profiles seen by occupational therapists in child psychiatry;
4. able to identify and discuss the theoretical frames of reference that are most commonly used in child psychiatry.

582-442B - ENABLING ENVIRONMENTS

Credits: 2

Lecturer: E. Gisel, D. Covo

STRUCTURE

This course will consist of a 2 hour session per week divided into lectures, architectural design exercises and an independent project where Occupational Therapy and architectural students work together to solve a chosen problem of environmental design. Computer assisted design can be used to develop architectural modules appropriate for the physically disabled.

LEARNING OBJECTIVES

Upon completion of this course, the student will be expected to:

1. understand the limitations of a physically disabled person and the consequences for the individual to function in his/her environment;
2. evaluate a given physical environment with respect to accessibility for the physically disabled;
3. make recommendations for changes in compliance with the existing national building code.

REQUIRED READINGS

Course Pack.

Selected Readings.

EVALUATION

Project 80%

Two Home Assignments 20%