

SCHOOL OF PHYSICAL AND OCCUPATIONAL THERAPY



COURSE GUIDE 2007-2008

B.Sc. OCCUPATIONAL THERAPY NON-PRACTICING

Welcome to the School of Physical and Occupational Therapy for the 2007-2008 Session

You have been accepted into a challenging and exciting 90 credit five-semester Program over three years leading to a

B.Sc. Occupational Therapy Non-Practicing

Year I 2007-2008

- Fall 2007 Semester (13 weeks beginning September 4th, 2007)
- Winter 2008 Semester (13 weeks starting January 3rd, 2008)

Year II 2008-2008

- Fall 2008 Semester (13 weeks beginning September 2nd, 2008)
- Winter 2009 Semester (13 weeks beginning January 5th, 2009)

Year III 2009-2010

- Fall 2009 Semester (13 weeks)
- Winter 2010 Semester (13 weeks)

This curriculum has been designed to prepare the rehabilitation professional for the Year 2007 and beyond.

These two undergraduate Programs at McGill are designed to prepare a student to enter graduate studies in Occupational Therapy or Physical Therapy.

The competent and effective practice of Occupational or Physical Therapy in today's society necessitates that students in these disciplines develop life long learning skills.

The undergraduate Programs are responsible for initiating this value system along with its related behaviors. In addition, the goals of the undergraduate Programs in the School are to educate individuals who will strive to achieve the highest ethical and performance standards and to prepare for Professional Graduate Programs.

After completion of the Undergraduate and Graduate Professional Programs, the graduate will be expected to:

- have acquired a knowledge of normal and abnormal physiology and behavior across the lifespan.
- have acquired the skills required to obtain relevant information from clients and other sources and to organize and interpret this information for making clinical decisions
- critically assess, analyze problems and propose solutions across various practice settings and environments.
- have acquired the knowledge and skills necessary for entry-level practice.
- have the adaptability to meet various professional roles as a therapist, treatment or research team member, educator, administrator, consultant, manager, entrepreneur and innovator.
- have the ability to critically appraise the rehabilitation literature and to integrate new scientific information for treatment planning.
- have acquired an appreciation of the medical, psychological and social aspects of illness and disability.
- be committed to health promotion and the facilitation of health, function and participation.

- have acquired interpersonal and communication skills that facilitate both effective and empathetic relationships with clients/family members/care givers.
- have acquired professional ethics and attitudes as well as the acceptance of the responsibilities related to practicing as a professional.
- be cognizant of the necessity for ongoing education and self-directed learning.
- have attained the knowledge, aptitudes and competencies necessary for licensure and certification in keeping with provincial, national and international requirements.
- have the administrative knowledge, management skills and attitudes requisite for effective interaction within the health care system.

Dr. Maureen Simmonds Director School of Physical and Occupational Therapy

Dr. Mindy Levin
Director, Physical Therapy Program
Associate Director,
School of Physical and
Occupational Therapy

Professor Sandra Everitt
Director, Occupational Therapy Program
Associate Director,
School of Physical and
Occupational Therapy

Preamble

For your convenience, this Course Guide has been divided into three Sections:

- l. Rules and Regulations for Student Evaluation and Promotion
- II. Important Information for Students
- III. B.Sc. Occupational Therapy Non-Practicing U1 Professional Courses

Mission Statement of the School of Physical and Occupational Therapy

Excellence in research and teaching is the foundation and tradition of the School of Physical and Occupational Therapy at McGill University. The faculty educates professionals and, through research, generates the body of knowledge, which guides our professions to advance the health, function and participation of the individual in society.

Our means to achieve this:

As members of the McGill community, we affirm our position of leadership in the international arena. We optimize the potential of the individual by developing the concepts for implementing scientifically based approaches to rehabilitation methods and technologies.

(Approved at the faculty retreat, 6-11-01)

Mission Statement of the Occupational Therapy Program

"The Mission of the Occupational Therapy Program at McGill University is to educate our students to become leaders and innovative practitioners of Occupational Therapy who are skilled in clinical expertise and in the weighted use of evidence within the context of client, environment and occupational tasks."

Educational Philosophies of Occupational Therapy

Philosophy of Education

Our philosophy of education is based on the followed guiding principles:

The Use of Evidence

- Evidence based learning activities
- Evidence based practice
- Outcome assessment

Reasoning

- Clinical reasoning
- Interactive reasoning
- Reflective reasoning

Adult Learning Methodologies

- Self-directed learning
- Small group activities
- · Case based activities
- Problem based learning

Communication

- Communication skills
- Interpersonal & professional

Education of an autonomous professional Lifespan perspective Promotion of health and prevention of illness Client-centred practice

Goals

To prepare Occupational Therapists who possess the essential competencies to work effectively within a changing health care milieu in the context of the societal/cultural influences of both the national and the international community, to analyze the impact of occupation on health and quality of life in order to restore a functional interaction between the client and the environment:

- Through the application of a client-centred model to work with people of all ages, from infancy through midlife to old age, to enable them to face physical, emotional or social barriers.
- To promote a balance between the client's occupations in self-care, productivity and leisure in order to increase independent function, enhance development, prevent disability and/or handicap and promote participation.

As such, an essential goal in our Program is to foster independent, self-motivated, self-regulated thinkers and learners. Students who acquire these competencies can then profit from today's information rich society, think critically about what they find, and select and integrate knowledge.

The global goal here at the School of Occupational Therapy is to provide a unique professional education of the Occupational Therapy student that focuses on the components central to Occupational Therapy practice. This education is client-centred, ethical, evidence-based, and prepares the student to meet the physical, cognitive, emotional and spiritual needs of clients. Students will be prepared to assume necessary professional roles to advance the profession, to meet the health care needs of the future and to expand the knowledge base of the profession through research.

We at the School strive to educate professionals who will be capable of generating new knowledge as well as being informed users of currently existing knowledge. It is recognized that Occupational Therapists will need knowledge specific to Occupational Therapy along with information of the broader health care issues and health systems that effect consumers and potential consumers of our services.

The educational Program is structured on the student's need for:

- 1. the acquisition of knowledge and skills,
- 2. critical thinking and problem-solving processes,
- professional values and behaviours that will enable students to practice
 Occupational Therapy with the highest ethical and performance competencies,
 all the while using a framework of teaching that is inclusive and respectful of
 cultural diversity.

The educational Program is framed with the specific objectives of creating students who are competent, on an ongoing basis, in acquiring knowledge regarding:

- 1. evidence based practice
- 2. clinical reasoning
- 3. outcome assessment
- 4. lifespan perspective
- 5. promotion of health
- 6. prevention of illness
- 7. client-centred practice
- 8. inter-personal and professional communication skills
- 9. advocacy for those requiring or receiving Occupational Therapy services
- 10. autonomy of practice including the ability to diagnose key conditions, assess appropriately and choose effective interventions that are evidence-based and client appropriate, and to assess the outcomes of interventions.
- 11. cognizance of the necessity of ongoing education and self-directed learning
- 12. knowledge, attitudes and competencies necessary for licensure and certification in keeping with provincial and national requirements.
- 13. the knowledge skills and attitudes requisite for effective administration/management within the health care system.

COURSE GUIDE

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Table 1: Services/ Support to Students with Contact information		
Service or Support	Contact Person and contact information	
Within the School of Physical and Occupational Therapy		
Registration	Ms. Marlene Brettler	
 Course changes/add/drop 	Hosmer House Room 100	
Intra university transfer	Tel: (514) 398-4500	
Credit exemption	Fax:(514) 398-6360	
Supplemental deferrals	e-mail marlene.brettler@mcgill.ca	
Exam conflicts		
C.P.R. certification	Ms. Croce Riggi	
PDSB Course	Davis House Room D5	
 Clinical placement supervision information 	Tel: (514) 398-1293/6561	
 Immunization 	Fax::(514) 398-6360	
 Appointments with the ACCE 	e-mail: croce.filteau@mcgill.ca	
	e-mail: caroline.storr@mcgill.ca	
 Audiovisual equipment lending or arrangements 	Mr. Alan Hammaker	
 Learning aids e.g. CD's, skeletal material, Videos 	Hosmer House Room 100	
 Room booking (non academic) e.g. student meetings, 	Tel:(514) 398-4516	
variety show rehearsal, etc.	Fax:(514)398-8193	
	e-mail: alan.hammaker@mcgill.ca	
 Support to sessional lecturers/faculty 	Ms Irene Bonkowsky	
 Co-ordination for course evaluations 	Hosmer House Room H100	
 Purchase of course packs 	Tel:(514)398-4517	
 Access to (key for) coach house 	Fax:(514)398-8193	
Lost and found	e-mail:irene.bonkowsky@mcgill.ca	
Assessment Library	Mr. Robert Everitt	
	Hosmer House Room H13	
	Tel: (514) 398-2048	
	e-mail: robert.everitt@sympatico.ca	
Within the University		
STUDENT SERVICES -	www2.mcgill.ca/stuserv	
Dean of Students Office	Tel 514-398-3825	
 Athletics 	Tel: 514-398-7000	
 CAPS Career and Placement Service 	• Tel: 514-398-3304	
 Chaplaincy Service 	• Tel: 514-398-4104	
 Counseling Service 	• Tel: 514-398-3601	
 First Peoples House 	• Tel: 514-398-3217	
 First Year Office 	• Tel: 514-398-6913	
 Health Services & Dental Clinic 	• Tel: 514-398-6017	
 International Student Services 	• Tel: 514-398-4349	
Mental Health Services	• Tel: 514-398-6019	
 Students With Disabilities 	• Tel: 514-398-6009	
Tutorial Service	• Tel: 514-398-6011	
 Student (Financial) Aid Office 	• Tel: 514-398-6013	
 Residences & Student Housing 	• Tel: 514-398-6368	
Student Housing (Off campus)	• Tel: 514-398-6010	
 First Year Assistance for Francophone Students 	Tel: 514-398-6913	
POTUS	See separate page	

List of Committees with Student Representation

The School of Physical and Occupational Therapy values the input of our students in all academic, social and administrative functions. The following is a list of committees with student representation.

Table 2: List of Committees with Student Repre	sentation	
Name of Committee	Student Based	Student & Faculty
	only	Based
Fitness Center	$\sqrt{}$	
Golden Key Honors Society	$\sqrt{}$	
Graduate Committee	$\sqrt{}$	
Intramural Sports Team	$\sqrt{}$	
McGill Newspaper LeDeli	$\sqrt{}$	
Physical and Occupational Therapy	$\sqrt{}$	
Undergraduate Society (POTUS)		
Canadian Association of Occupational		$\sqrt{}$
Therapists (CAOT) Representative		
Curriculum Committee		$\sqrt{}$
Clinical Advisory Committee		$\sqrt{}$
Marketing Committee		$\sqrt{}$
L'ordre des ergothérapeutes du Québec		\checkmark
(OEQ)		
OT Faculty Meetings		$\sqrt{}$
School of Physical and Occupational		
Therapy Faculty Meetings		
Student Staff Liaison		

Table 3:

PHYSICAL AND OCCUPATIONAL THERAPY UNDERGRADUATE SOCIETY 2007-2008

Title Name E-mail

		·
President	Charlie Giurleo	charlie giurleo@hotmail.com
VP PT	Andrew Roberts	andrew.roberts2@mail.mcgill.ca
VP OT	Alison Hendricks	zori8@yahoo.com
VP Administration	Lina Ianni	lina_ianni@hotmail.com
VP Finance	Vanessa De Luca	vanessa_de_luca@hotmail.com
VP External	Aaisha Ghauri	ariel_soul@hotmail.com
VP Internal(Social)	Anne Marie Preville Mylène Boudreau	delfie_1@yahoo.fr mymyboo@hotmail.com
PT U3	Amanda Ischayek Shahin Tavakol	aischayek@yahoo.ca kudoki@gmail.com
OT U3	Aileen Castro Patricia Graphos	aileen1604@hotmail.com metalmoneky49@hotmail.com
PT U2	Kerianne Boulva Kathleen Smith	kerianne.boulva@mail.mcgill.ca katiesmith87@gmail.com
OT U2	Sen Zhan Gabriel Charlebois	sen.zhan@mail.mcgill.ca gabriel.charlebois@mail.mcgill.ca
PT U1	Scott Kohen Mays Chami	scott.kohen@mail.mcgill.ca mays.chami@mail.mcgill.ca
OT U1	Priya Kalsi Giannoula Mentakis	priya.kalsi@mail.mcgill.ca giannoula.mentakis@mail.mcgill.ca
CAOT/OEQ	Alison Hendricks Genevieve Denoury Valerie Martel	zori8@yahoo.com massogdenoury@hotmail.com valemartel@hotmail.com
CPA/OPPQ	Kathleen Winter Dumitru Dragutan	kathleen.winter@mail.mcgill.ca ddragutan@yahoo.com
OT Curriculum	Vanessa Brombosz	vanessabrombosz@hotmail.com
PT Curriculum	Weijia Xu	weija.xu@mail.mcgill.ca
Athletics	Tamer Waly Mina Wahba	tamer.waly@mail.mcgill.ca mina_waheed@hotmail.com
CLOM/Technical	Jonathan Perusse	jonathan.perusse@mail.mcgill.ca
Grad mmittee	Melissa Emblin Rainie Wiemer	tiggerz_24@hotmail.com rainie.wiemer@mail.mcgil.ca
	Samuel Harvey-Vaillancourt	mr_sympa@hotmail.com
Fundraising	Stephanie Paz-Lamarche Maheen Diwan	steph_chubaka@msn.com maheendiwan@hotmail.com
Frosh Director	Jonathan Perusse	jonathan.perusse@mail.mcgill.ca

I. RULES AND REGULATIONS FOR STUDENT EVALUATION AND PROMOTION

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I. Rules and Regulations for Student Evaluation and Promotion

Introduction

The goal of the undergraduate Programs in the School of Physical and Occupational Therapy is to provide students with the skills, knowledge, attitudes and behaviours required to progress to the entry-level professional Master's Degree program in Occupational Therapy or Physical Therapy.

Information outlined in this section supplements the 2007-2008 McGill University Health Sciences Calendar, Section 8.4 Student Evaluation and Promotion, pages 132-136 inclusively.

Evaluation and Promotion

Students progress through the Program by successful completion of successive promotion periods.

Students will not be permitted to proceed to the next promotion period unless they have met all criteria of the current promotion period. Students with incomplete coursework (eg. failed or deferred courses) may not commence the professional courses in the subsequent Promotions Period until the incomplete courses have been successfully completed. This means that the courses must be passed.

1. Marks

An overall final mark of 60% (C+) is required to pass the courses with a designation of POTH, PHTH or OCC1. Similarly, the passing grade on any remedial activity or supplemental examination is 60% (C+) for these courses. The passing grade for other courses is 55% (C). Equivalent elective/complementary courses or anatomy and physiology equivalent courses taken at other educational institutions (e.g. TELUQ courses) must be passed with a letter grade of 55% (C) or better according to the credit system of the host university. The letter grades take precedence over numerical marks.

Students should be aware that courses having practical and theoretical components or individual and group work have specific criteria for promotion:

1.1 In any course which comprises both theoretical and practical evaluation components, each student must achieve a passing grade in each of these components as well as in the overall course in order to receive a passing grade for the course. If the overall mark is a failure, the student will receive the letter grade associated with that mark. In this case, the student will be permitted to write a supplemental exam in this course. If the supplemental exam is passed, both the original and the supplemental mark will be recorded on the transcript. If the overall mark is a pass but one component is a failure, the course mark is withheld from the record. The student must undertake remedial work in that failed component and successfully pass the remedial work within 30 days of the posting of the original mark.

If the remedial work is successfully passed, the original final course mark is then recorded. Students will have only one opportunity to attain a passing grade. No further supplemental exams will be permitted. Failure in remedial work will result in a final course grade of "D" (failure).

1.2 In any course which comprises both individual and group evaluation components, each student must achieve a passing grade in each of these components as well as in the overall course in order to receive a passing grade for the course. If the overall mark is a failure, the student will receive the letter grade associated with that mark. In this case, the student will be permitted to write a supplemental exam in this course. If the supplemental exam is passed, both the original and the supplemental mark will be recorded on the transcript. If the overall mark is a pass but one component is a failure, the course mark is withheld from the record. The student must undertake remedial work in that failed component and successfully pass the remedial work within 30 days of the posting of the original mark. If the remedial work is successfully passed, the original final course mark is then recorded. Students will have only one opportunity to attain a passing grade. No further supplemental exams will be permitted. Failure in remedial work will result in a final course grade of "D" (failure).

2. Attendance

Students will be required to attend all small group and laboratory sessions and are expected to attend all other course-related activities outlined in the course description and/or syllabus. For an absence (e.g., compassionate or medical reasons) to be approved the absence must be supported by written documentation, such as a medical certificate (in the case of a medical reason), and submitted to the Program Director. The Program Director, at his or her entire discretion, may request additional information before approving the absence.

Students who have missed more than 10% of laboratory or small group sessions without prior approval may not be permitted to write the final examination in the course.

No absences are permitted during any clinical fieldwork or visits. Any absences for illness or compassionate reasons must be documented at both the site and the School. They must be approved by the Program Director.

3. Student Standing

A student's overall standing in the Occupational and Physical Therapy Programs will be recorded as Satisfactory, Unsatisfactory or Probationary. In order to graduate, students must be in satisfactory standing.

Satisfactory Standing

- a McGill cumulative grade point average (cGPA) of 2.7 or greater.
- A term GPA (tGPA) of 2.51 or greater.
- Failure and/or incomplete in ≤ 1 academic course in an academic year.
- Professional behaviour that meets program standards.

Probationary Standing

- Failure and/or incomplete in two (2) or more academic courses in an academic year
- A cGPA between 2.3 and 2.69.
- A term GPA (tGPA) of \leq 2.5.
- Unprofessional behaviour: Since Occupational Therapy and Physical Therapy are
 professions, our programs have more rigorous standards of behaviour than other
 programs. Professional behaviour is expected of students throughout their education,
 whether in a class or clinical settings. Lack of professional behaviour will result in the
 student being placed on probationary status. Unprofessional behaviour is defined in the
 Code of Student Conduct, Handbook of Student Rights and Responsibilities, Chapter 3.
 Academic or non-academic offences as defined in the Handbook of Students' Rights
 and Responsibilities are also considered unprofessional behaviour.
- Failure in a course which is followed by failure of the supplemental examination.
- Failure to take the supplemental examination.
- Failure in a deferred examination.
- Remedial work in two or more courses in the same term.

A Student in Probationary Standing may be required:

- to pursue specific remedial activity to address areas of weakness;
- to meet specific performance criteria for subsequent Promotion Periods;
- to meet on a regular basis with the Program Director and/or delegate;

A student who is placed in Probationary Standing is automatically monitored by the OTPRC/PTPRC (Promotion and Review Committee). The OTPRC/PTPRC may require the student to remain in Probationary Standing, undertake remedial activity, or repeat a Promotion Period or repeat courses within that Period.

Unsatisfactory Standing

- cGPA < 2.3.
- Failure of more than seven (7) credits of course work in an academic year.
- Failure of a repeated professional course or required science course.

Students in unsatisfactory standing are required to withdraw from the Program.

4. Promotion Periods

Promotion periods will be used to track student progress. Due to the sequential nature of the curriculum, students will not be permitted to advance to subsequent promotion periods until all criteria of the previous promotion period are met. Students who are repeating courses or have deferred or incomplete courses will be considered to be repeating the promotion period. During a repeated promotion period, students are permitted to take optional or complementary courses; however, other courses within the Program may only be taken with the permission of the Program Director and the appropriate Program Promotion and Review Committee (OTPRC/PTPRC).

Failure in any Program course during a repeat promotion period will require the student to withdraw from the Program.

A student may not repeat more than one promotion period during the Program.

A student with two (2) failures within a Promotion Period will be required to repeat the promotion period as confirmed by the OTPRC/PTPRC.

A student with an overall cGPA of between 2.3 and 2.69 or tGPA of \leq 2.5 in the promotion period will be placed on probation, reviewed by the OTPRC/PTPRC and may be required to repeat the promotion period.

Failure in any supplemental examination or remedial work will require the student to repeat the course and to repeat the promotion period as confirmed by the OTPRC/PTPRC.

In order to be permitted to take a supplemental examination in any Program course, a student must have a cGPA of at least 2.3 in that promotion period. Students may not be permitted to take supplemental exams if they have failed more than seven credits in an academic year.

The Evaluation System is under constant review by the School. The School may make changes to the policies and regulations at any time. In general, such changes will not come into effect during an academic year or promotion period; however, all changes and their effective dates will be communicated to the students of the Program with a reasonable amount of prior notice.

5. Promotion and Review Committees

The Promotion and Review Committees for the respective Programs (i.e. OTPRC, PTPRC) will review the entire records of all students.

The OTPRC/PTPRC will track the records of any student in academic difficulty and the records of any student charged with misconduct. Examples of misconduct are: unethical or unprofessional behaviour, dishonesty, drug or substance abuse, criminal conviction, and academic offences such as plagiarism and cheating.

The OTPRC/PTPRC will require a student to withdraw from the Program who has been found to be unsuitable for the practice of Occupational Therapy or Physical Therapy due to poor academic standing or misconduct.

A grade is not final until it is has been reviewed by the OTPRC/PTPRC and is recorded on the student's official transcript.

Promotion Periods

A student must successfully complete all professional courses in each Promotion Period in order to be promoted to the next Promotion Period.

The Occupational Therapy and Physical Therapy Programs' Promotion Periods are as follows:

Promotion Period 1 - U1 Beginning of September to end of April

Promotion Period 2 - U2 Beginning of September to end of April

Promotion Period 3 - U3 Beginning of September to end of April

OT PROMOTION PERIOD - U1 Beginning of September to end of April

Within this Promotion Period, the following courses have special conditions for evaluation. Please refer to Section 1.1 and 1.2 for details of these evaluation conditions.

OCC1 245 Occupational Therapy Seminars: Refer to Section 1.2 POTH 250 Health Care Delivery: Refer to Section 1.2

A student must successfully complete all Program courses in Promotion Period 1 in order to be promoted to Promotion Period 2.

OT PROMOTION PERIOD – U2 Beginning of September to end of April

Within this Promotion Period, the following courses have special conditions for evaluation. Please refer to Sections 1.1 and 1.2 for details of these evaluation conditions.

POTH 455 Neurophysiology: Refer to Section 1.2 POTH 401 Research Methods: Refer to Section 1.2

A student must successfully complete all Program courses in Promotion Period 2 in order to be promoted to Promotion Period 3.

OT PROMOTION PERIOD – U3 Beginning of September to end of April

Within this Promotion Period, the following courses have special conditions for evaluation. Please refer to Sections 1.1 and 1.2 for details of these evaluation conditions.

OCC1 545 Therapeutic Strategies in OT1:	Refer to Section 1.1, 1.2
OCC1 548 Holistic Approaches in OT:	Refer to Section 1.1, 1.2
OCC1 550 Enabling Human Occupation:	Refer to Section 1.1, 1.2
OCC1 551 Psychosocial Practice in OT:	Refer to Section 1.1, 1.2
OCC1 547 Occupational Solutions 1:	Refer to Section 1.1, 1.2
OCC1 546 Strategies in OT Professional Practice:	Refer to Section 1.2
OCC1 549 Therapeutic Strategies in OT2:	Refer to Section 1.1, 1.2

A student must successfully complete all Program courses in Promotion Period 3 in order to graduate.

Examinations

Information outlined in this section supplements the 2007-2008 McGill University Health Sciences Calendar, Section 8.4.8, pages 134-136.

1. Preamble

All examinations are governed by university regulations: (http://www.mcgill.ca/student-records/exam/regulations/) and by the specific Faculty of Medicine regulations as outlined below.

Students are expected to behave in a professional manner at all examinations, including laboratory practical examinations and examinations administered in clinical settings. The regulations outlined below permit the Faculty to ensure all examinations are administered in an organized, fair and equitable manner for all students.

Any form of communication is prohibited during an exam, including communication via electronic devices. Students are NOT permitted the use of a cell phone, pagers, PDA's, etc., during an exam. Any electronic devices found during an examination will be confiscated by an invigilator and returned to the student at the end of the examination or the following working day. These incidents will be reported to the Associate Dean; such incidents may be entered on the student's record.

Please note that many multiple-choice examinations administered at McGill University are monitored by an examination-security program (Harpp-Hogan). This is based on assigned seating at all examinations. The data generated by the program can be used as admissible evidence, either to initiate or corroborate an investigation of cheating under Section 16 of the Code of Student Conduct and Disciplinary Procedures.

Any breach of these regulations will be reported to the Chief Invigilator, and Program Directors of OT and PT, as appropriate. Students exhibiting suspicious behaviour will also be reported. Inappropriate behaviour, such as cheating on an examination or disruptive behaviour during an examination review session(s) can be evidence of unprofessional conduct and, therefore, grounds for a finding of unsuitability to continue in the program.

A student may not miss an examination without justifiable reason. When a student misses an examination, she/he must:

- notify the Program Director prior to the exam (circumstances permitting), indicating the reason for absence;
- provide appropriate written documentation to justify absence;

2. Examination Regulations & Procedures

Regulations

- All examination information is confidential. Any transmission of examination information, either in writing or verbally, is expressly prohibited without prior consent of the Dean's office. No one is permitted to make written notes or to record, in any way, the contents of an examination. This includes the transmission of core materials (e.g., names of patients) used in oral exams or Objective-Structured Clinical Examinations (OSCE).
- 2. Candidates must not procure, use, or attempt to use or distribute any improper or unauthorized materials.
- 3. No candidate for examination may bring into the examination room any books, notes, electronic communication devices with memory capability; e.g., PDAs (Personal Digital Assistants), cell phones, pagers or other material containing information pertaining to the examination, unless the examiner has given permission.
- 4. Talk or any other form of communication between candidates is forbidden. This includes the use of all types of electronic equipment not specifically requested for the examination, including cell phones and pagers. All communication devices must be deposited with the invigilators prior to the start of the examination.
- 5. Candidates are not permitted to leave the examination room until one half hour after the examination has begun, and in no case before the attendance has been taken. A candidate who leaves before the examination is over must hand in all completed and attempted work.
- 6. Every student has a right to write essays, examinations and theses in English or in French. Personal dictionaries are not permitted. However, a French-English dictionary will be available upon request.
- 7. No smoking or alcoholic beverages are permitted in the examination rooms.

Procedures

- 1. If books, notes, etc., cannot be left outside the examination room, they must be put in a place designated by the Invigilator before the candidate takes a seat.
- 2. Students writing examinations are responsible for arriving at the right time and place and must have with them their McGill student identification cards. Forgetfulness or inadvertently arriving at the wrong time or place are not acceptable excuses.
- 3. The doors of the examination room will normally be opened at least five minutes before the starting hour. Candidates will be permitted to enter the examination room up to one- half hour after the scheduled start of the exam. These students should be aware that a portion of time could be lost while the examination is assigned and

- instructions are being given by an invigilator. They must enter the room quietly, and time will not be extended for the examination.
- 4. Candidates must remain seated. A candidate needing to speak to the invigilator (e.g., to ask for additional supplies) should so indicate by raising his or her hand.
- 5. Questions concerning possible errors, ambiguities, or omissions in the examination paper must be directed to the Invigilator, who will investigate them through the proper channels. The Invigilator is not permitted to answer questions other than those concerning the paper.
- 6. All work must be done in accordance with the examination instructions, and must be handed in to the Invigilator.
- 7. At the close of the examination, candidates must stop writing and submit their work at once.
- 8. Food is permitted at the discretion of the Chief Invigilator. Food should be brought in prior to the exam. Students will not be permitted to go to vending machines/cafeteria during an examination.
- 9. Bathroom privileges: only one student at a time will be allowed to go to the bathroom, and the student may be escorted there and back by an Invigilator (at the Invigilator's discretion).
- 10. No student will be permitted to leave during the final ten minutes of the examination.

Examination Regulations – Cheating

Cheating is considered an academic offence under Article 16(a) in the Code of Student Conduct and Disciplinary Procedures which states that:

"No student shall, in the course of an examination obtain or attempt to obtain information from another student or other unauthorized source or give or attempt to give information to another student or possess, use or attempt to use any unauthorized material..."

Under Article 21(d)

"The chief or senior invigilator at an examination shall have like powers of exclusion over any student undergoing the examination when the chief or senior invigilator has reasonable grounds to believe that the student is breaking, has broken, or is attempting to break a university or faculty examination regulation..."

Before the commencement of any mid-term or final examination, the above quotation will be read out loud and any student dismissed from the exam for cheating will be given a failure in the course under question.

Students are reminded that cheating in any examination is considered a serious offence which could lead to expulsion from the University. Students are not permitted to have in their possession, or to use, any unauthorized materials during an examination.

Assignments

The Faculty adheres to the definitions of plagiarism and cheating described in the Code of Student Conduct and Disciplinary Procedures. Any course instructor has the right to require that assignments (including case reports) be submitted in hardcopy format with the student's signature. Refer to section on Academic Integrity – Plagiarism. A McGill student guide to avoid plagiarism is also found at: http://www.mcgill.ca/integrity/studentguide.

Deferred Examinations, Remedial Work and Supplemental Examinations

1. Deferred Examinations

Deferred examinations are examinations rescheduled because the original was missed for valid reasons; this is applicable to final examinations only.

- Permission for a deferred examination will be granted by the Program Director for the following reasons: valid health issues, family or personal crises. Participation in elite athletic events (see Policy on Student Athletes).
- Sick Notes (taken from McGill Student Health Services)
 The medical note you want...



The medical note you'll get...

- Medical notes will ONLY be issued on the DAY of the missed exam, assignment, project, class or conference. Health Service physicians and nurses will write notes based on their medical findings and professional assessments.
- Absolutely NO medical notes will be written for past illness (ie: on a weekend, the day before, etc.)
- The nurses and physicians at McGill Student Health Services DO NOT have the authority to exempt students from exams etc. The final decision will be taken by the Professor, Faculty and/or Dept.
- Medical notes can be issued by medical personnel at private clinics, CLSCs, emergency rooms, etc., but please note a charge may be incurred for this service. If you were treated outside Student Health PLEASE get a note from the institution of record as Student Health will not issue a note for an outside clinic.

- No medical notes will be issued once the clinic is CLOSED for the day. Due to the high volume of drop in patients we encourage you to arrive as EARLY as possible to ensure you will be seen on the day of your exam, class etc. in question (please refer to: http://www.mcgill.ca/studenthealth/notes/).
- Except for cases of emergency on the day of the exams, students must make their request for a deferred exam PRIOR TO the scheduled exam. The request must be accompanied by supporting documents (e.g., physician's medical certificate). The Program Director reserves the right to verify all documentation.
- In the case of an emergency on the day of the exam, supporting documents must be
 presented to the Program Director as soon as possible after the examination. These
 documents must indicate that the student was unable to write the examination for an
 approved reason on the <u>specific</u> date of the examination. The Program Director may
 require further corroborative documentation of the reasons for the request(s).
- In general, an approved deferred examination will be written in the deferred/ supplemental exam period or at the earliest feasible time.
- Deferred examinations will generally be in the same format as the final examination.

No supplemental examinations are permitted for students who do not receive the required passing grade in a course after writing a deferred examination.

2. Remedial Work

Remedial work is activity to be undertaken by a student as required by the Promotion and Review Committee (OTPRC/PTPRC) as a consequence of a failure or unsatisfactory evaluation in a course/clinical rotation. This activity will generally include additional study and additional examination(s). In the context of clinical rotations, there will generally be a requirement to repeat clinical activities for a defined period.

 Any remedial activity will be decided upon after discussion between the student and instructor and confirmed by the OTPRC/PTPRC.

3. Supplemental Examinations

- Supplemental examinations may be permitted in some courses. These are examinations taken as a consequence of a failure or unsatisfactory outcome in a course.
- Supplemental examinations will cover material from the entire course or section of a course. The format of the supplemental examination may differ from the original examination.
- Students who do not successfully pass supplemental exams administered by the School will receive a final supplemental grade of "D" (failure)

 As stipulated in section 8.4.8.5 of the McGill Health Sciences Calendar, "it should be noted that the supplemental result will not erase the failed grade originally obtained which was used in calculating the GPA. Both the original mark and the supplemental result will be calculated in the GPA and cGPA".

In general, remedial work or supplemental examinations for students with failures will follow university schedules.

Promotion and Review Committees

Introduction

Within the School of Physical and Occupational Therapy, student evaluation, promotion and determination of suitability for the practice of the profession is within the jurisdiction of the Occupational Therapy Promotion and Review Committee (OTPRC) and the Physical Therapy Promotion and Review Committee (PTPRC). The OTPRC reviews the performance of students in the Occupational Therapy Program and the PTPRC reviews the performance of students in the Physical Therapy Program.

The OTPRC/PTPRC exercises final authority to determine a student's competence and suitability for the practice of the Occupational Therapy or Physical Therapy professions. It will consider all aspects of student progress, including academic performance, personal and professional conduct and make final decisions on all matters relating to promotion and graduation.

The OTPRC/PTPRC will review the entire record of all students, including those in academic difficulty. In addition, the Committee will review the entire record of any student charged with misconduct. Examples of misconduct are: unethical or inappropriate behaviour for the practice of the profession, drug or substance abuse, criminal conviction, plagiarism, cheating. This could result in the student being dismissed from the Program.

The OTPRC/PTPRC will require a student who is academically incompetent or unsuitable for the practice of Occupational Therapy or Physical Therapy to withdraw from the Program.

Composition of the OT and the PT Promotion and Review Committees

The OTPRC is a standing committee of the School. It is composed of four Faculty members of the OT Program, appointed for a staggered two-year term and the Director of the OT Program. All four are voting members. The Director will vote in the case of a tie.

The PTPRC is a standing committee of the School. It is composed of four Faculty members of the PT Program, appointed for a staggered two-year term and the Director of the PT Program. All four are voting members. The Director will vote in the case of a tie.

Review of Grades, Evaluations and Decisions

1. Review by the Promotions and Review Committees

Step 1

For academic courses, Occupational Therapy and Physical Therapy students who are dissatisfied with an evaluation or mark must first discuss the matter with the course instructor. Following discussion of the student's concerns, the instructor may leave the evaluation/mark unchanged or may change the evaluation/mark.

Step 2

The following are procedures to be followed when a student wishes to contest an evaluation/mark of a course.

For academic courses, students who remain dissatisfied after speaking with the instructor may request a review of the evaluation or mark by the OTPRC/PTPRC. The student's request must be made in writing and must be received within 14 calendar days of notification of the evaluation or mark. The request must be made by completing a Reread Form available in the office of the Undergraduate Student Affairs Coordinator. A \$35 charge is applicable.

Both the student and the instructor have the right to state his or her case to the committee in person or in writing. The proceedings will be conducted in an informal and respectful manner.

The OTPRC/PTPRC will determine the **reasonableness** of a student's evaluation. If, after deliberation, it is deemed to have been a reasonable assessment of the student's performance, the evaluation/mark will remain unchanged. Should the Committee conclude that the evaluation/mark under review was not reasonable a **"de novo"** assessment will be provided by the Committee. In other words, the evaluation/mark may remain unchanged, be upgraded or downgraded.

Decisions taken by the OTPRC and the PTPRC on an evaluation/mark are final and without appeal.

2. Review by the Ad Hoc OT/PT Promotions Appeal Committee

Only decisions of the OTPRC and PTPRC which require the student to repeat a promotion period or to withdraw from the Program may be appealed. The appeal must be made to the Ad hoc OT/PT Promotions Appeal Committee.

Decisions of the OTPRC/PTPRC may be appealed under the following circumstances:

- There is new evidence which was not available at the earlier consideration, and/or
- There has been a breach of natural justice.

The following are procedures to be followed when a student wishes to contest a decision of the OTPRC and PTPRC:

- Within 14 working days from notification of the decision of the OTPRC and PTPRC, the student may request a review of this decision. This request must be made in writing in sufficient detail to the Program Director.
- The Program Director will immediately forward the request to the Director of the School of Physical and Occupational Therapy and will ask that the Ad Hoc OT/PT Promotions Appeal Committee be convened.
- 3. The Director of the School of Physical and Occupational Therapy will then call a meeting of the Ad Hoc OT/PT Promotions Appeal Committee. The Ad Hoc OT/PT Promotions Appeal Committee is comprised of:
 - a) Five (5) members of the Faculty who have had no previous knowledge of the case under review. Those selected will have appropriate background and knowledge to bring to the Committee. One member will be designated as Chair.
 - b) One representative from the OEQ or OPPQ may be substituted for an academic member.
- 4. The Director of the School of Physical and Occupational Therapy will communicate to the parties the names of the members of the Ad Hoc OT/PT Promotions Appeal Committee, the time and place of the review with a minimum 10 working days notice.
- 5. The Director of the School of Physical and Occupational Therapy will call for a detailed dossier from each party which will be circulated to the Committee and the parties prior to the meeting. The dossiers should be made available to the Committee at least two (2) working days prior to the meeting so they have time to become acquainted with the issues. The Program Director must be informed of the names of witnesses and advisers at least two (2) working days prior to the hearing.

- 6. The Program Director, or designate, will present the School's evidence in written form and/or verbally to the Committee after which the student will be invited to present his/her case. The Program Director will give a summary of the student's performance to the Committee, an explanation for the evaluation and the decision. The student will then present his/her version of the performance and the evaluation. The Chair and other committee members may ask questions of the parties.
 - 7. Both parties (the student and the Program Director) may be accompanied by an adviser if they so wish. The adviser(s) will speak only at the invitation of the committee Chair. Witnesses may be called if needed. As defined by the *Charter of Student Rights and Responsibilities*, the advisor must be a member of the McGill community (e.g. a fellow student, a faculty member, or a student from the Legal Information Clinic) and not be paid for these services. The role of the adviser is to advise and help the parties present their case. It is important for the Committee to hear directly from the student and Program Directors. The adviser(s) may speak only at the invitation of the committee Chair.
 - 8. The meeting is conducted in a respectful and non-confrontational manner. No observers are permitted at the proceedings.
 - 9. The Committee will consider all relevant and valid evidence submitted in writing or orally by the parties and their witnesses. The Committee may ask questions of the student, of the Program Director or the witnesses. The parties may also question each other in order to clarify points.
 - 10. Notes taken during the meeting are for the use of the Committee members in arriving at their decision, and are destroyed after they have completed their deliberations.
 - 11. When the parties have completed their presentations and the Chair and the Committee members have no further questions, the meeting will be adjourned. The Committee will continue to deliberate in private.
 - 12. All members of the Committee, including the Chair, vote. A simple majority is required for a decision.
 - 13. The parties shall be informed verbally by the Chair as soon as the decision has been made. The decision will be confirmed in writing with sufficient detail as soon as possible but no later than 10 working days following the meeting.

II. **IMPORTANT INFORMATION FOR STUDENTS**

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I. Important Information for Students to Know

Academic Integrity – Plagiarism

Plagiarism is considered an academic offence under Article 15(a) of the Code of Student Conduct and Disciplinary Procedures which states that:

"No student shall, with intent to deceive, represent the work of another person as his or her own in any academic writing, essay, thesis, research report, project or assignment submitted in a course or program of study or represent as his or her own an entire essay or work of another, whether the material so represented constitutes a part or the entirety of the work submitted."

Plagiarism may be defined generally as the knowing submission of the work of another as if it were one's own. This can range from careless or sloppy work or errors resulting from inexperience, on the one hand, to intentional or wholesome academic deceit, on the other hand. This also includes double or joint submissions, and the submission a second time of one's own work. Certain forms of plagiarism involve an element of deliberation which is inherent and unchallengeable, and which demand reasonably specific and uniform responses. These plagiarisms are considered to be:

- a) the submission of work purchased from an organization
- b) the submission of work extensively copied from other sources
- c) the submission of work which has been improperly removed from a departmental file or office
- d) the submission of work written by another with or without permission

Upon demonstration that a student has represented another person's work as his own, it shall be presumed that the student intended to deceive. The student shall bear the burden of rebutting this presumption by evidence satisfying the person or body hearing the case that no such intent existed.

Because plagiarism is regarded as an academic offence, severe penalties are considered appropriate which can include a grade of F(0) for the plagiarized work and/or a failure in the course.

In submitting work in his/her courses, a student should remember that plagiarism is considered to be an extremely serious academic offence. If a student has any doubt as to what might be considered "plagiarism" in preparing an essay or term paper, he/she should consult the instructor of the course to obtain appropriate guidelines. With regard to what constitutes an academic offence, a student should refer to Chapter Three, Code of Student Conduct and Disciplinary Procedures in the Student Rights and Responsibilities Handbook.

Attendance and Term Work

Students will not be permitted to write an examination in any course unless they have fulfilled the requirements of the course, including those of attendance, to the satisfaction of the instructor and the Program Director.

It is the responsibility of the students to make sure at the time of registration that there is no conflict in the timetable of the courses which they propose to follow.

Students are expected to attend lectures regularly. In recent years, there has been an increase in absenteeism partly due to total reliance on the Note-Taking-Club. The School strongly encourages students to take their own notes in lectures to facilitate the understanding of the lecture and avoid misinterpretation. <u>Please note</u>: **permission of the instructor is required** before any lecture can be taped.

During the 3 year course of study, students are required to attend laboratory practical classes as part of the Occupational and Physical Therapy Programs. These classes involve learning about the treatment modalities and procedures used to assess and treat patients. This may include using electrical devices and other items of equipment, performing standardized assessments, practicing massage, performing external palpation and manipulation of the body, participating in structured group activities which may involve interviewing and role playing, and conducting psychosocial assessments. Students are expected to participate in these classes and practice the techniques and use of equipment on each other.

If there are personal reasons or problems associated with participation in a particular type of laboratory or practical class, students must consult the course instructor immediately. If possible, an alternative solution will be found.

Students who miss more than 10% practical classes or laboratories in a course without prior approval may not be permitted to take the final examination. Attendance will be taken at all practical classes. Reasons for absences are dealt with only by the Program Director and may require documentation.

Leaves of Absence

Leaves of absence will be granted <u>only</u> for reasons of health or family crises. Requests for leaves must be approved by the Program Director. A request must be accompanied by supporting documentation (e.g., a letter from the student's physician/counsellor). In general, a medical leave is granted for up to one year. The Program reserves the right to impose a limitation on the number as well as the total duration of leaves. Should a prolongation be requested, the Program reserves the right to require a second opinion from a Faculty-designated physician.

A student returning from a medical leave must provide supporting documentation from the treating physician/counsellor. These documents must state that the student is capable of resuming his/her studies.

Once the leave has been approved by the Program Director, the student's registration and fees must be verified by the Student Affairs Coordinator. Students may be required to forfeit all or part of their tuition fees. Students receiving financial aid must inform the Student Aid Office to assess the impact of the leave on financial aid.

Policy on Student Athletes

A student is considered to be a student athlete if he/she is a team member and is competing in an organized and recognized athletic event at the inter-collegiate level or higher. This policy **does not apply** to students who are engaged as trainers for athletic teams at any level.

While encouraging athletic participation and excellence on the part of our students, it should be acknowledged that their academic program takes priority when conflicts occur between team practices/games and classes/exams. Students may not miss classes due to practices. For McGill teams, competitions are not arranged during official McGill University exam periods. However, conflicts arise because some of the exam periods in our schedule are different from official McGill periods (for example, U3 fall term exam period).

At the beginning of the School year students must:

- Identify themselves as student athletes to the Program Director.
- Provide a schedule of athletic competitions to the Undergraduate Student Affairs Office no later than two weeks from the start of classes.

If a situation arises in which a competition occurs during a scheduled course, program activity or examination, the student must:

- Identify the conflict to the Program Director no later than two weeks prior to the event by providing the following documents:
 - ➤ A letter from the student requesting permission to be absent from classes for the proposed dates.
 - ➤ A letter from the coach confirming when and where the competition will be held and that the student is participating in the event,
 - > A copy of travel plans if appropriate.
- Obtain permission from the Program Director to participate in the event.

Students are required to follow the same procedures and timelines even if the date of the competition is unknown but is likely to conflict with an evaluation or examination, ie, semi-final or final competitions. **Late submissions will not be considered.**

The examination takes precedence over the athletic event. Possible solutions to the conflict are:

- Preparing an alternative evaluation for that particular student, or
- Shifting the weight normally assigned to the evaluation to the weight assigned to the remaining evaluation, or
- Deferring the evaluation or examination to another time.

Students are not permitted to write exams outside of McGill University. This may compromise the student and/or the exam. The procedures for conducting a deferred exam are the same as those listed in the Course Guide and other McGill documents.

The Program Director takes the final decision.

Code of Conduct for Users of McGill Computing Facilities

"McGill Computing Facilities (MCF) are intended to support the academic mission and the administrative functions of the university. This code of conduct states the principles regarding the use of MCF. They complement and supplement rather than replace other policies concerning appropriate conduct of staff and students.

McGill Computing Facilities include any computer, computer-based network, computer peripheral, operating system, software or any combination thereof, owned by McGill University or under the custody or control of McGill university."

This Code of Conduct states the principles regarding the use of McGill Computing Facilities (MCF). The following principles apply to all McGill staff, students and other users of the McGill Computer Facilities.

Users shall:

- 1. Be responsible for using these facilities in an effective, ethical and lawful manner.
- 2. Use only those facilities for which they have authorization, whether these facilities are at McGill or at any other location accessible through a network.
- 3. Take all reasonable steps to protect the integrity and privacy of the MCF including software and data. In particular, users shall not share with others the access codes, account numbers, passwords or other authorization which have been assigned to them.
- 4. Respect the copyrights of the owners of all software and data they use.
- 5. Respect the policies established by the administrators of external networks such as RISQ, CAnet, NSFNET when using such networks. They shall also respect the policies established by the administrators of local computing facilities at McGill.
- 6. Respect the privacy of others. This includes, but is not limited to, respecting the confidentiality of e-mail, files, data and transmissions.
- 7. Refrain from using MCF for unauthorized commercial activities.
- 8. Refrain from using MCF for any unauthorized or illegal purposes. Such purposes might include destruction or alteration of data owned by others, interference with legitimate access to computing facilities or harassment of users of such facilities at McGill or elsewhere, unauthorized disruption of MCF, attempts to discover or alter passwords or to subvert security systems in MCF or in any other computing or network facility.
- 9. Properly identify themselves in any electronic correspondence and provide valid, traceable identification if required by applications or servers within the MCF or in establishing connections from the MCF.

Users have a right to privacy. The level of privacy does not exceed, however, that of reasonable expectations. System failures or design faults may compromise this privacy and users should also recognize that authorized McGill personnel may have access to data and software stored on MCF while performing routine operations or pursuing system problems. Users should further recognize that, as specified in the relevant administrative policies at McGill, authorized McGill personnel have the obligation to take reasonable and appropriate steps to ensure the integrity of MCF and to ensure that this Code is observed. Any violation of this Code may be prosecuted in conformity with the relevant University policy (Code of Student Conduct, Personnel policies, etc.) and the principle of fundamental justice.

Code of Student Conduct

The Code of Student Conduct and Disciplinary Procedures as outlined in Chapter Three of the McGill University Handbook – Student Rights and Responsibilities is considered the basic university requirements and applies to all students registered on a part-time or full-time basis.

The School of Physical and Occupational Therapy, in addition to the above, requires that the following code of conduct be observed by all students, graduate or undergraduate, registered in the School's Programs.

Guidelines Regarding Professional Behaviour

Occupational and Physical Therapy are professions; therefore, our programs have rigorous standards of conduct. Professional behaviour is expected of students throughout their education, both in the classroom and clinical setting.

In addition, collaborative learning is highly valued and advocated at the School. Thus, the level of respect amongst students is expected to be of the highest standard. To allow students to successfully incorporate professional behaviour into their daily interactions with peers, the School staff, clinical teachers and Faculty, the following guidelines have been agreed upon by both the Faculty and the student representatives. These guidelines will be enforced throughout the program.

- 1) Students will be on time for classes. Time management is an important skill that affects all aspects of professional life. It is also a sign of respect to your fellow students and Faculty not to interrupt a learning activity in progress. Thus, unless unforeseeable major events occur (i.e. the metro is not working, major storms) consider the doors closed at the time that class is scheduled to start. If the course is one requiring compulsory attendance (refer to Course Guides) the student will be allowed to enter late, but will be considered absent on the attendance record and will not be permitted to write the final exam if their absences exceed the allowable limit.
- 2) Students are encouraged to actively participate in class. Thus, if you have questions, please direct them to the front of the class. Talking amongst students during class when a Faculty member, guest lecturer or fellow student is speaking

is unacceptable. This is one of the primary complaints of students about their fellow students and is perceived to be disruptive and interfering with their learning process. Thus, disruptive talking will not be tolerated and the disruptive student(s) will be asked to leave. If attendance is compulsory, the student will be considered absent on the attendance record and will not be allowed to write the final exam if their absences exceed the allowable limit.

3) Professionalism with respect to dress is encouraged throughout the program. When clients are scheduled to attend a learning activity or when the student is doing a class presentation, clinical placement, visit to external sites and during mOSCEs, professional attire is expected. Therefore, during these learning activities, informal (jeans, sweat pants and casual shorts) or provocative attire is not appropriate. Footwear must be appropriate to the setting and provide a measure of safety to yourself and your clients with respect to the environment and activities that you will be doing. This is a common complaint that is received from the clinical supervisors with respect to student behaviour during their placements. If dressed unprofessionally during any of the learning activities listed above, the student will be asked to return when dressed appropriately. If time does not permit, the student will receive an automatic failing grade, when applicable, and will be required to complete a supplemental assignment or exam.

A) Comportment

- 1. All full-time and part-time Faculty <u>must be addressed as professor</u> if such is their official title, unless otherwise instructed by the individual professor. Sessional lecturers who do not have an academic appointment are addressed using "Mr., Mrs., or Ms., etc."
- 2. All guest lecturers should be treated with due respect and courtesy. All critique of a negative nature with regard to the lecture should <u>be conveyed to the course coordinator in writing.</u>
- 3. Disruptive behaviour (talking, excessive movement, etc.) will not be tolerated during lectures or laboratory sessions. Faculty will exercise their right to dismiss students who exhibit this behaviour.
- 4. Students must attend all laboratory sessions and lectures as indicated in the Course Guide in professional courses.
- 5. Students may be required to wear shorts and shirts for practical sessions, if appropriate to the session.

B) Classrooms

- 1. No eating or drinking is permitted in classrooms at any time except with permission of the instructor. Any containers, cartons or refuse must be placed in the wastebasket not on the floor.
- 2. Students are permitted to use unoccupied classrooms for study and practice of therapeutic techniques, but must leave the room in a tidy and orderly manner. Students must respect the equipment and materials and will be held accountable for damage. Footwear must be removed when using plinths in the practical classes.

- C) Buildings in General (Davis, Hosmer and Hosmer Coach House)
- 1. All outdoor footwear must be removed at the building entrance during the late fall and winter sessions.
- 2. No smoking is permitted in the buildings or within 30 metres of building entrances.
- 3. Students are not permitted to sit on or otherwise block any of the staircases. This is a safety precaution to allow for unencumbered traffic flow and to prevent injuries.
- 4. Keys or ID cards to access Davis or Hosmer Houses are not to be loaned to any unauthorized person. Davis and Hosmer House front doors are equipped with timed-locking mechanisms. These outside doors self-lock at 5:00 p.m. at Davis House and at 6:00 p.m. at Hosmer House during the fall and winter semesters. Both doors are locked on weekends at all times. Holding the door open for longer than 60 seconds, once the locking mechanism has been activated, will set off an alarm.
- 5. The Undergraduate Student Affairs office, Hosmer 100, is accessible to all students during posted office hours.
- 6. Students are not permitted to be present in the halls in their underclothing.
- 7. Parking areas at Davis and Hosmer Houses are for use by permit holders. A fine of \$37.00 to \$42.00 is given to cars parked without a permit or a parking ticket, purchased at a cost of \$14.00 per day.

D) Clinical Facilities

- 1. All undergraduate students are required to adhere to their Program's codes of dress and professional conduct while on any clinical site visit.
- 2. All students must respect the confidential nature of clinical material (patient records, case discussions, etc.). The clinical material should only be discussed within a professional context and never in a public place.
- 3. All health care professionals and clients must be addressed by their official title and/or surname unless otherwise instructed.

Counselling

Student Services Counselling Service (Brown Student Services Building; counselling.service@mcgill.ca) has professional counsellors who are available to discuss personal, academic and career goals or problems. They can provide individual or group study skills sessions or guide students through financial, or other, crises by means of interventions or referrals.

The First-Year Office (FYO) (Brown Student Services Building; firstyear@mcgill.ca) can help new students navigate their way through the Undergraduate Course Calendar and the information contained in the *Welcome to McGill* book. They will help students prepare for the course registration period when the Minerva registration system opens for newly admitted students. To maximize this help, it is strongly recommended that students first read the sections in the Welcome to McGill book specific to their faculty. The FYO staff is always available to provide advice and referrals to the many support mechanisms at McGill.

Career and Placement Service (Brown Student Services Building: careers.caps@mcgill.ca) provides career education, guidance, and individual advising to students in their search for permanent, part-time, or summer jobs and internships.

Faculty Adviser

The Mission Statement of the University expresses the commitment to offer students "the best education available". An essential component of this is the advising process. The active participation of students in the advising process is essential in order for them to access the full range of academic opportunities during their studies. They must be proactive in seeking meetings with advisers, professors, counsellors, and such to ensure that they receive the advice they need to meet their academic goals. It should be noted that, while advisers are there to provide students with guidance, students are ultimately responsible for meeting the requirements of their degree. It is their responsibility to inform themselves about the rules and regulations of the University faculty, and their program. With the students' cooperation, all advisers and counselors will work together to help students throughout their undergraduate studies.

Your adviser

- is a faculty member with whom you can build a relationship to counsel you throughout the program;
- can guide you with both academic and non-academic concerns;
- is the person in the School with whom you can discuss any matter and to whom you may go for advice;
- will provide ongoing advice and guidance on the program;
- will assist you with workload management;
- will assist you with guidance regarding career options or considerations;
- will offer help managing academic situations during periods of personal, financial, or medical problems, by working with students to identify various possibilities and strategies for making informed decisions;
- will communicate with other advisers within the University and, with a student's permission, serve as a direct link to other University resources.

Please note that you will be assigned a faculty adviser during the first week of classes. This is a contact person in the School with whom you can discuss any matters and to whom you may go for advice. This does not preclude you from contacting any faculty member you may choose. Normally matters pertaining to a specific course are addressed first to the coordinator of the particular course. The Program Directors are also available for any student who seeks a discussion or advice.

Email Policy

E-mail is one of the official means of communication between McGill University and its students. As with all official University communications, it is the student's responsibility to ensure that time-critical e-mail is accessed, read and acted upon in a timely fashion. Therefore it is important to read your McGill e-mail on a regular basis, since failing to access your e-mail will not be considered an acceptable reason for not acting on the correspondence. Important notices from the School, including your instructors, will be

communicated via e-mail to your McGill e-mail address only, and will not be sent to any other e-mail address.

If a student chooses to forward University e-mail to another e-mail mailbox, it is that student's responsibility to ensure that the alternate account is viable. For details on how to check your e-mail from any computer with internet access, go to: http://webmail.mcgill.ca.

Student Rights and Responsibilities

"The integrity of university academic life and of the degrees the university confers is dependent upon the honesty and soundness of the teacher-student learning relationship and, as well, that of the evaluation process. Conduct by any member of the university community that adversely affects this relationship or this process must, therefore, be considered a serious offence."

Each student is advised to be familiar with the contents of the <u>Handbook on Student Rights and Responsibilities</u>, including the disciplinary procedures that will be taken for any academic offences. This handbook will be provided during the orientation meeting with the U1 Students.

Safety and Well-being

Safety and well-being of Students and Faculty, both at the School of Physical and Occupational Therapy and on campus, are managed at multiple levels.

Generally speaking, the establishment of policies, procedures and services for safety and well-being are the responsibility of main campus.

In the event of an accident, the School's Building Director assists students in the completion of an Accident Event Report to the Environmental Safety Office. In addition, issues of safety and well-being are addressed by students at the Faculty-Student Liaison Meeting.

When a security incident occurs the Security Incident Report is reviewed by the Security Services supervisors and the reports distributed accordingly. Should the incident involve a student, a copy of the report is sent to the Office of the Dean of Students, at which time the office may choose to contact the student if they think it is appropriate, to see if any further assistance can be provided. If the incident report describes a safety or security issue, the report is forwarded to the Environmental Safety office, to the Facilities Management and Development office or to one of the Security Services Staff so that measures can be taken to remedy the situation.

The Joint Advisory Health and Safety Committee is an advisory body that is jointly comprised of McGill employees and students. This committee has multiple mandates including "to ensure mechanisms are in place for systematic hazard identification and risk assessment" and "to oversee the system of internal responsibility and accountability within the organization" (for more details refer to http://www.mcgill.ca/ehs/safetycommittees/).

McGill University Walksafe Network provides a "safe and effective alternative to walking or using public transportation alone at night" (http://www.mcgill.ca/security/community/walksafe/).

In order to support the continual re-examination and promotion of health and well-being, the Dean of Students initiates a yearly call for applications to the Mary H. Brown Fund. This is an endowment fund that provides a total of approximately \$20,000 annually for "the creation and early support of innovative, on-campus projects that benefit McGill students' physical and psychological well-being and related initiatives" (http://www.mcgill.ca/studentservices/).

Guidelines for Writing a Term Paper

No paper will be accepted late without the approval of the instructor, PRIOR to the original due date. A new deadline may then be arranged between the instructor and student if the request is valid. Failure to conform to this procedure may mean that the student will automatically receive a mark of "0" for the paper.

NOTE: the referencing system of the American Psychological Association (APA) must be used for term papers. Please refer to the APA Research Style Crib sheet included in this course guide for your convenience.

TERM PAPERS:

- must be typewritten and doubled spaced.
- size of paper, 8 ½ x 11", heavy duty, white bond.
- margin: 1" on all sides.
- written in Times New Roman, Arial or Courier New font.

SEPARATE PAGE FOR THE FOLLOWING READINGS:

- a) title page shall contain:
 - o title of article
 - o author's name
 - o course number
 - o professor's name
 - o date
- b) abstract
 - o 100 to 250 words may be required (depending on the professor)
 - the abstract is a concise statement about what was done, what was found and what was concluded.
- c) acknowledgement includes:
 - names and positions of any individuals who have helped in the preparation of the project, in assessing the results, or in preparing the illustrations or graphs, as well as:

o names of any agency such as professional organizations or the Dominion Bureau of Statistics who have provided data.

d) index of contents

this must be included with their page numbers.

e) introduction and objective of paper

this section should introduce the topic and state clearly the objective of the paper as well as define any terms which may not be of common usage and known to everyone in the particular context of the paper, for example, a qualified therapist is one who, and an unqualified therapist is one who

f) presentation

 this part contains the "body" of the paper and it should be subdivided into sections depending on the content. These sub-sections must be listed separately in the index under "presentation".

g) discussion

- this part should reflect whether the paper has helped to clarify or resolve the original purpose.
- o practical implications that could be drawn from the paper could be presented here.
- o ideas from the paper that could be useful for further study could also be given

h) conclusion

- this part should reflect whether the paper has helped to clarify or resolve the original purpose.
- o practical implications that could be drawn from the paper could be presented here.
- o ideas from the paper that could be useful for further study could also be given

i) reference or bibliography

- The term bibliography is much too pretentious except in the case of a library study which contains a complete list of everything published within specified limits about the subject.
- References (books, personal comments, documents, articles) are sources through which the author has obtained information. The value of an article is not measured by the number of references and they should not be included merely to impress the professor. The worst sin is to include a list of references which have never been read or seen by the author.
- o All references, be they ideas or fact from work of another person, must be documented. If they are not, this constitutes "PLAGIARISM".
- See Section on "Plagiarism".

j) appendix

- An appendix, although rarely used, is helpful under certain circumstances. If describing certain materials in depth would be distracting or inappropriate to the main body of the paper, you might include an appendix.
- Some examples of suitable material for an appendix are:
- o Sample of questionnaires, evaluation forms, etc.
- A list of materials used in the study.
- Samples of clients' productions.
- The criterion for including an appendix is whether the material is useful to the reader in understanding, evaluating, or replicating your proposal. Material of either general or specialized interest should not be presented for its own sake. When an appendix is used, the reference in text should read: as follows: (See Appendix A for complete derivation).

NOTE: the referencing system of the American Psychological Association (APA) must be used for term papers.

APA Research Style Crib Sheet

Russ Georgia Southern University Dewey

[This page is a summary of rules for using APA style. The version you are reading was revised 10/10/96, edited and revised again on September 5, 2000 with Bill Scott of the College of Wooster, and updated in January 2003 by Doc Scribe. I have made every effort to keep this document accurate, but readers have occasionally pointed out errors and inconsistencies which required correction. I am grateful to them and invite additional feedback. This document may be reproduced freely if this paragraph is included. --Russ Dewey, rdewey@gasou.edu]

Download the APA Crib Sheet PDF and other APA style resources from <u>Dr. Abel Scribe</u> PhD.

See Professor Dewey's excellent Web site for Psychology Students.

APA Crib Sheet Contents

- Introductory Information
- Rules
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 - o Avoiding biased and pejorative language
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- Page Formats
 - <u>Title & text pages</u> (graphic)
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- Commas
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- o **Numbers**
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- (graphic)
- o Tables (notes)
- Reference Citations (In-Text)
- Reference Formats
 - Abbreviating within a reference
 - Alphabetizing within reference lists
 - APA reference style & examples

INTRODUCTORY INFORMATION

APA style is the style of writing used by journals published by the American Psychological Association (APA). The style is documented in the *APA Publication Manual* (5th ed., 2001). The APA *Manual* began as an article published in *Psychological Bulletin* in 1929. That article reported results of a 1928 meeting of representatives from anthropological and psychological journals, "to discuss the form of journal manuscripts and to write instructions for their preparation" (APA, 2001, p. xix). By 1952 the guidelines were issued as a separate document called the *Publication Manual*. Today the manual is in its fifth edition, and the *APA format* described in it is a widely recognized standard for scientific writing in psychology and education.

Some of the more commonly used rules and reference formats from the manual are listed here. However, this web page is no substitute for the 440 page APA *Manual* itself, which should be purchased by any serious psychology student in the U.S., or by students in other countries who are writing for a journal which uses APA format. The APA *Manual* can be found in almost any college bookstore, as well as in many large, general-purpose bookstores, in the reference and style guide section. You may check the current price and delivery of the APA *Manual* by clicking on this link to <u>amazon.com</u>. The spiral bound edition is especially handy when formatting research papers.

The APA *Manual* draws a distinction between "final manuscripts" such as class papers, theses, and dissertations, and "copy manuscripts" to be submitted for review and publication. The *APA Crib Sheet* follows the instructions given in chapter six for "Material Other Than Journal Articles" (APA, 2001, pp. 321-330). Final manuscripts differ from copy manuscripts in these ways:

Spacing. "Double-spacing is required throughout most of the manuscript. When single-spacing would improve readability, however, it is usually encouraged. Single spacing can

- be used for table titles and headings, figure captions, references (but double-spacing is required between references), footnotes, and long quotations" (APA, 2001, p. 326).
- Figures, tables, and footnotes. "In a manuscript submitted for publication, figures, tables, and footnotes are placed at the end of the manuscript; in theses and dissertations, such material is frequently incorporated at the appropriate point in text as a convenience to readers" (APA, 2001, p. 325).

The most notable **additions and changes** to fifth edition of the APA *Manual* (2001) include:

- Electronic sources require new formats in references. The formats previously featured on the APA Web site have been superseded. Several formats are included in the *Crib Sheet*.
- Italics or underline? "Use the functions of your word-processing program to create italic, bold, or other special fonts or styles following the style guidelines specified in this *Publication Manual*" (APA, 2001, p. 286). However, underlining in place of italics is still acceptable when using a typewriter (see APA, 2001, p. 100). Always be consistent!
- Hanging indents. "APA publishes references in a hanging indent format. . . . If a hanging indent is difficult to accomplish with your word-processing program, it is permissible to indent your references with paragraph indents" (APA, 2001, p. 299).

RULES

Following is a summary of *rules* and *reference examples* in the APA style manual. The manual itself contains all this information and more, organized and worded differently, indexed and illustrated. If in doubt about a specific rule or example, consult the manual itself.

Abbreviations

- Avoid abbreviations (acronyms) except for long, familiar terms (MMPI).
- Explain what an abbreviation means the first time it occurs: American Psychological Association (APA).
- If an abbreviation is commonly used as a word, it does not require explanation (IQ, LSD, REM, ESP).
- Do not use the old abbreviations for subject, experimenter, and observer (S, E, O).
- The following abbreviations should NOT be used outside parenthetical comments:
- o cf. [use compare]
- o e.g. [use for example]
- etc. [use and so forth]
- o i.e. [use that is]
- viz. [use namely]
- o vs. [use versus]
- Use periods when making an abbreviation within a reference (Vol. 3, p. 6, 2nd ed.)
- Do not use periods within degree titles and organization titles (PhD, APA).
- Do not use periods within measurements (lb, ft, s) except inches (in.).

- Use s for second, m for meter.
- To form plurals of abbreviations, add s alone, without apostrophe (PhDs, IQs, vols., Eds).
- In using standard abbreviations for measurements, like m for meter, do not add an s to make it plural (100 seconds is 100 s); when referring to several pages in a reference or citation, use the abbreviation pp. (with a period after it and a space after the period).
- Do not use the abbreviation "pp." for magazine or journal citations; just give the numbers themselves. Do use "pp." for citations of encyclopedia entries, multi-page newspaper articles, chapters or articles in edited books.
- Use two-letter postal codes for U.S. state names (GA).

Avoiding Biased and Pejorative Language

In general, avoid anything that causes offence. The style manual makes the following suggestions:

DO NOT use . . .

ethnic labels (for example, Hispanic)

"men" (referring to all adults)

"homosexuals"

"depressives"

when you can use . . .

geographical labels (Mexican Americans)

"men and women"

"gay men and lesbians"

"people with depression"

Correct use of the terms "gender" and "sex"

The term "gender" refers to culture and should be used when referring to men and women as social groups, as in this example from the *Publication Manual:* "sexual orientation rather than gender accounted for most of the variance in the results; most gay men and lesbians were for it, most heterosexual men and women were against it" (APA, 2001, p. 63).

The term "sex" refers to biology and should be used when biological distinctions are emphasized, for example, "sex differences in hormone production."

Avoid gender stereotypes. For example, the manual suggests replacing "An American boy's infatuation with football" with "An American child's infatuation with football" (see APA, 2001, p. 66).

Sensitivity to labels

Be sensitive to labels. A person in a clinical study should be called a "patient," not a "case." Avoid equating people with their conditions, for example, do not say "schizophrenics," say "people diagnosed with schizophrenia." Use the term "sexual orientation," not "sexual preference." The phrase "gay men and lesbians" is currently preferred to the term "homosexuals." To refer to all people who are not heterosexual, the manual suggests "lesbians, gay men, and bisexual women and men" (APA, 2001, p. 67).

In racial references, the manual simply recommends that we respect current usage. Currently both the terms "Black" and "African American" are widely accepted, while "Negro" and "Afro-American" are not. These things change, so use common sense.

Capitalize *Black* and *White* when the words are used as proper nouns to refer to social groups. Do not use color words for other ethnic groups. The manual specifies that hyphens should not be used in multiword names such as Asian American or African American.

Labels can be tricky, and the manual has a lot to say about them. For example, "American Indian" and "Native American" are both acceptable usages, but the manual notes that there are nearly 450 Native American groups, including Hawaiians and Samoans, so specific group names are far more informative.

The terms *Hispanic, Latino,* and *Chicano* are preferred by different groups. The safest procedure is use geographical references. Just say "Cuban American" if referring to people from Cuba.

The term *Asian American* is preferable to *Oriental*, and again the manual recommends being specific about country of origin, when this is known (for example, Chinese or Vietnamese). People from northern Canada, Alaska, eastern Siberia, and Greenland often (but not always!) prefer *Inuk* (singular) and *Inuit* (plural) to "Eskimo." But some Alaska natives are non-Inuit people who prefer to be called Eskimo. This type of difficulty is avoided by using geographical references. For example, in place of "Eskimo" or "Inuit" one could use "people from northern Canada, Alaska, eastern Siberia, and Greenland."

In general, call people what they want to be called, and do not contrast one group of people with another group called "normal" people. Write "we compared people with autism to people without autism" not "we contrasted autistics to normals." Do not use pejorative terms like "stroke victim" or "stroke sufferers." Use a more neutral terminology such as "people who have had a stroke." Avoid the terms "challenged" and "special" unless the population referred to prefers this terminology (for example, Special Olympics). As a rule, use the phrase "people with ______" (for example, "people with AIDS," not "AIDS sufferers").

In referring to age, be specific about age ranges; avoid open-ended definitions like "under 16" or "over 65." Avoid the term *elderly*. *Older person* is preferred. *Boy* and *Girl* are acceptable referring to high school and and younger. For persons 18 and older use *men* and *women*.

Capitalization

- Capitalize formal names of tests (Stroop Color-Word Interference Test).
- Capitalize major words and all other words of four letters or more, in headings, titles, and subtitles outside reference lists, for example, "A Study of No-Win Strategies."

- Capitalize names of conditions, groups, effects, and variables only when definite and specific. (Group A was the control group; an Age x Weight interaction showed lower weight with age.)
- Capitalize the first word after a comma or colon if, and only if, it begins a complete sentence. For example, "This is a complete sentence, so it is capitalized." As a counter example, "no capitalization here."
- Capitalize specific course and department titles (GSU Department of Psychology, Psych 150).
- Do not capitalize generic names of tests (Stroop color test). "Stroop" is a name, so it remains capitalized.
- Capitalize nouns before numbers, but not before variables (Trial 2, trial x).
- Do not capitalize names of laws, theories, and hypotheses (the law of effect).
- Do not capitalize when referring to generalities (any department, any introductory course).

Commas

- Do not use commas to separate parts of measurement (9 lbs 5 oz). Use the metric system, as a rule.
- Use commas before "and" in lists, for example, height, width, and depth.
- Use commas between groups of three digits, for example, 1,453.
- Use commas to set off a reference in a parenthetical comment (Patrick, 1993).
- Use commas for seriation within a paragraph or sentence. For example, "three choices are (a) true, (b) false, and (c) don't know." Use semicolons for seriation if there are commas within the items. For example, (a) here, in the middle of the item, there are commas; (b) here there are not; (c) so we use semicolons throughout.
- Use commas in exact dates, for example, April 18, 1992 (but not in April 1992).

Hyphenation

- Do not hyphenate -ly and superlative words (widely used test, best informed students).
- Do not hyphenate common prefixes (posttest, prewar, multiphase, nonsignificant) unless needed for clarity (pre-existing).
- Do not hyphenate foreign, letter, numeral terms (a priori hypothesis, Type A behavior) when the meaning is clear without it (least squares solution, heart rate scores).
- Do not hyphenate if a noun comes first (a therapy was client centered, results of *t* tests).
- Hyphenate adjectival phrases (role-playing technique, high-anxiety group, two-way analysis).
- Hyphenate compound adjectives preceding nouns (client-centered therapy, *t*-test scores) unless the compound adjective involves a superlative (best written paper).
- Hyphenate if the base is an abbreviation or compounded (pre-UCS, non-college bound).
- Hyphenate if the base word is capitalized or a number (pre-Freudian, post-1960).
- Hyphenate if the words could be misunderstood without a hyphen (re-pair, un-ionized, co-worker).
- If in doubt, consult a recently published dictionary. Standards change. For example, "data base" is now "database," and "life-style" is now "lifestyle."

Italics (Underlining)

- Do not italicize or underline common foreign abbreviations (vice versa, et al., a priori).
- Do not italicize or underline for mere emphasis.
- Italicize or underline the titles of books and articles, species names, introduction of new terms and labels (the first time only), words and phrases used as linguistic examples, letters used as statistical symbols, and volume numbers in reference lists.

Miscellaneous: Colons, dashes, parentheses, numbering paragraphs

- Do not use "and/or." Write things out. For example, "Monday, Tuesday, or both" is preferable to "Monday and/or Tuesday."
- Do not use a colon or other punctuation after an introduction which is not a complete sentence such as

this one, or any other sentence in the body of text which flows into an extended quote. The quote "picks up where the sentence leaves off" and provides the punctuation.

- Use a dash (rendered on typewriters and some word processors as a double hyphen) when there is a sudden interruption like this one--zoiks!--in the flow of a sentence. Overuse "weakens the flow of the writing" (APA, 2001, p. 81).
- Use parentheses to introduce an abbreviation, for example, the galvanic skin response (GSR).
- Use appendixes (appendices) as the plural of appendix. Use datum as singular, data as plural. Use matrix as singular, matrices as plural. Phenomenon is the singular form of the plural phenomena. Use schema as singular, schemas (not schemata) as plural.
- When listing separate paragraphs in a series, use a number and a period, not parentheses.
- 1. The first paragraph goes here.
- 2. The second paragraph goes here.

Numbers

- Spell out common fractions and common expressions (one-half, Fourth of July).
- Spell out large numbers beginning sentences (Thirty days hath September . . .).
- Spell out numbers which are inexact, or below 10 and not grouped with numbers over 10 (one-tailed *t* test, eight items, nine pages, three-way interaction, five trials).
- Use numerals for numbers 10 and above, or lower numbers grouped with numbers 10 and above (for example, from 6 to 12 hours of sleep).
- To make plurals out of numbers, add s only, with no apostrophe (the 1950s).
- Treat ordinal numbers like cardinal numbers (the first item of the 75th trial . . .).
- Use combinations of written and Arabic numerals for back-to-back modifiers (five 4-point scales).
- Use combinations of numerals and written numbers for large sums (over 3 million people).

- Use numerals for exact statistical references, scores, sample sizes, and sums (multiplied by 3, or 5% of the sample). Here is another example: "We used 30 subjects, all two year olds, and they spent an average of 1 hr 20 min per day crying.
- Use metric abbreviations with figures (4 km) but not when written out (many meters distant).
- Use the percent symbol (%) only with figures (5%) not with written numbers (five percent).

Quotation Marks

- Use quotation marks for an odd or ironic usage the first time but not thereafter, for example, "This is the "good-outcome" variable, but as it turns out, the good-outcome variable predicts trouble later on . . ."
- Use quotation marks for article and chapter titles cited in the text but not in the reference list. (In Smith's (1992) article, "APA Style and Personal Computers," computers were described as "here to stay" (p. 311).)

Extended quotations

- Add emphasis in a quotation with italics, immediately followed by the words [italics added] in brackets.
- Brackets are not necessary when changing the first letter of a quotation to upper case.
- For quotations over 40 words in length, indent and single space the whole block (double space in papers for review or publication). Indent five more spaces (one-half inch, 1.25 cm) if there are paragraphs within the long quotation after the first. Always provide author, year, and page citation.
- Expand or clarify words or meanings in a quotation by placing the added material in quotes. For example, "They [the Irish Republican Army] initiated a cease-fire."
- Reproduce a quote exactly. If there are errors, introduce the word *sic* italicized and bracketed--for exammple [*sic*]--immediately after the error to indicate it was part of the original source.
- Use three dots with a space before, between, and after each (ellipsis points) when omitting
 material, four if the omitted material includes the end of a sentence (with no space before
 the first). Do not use dots at the beginning or end of a quotation unless it is important to
 indicate the quotation begins or ends in midsentence.

Do NOT use quotes to . . .

- . . . cite a linguistic example; instead, underline or italicize the term (the verb *gather*).
- . . . hedge, cast doubt, or apologize (he was "cured"). Leave off the quotes.
- ... identify endpoints on a scale; underline or italicize instead (poor to excellent).
- . . . introduce a key term (the *neoquasipsychoanalytic* theory).

PAGE FORMATS

The APA Manual notes that "the size of the type should be one of the standard typewriter
sizes (pica or elite) or, if produced from a word processing program, 12 points" (2001, p.
285). The body of the paper should be in a serif typeface (like Courier or Times Roman)
with lettering on figures in a sans serif typeface (such as Helvetica or Arial).
Headings
APA headings follow a complex hierarchy, with provision for up to five levels. These
come, in descending order, as levels 5, 1, 2, 3, 4. But, if one, two, or three levels of
headings are required in a paper, use levels 1, 3, and 4, in that order. If four levels are required, interleave level 2 between levels 1 and 3. If five levels are required, start with
level five and work down the remaining hierarchy in order (5, 1, 2, 3, 4). Confused? Most
papers will need no more than three levels. To avoid confusion these are labeled A, B, and
C below (APA levels 1, 3, and 4 respectively) (see APA, 2001, pp. 114ñ115).
Level A Headings are Contored and Set in Heading Cons
Level A Headings are Centered and Set in Heading Caps

Level B: Flush with Left Margin, Italicized, Set in Heading Caps

Level C headings: Indented, italicized, sentence caps, end with a period. These headings are sometimes referred to as paragraph or run-in headings. Although they end with a period (or other punctuation) they need not be complete sentences or grammatically correct.

Use headings in the order presented. If you need just two levels, use Level A and Level B headings. Level A and B headings do not end with punctuation except to add emphasis with an exclamation point or question mark. Do not begin a paper with the heading *Introduction*. It is understood that all papers begin with an introduction.

Text details

- Abstracts are limited to 120 words (APA, 2001, p. 13).
- Double space the text, but single space within block quotes, references, and the abstract.
- Footnotes are rarely used in APA papers, except for author affiliation and contact information--the *author note*.
- Hyphenation should not occur at the end of lines, only between words when necessary.
- Indent paragraphs, block quotes, and hanging indents one-half inch (1.25 cm or five to seven spaces).
- Justification should be set to "off" or "left margin only" (the right margin should be uneven, a *ragged right* margin).
- Keyword emphasis requires the use of italics, but only the first time a term is used. If the
 intent is to indicate odd or ironic usage, use quotation marks.
- Margins should be at least 1" all around (about 2.5 cm).
- Page numbers are required on every page: Number pages consecutively.
- The page header summarizes the title in a few words. The header and page number go inside the margin space, double spaced above the text, next to the right margin.
- Word processor features--such as bold and italic fonts and hanging indents--should be used as appropriate.

References and tables

×		

Table notes

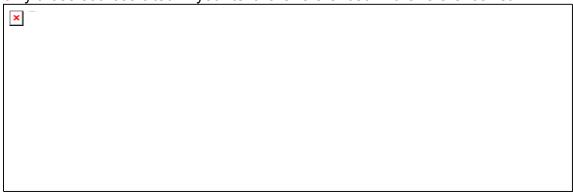
Number tables consecutively as they appear in your text. Use only whole numbers, no 5a, 5b, etc. See recent issues of the *American Psychologist* or other APA journals for more complex table layouts. "Tables are efficient, enabling the researcher to present a large amount of data in a small amount of space" (APA, 2001, p. 147).

- Place tables close to where they are first mentioned in your text, but do not split a table across pages. (Tables in papers submitted for review or publication are placed on separate pages at the end of the paper.)
- Label each table beginning with the table number followed by a description of the contents.
- Horizontal rules (lines) should be typed into tables; do not draw them in by hand.
- Each row and column must have a heading. Abbreviations and symbols (e.g., "%" or "nos.") may be used.
- Do not change the number of decimal places within a column.
- Do not change the units of measurement within a column.
- "Use a zero before the decimal point when numbers are less than one" (APA, 2001, p. 128). Write "0.23" not ".23" *unless* the number is a statistic that cannot be larger than one, for example a correlation r = .55, or a probability p < .01.
- Add notes to explain the table contents. These may be general notes or footnotes. The latter are labeled "a, b, c, etc."

- Use asterisks to indicate statistical significance explained in the probability level note at the bottom of the table. "Assign a given alpha level the same number of asterisks from table to table within your paper, such as *p < .05 and **p < .01; the largest probability receives the fewest asterisks [the smaller probability get more asterisks]" (APA, 2001, p. 170).
- You may both single space and double space within a table to achieve clarity. Tables in papers submitted for review or publication (only!) must be double spaced throughout.

REFERENCE CITATIONS (IN-TEXT)

Use the author-date format to cite references in text. For example: as Smith (1990) points out, a recent study (Smith, 1990) shows. . . . Every source cited in your text--and only those sources cited in your text--are referenced in the reference list.



- For two-author citations, spell out both authors on all occurrences.
- For multiple-author citations (up to five authors) name all authors the first time, then use et al., so the first time it is Smith, Jones, Pearson and Sherwin (1990), but the second time it is Smith et al., with a period after "al" but no underlining.
- The first time an "et al." reference is used in a paragraph, give the year, thereafter (if the citation is repeated in the paragraph) omit the year.
- For six or more authors, use et al. the first time and give the full citation in references.
- Include a page reference after the year, outside quotes. For example: The author stated,
 "The effect disappeared within minutes" (Lopez, 1993, p. 311), but she did not say which
 effect; Lopez found that "the effect disappeared within minutes" (p. 311). The sentence
 quoted is capitalized only if it follows a comma, and is a complete sentence not merged
 into the flow of the text.
- If two or more multiple-author references which shorten to the same "et al." form, making it ambiguous, give as many author names as necessary to make them distinct, before et al. For example: (Smith, Jones, et al., 1991) to distinguish it from (Smith, Burke, et al., 1991).
- Join names in a multiple-author citation with *and* (in text) or an ampersand (&) in reference lists and parenthetical comments. For example: As Smith and Sarason (1990) point out, the same argument was made by in an earlier study (Smith & Sarason, 1990).
- If a group is readily identified by its initials, spell it out only the first time. For example, "As reported in a government study (National Institute of Mental Health [NIMH], 1991), blah blah . . . " and thereafter, "The previously cited study (NIMH, 1991) found that . . .

- If the author is unknown or unspecified, use the first few words of the reference list entry (usually the title), for example: ("Study Finds," 1992).
- If citing multiple works by the same author at the same time, arrange dates in order. In general, use letters after years to distinguish multiple publications by the same author in the same year. For example: Several studies (Johnson, 1988, 1990a, 1990b, 1995 in press-a, 1995 in press-b) showed the same thing.
- For old works cite the translation or the original and modern copyright dates if both are known, for example: (Aristotle, trans. 1931) or (James, 1890/1983).
- Always give page numbers for quotations, for example: (Cheek & Buss, 1981, p. 332) or (Shimamura, 1989, chap. 3, p. 5).
- For e-mail and other "unrecoverable data" use personal communication, for example: (V.-G. Nguyen, personal communication, September 28, 1993). These do not appear in the reference list.
- For quoting electronic documents without page numbers, cite paragraph numbers if given, indicated by the paragraph symbol or the abbreviation para. in the citation (e.g., Smith, 2000, ¶ 17). If there are no paragraph numbers, cite the nearest preceding section heading and count paragraphs from there (e.g., Smith, 2000, Method section, para. 4).

REFERENCE FORMATS

Your text and the reference list must agree. "References cited in text must appear in the reference list; conversely, each entry in the reference list must be cited in text" (APA, 2001, p. 215). See the section on Reference citations for citing references in text.

Abbreviating within a reference

Here are approved abbreviations for use in a reference list:

- **chap.** for chapter
- ed. for edition
- rev. ed. for revised edition
- 2nd ed. for second edition
- **Ed.** for Edited by
- **(Eds.)** for multiple editors
- Trans. for Translated by
- **p.** for page number, with a space after the period

- **pp.** for page numbers (plural)
- Vol. for a specific Volume
- vols. for a work with xx volumes
- No. for Number
- Pt. for Part
- **Suppl.** for Supplement,
- Tech. Rep. for Technical Report

Use the abbreviation "pp." for page numbers in encyclopedia entries, multi-page newspaper articles, chapters or articles in edited books, but *not* in journal or magazine article citations, where numbers alone should be used (see examples of reference formats).

Alphabetizing within reference lists

- Use prefixes in alphabetizing names if commonly part of the surname (De Vries).
- Do not use *von* in alphabetizing (Helmholtz, H. L. F. von), or *Jr., III, or Sr.*
- Treat Mc and Mac literally; Mac comes before Mc.
- Disregard apostrophes, spaces, and capitals in alphabetizing; *D'Arcy* comes after *Daagwood*, *Decker* comes after *de Chardin*.
- Single-author citations precede multiple-author citations of the same year (Zev, 1990 then Zev et al., 1990).
- Alphabetize corporate authors by first significant word. Do not use abbreviations in corporate names.

APA reference style

The APA *Publication Manual* now instructs authors to use hanging indents for references, and to use *italics* for titles. The hanging indent is one-half inch (1.25 cm), just like paragraph indents. All titles in references are set in sentence caps, but titles quoted in the text are set in heading caps. No quotation marks are used around titles of articles in references, but quotes are used when citing article titles in the text. The APA *Publication Manual* (2001) contains 95 examples of different reference types (pp. 240-281). Here are a few examples of the most commonly used formats.

Anonymous or unknown author (common in newspapers):

Caffeine linked to mental illness. (1991, July 13). New York Times, pp. B13, B15.

Citation: ("Caffeine Linked," 1991). Use heading caps when citing titles in text citations.

Books (Group author, 3ñ5 authors, reprint/translation, edition other than first):

American Psychiatric Association. (1990). *Diagnostic and statistical manual of mental disorders* (3rd ed). Washington, DC: Author.

Citation: (American Psychiatric Association [APA], 1990); next citation (APA, 1990). Note: "Author" is used as above when author and publisher are identical.

Booth, W. C., Colomb, G. G., & Williams, J. M. (1995). *The craft of research.* Chicago: University of Chicago Press.

Citation: (Booth, Colomb, & Williams, 1995); next citation (Booth et al., 1995).

Ebbinghaus, H. (1913). *Memory* (H. A. Rueger & C. E. Bussenius, Trans.). New York: Teachers College. (Original work published 1885)

Citation: (Ebbinghaus, 1885/1913).

Strunk, W., Jr., & White, E. B. (1979). *The elements of style* (3rd ed.). New York: Macmillan.

Citation: (Strunk & White, 1979).

Chapter or section in a book (online & print):

Beers, M. H., & Berkow, R. (1999). Mood disorders. In *The Merck manual of diagnosis and therapy* (17th ed., sec. 15, chap. 189). Retrieved January 17, 2003, from http://www.merck.com/pubs/mmanual/section15/chapter189/189a.htm

Stephan, W. G. (1985). Intergroup relations. In G. Lindzey & E. Aronson (Eds.), *The handbook of social psychology* (3rd ed., Vol. 2, pp. 599-658). New York: Random House.

Citations: (Beers & Berkow, 1999, chap. 189); (Stephan, 1985). Note: Break a URL to wrap a line only after a slash or before a period. Do not add a hyphen or any other punctuation.

Conference paper (unpublished):

Shrout, P. E. (Chair), Hunter, J. E., Harris, R. J., Wilkinson, L., Strouss, M. E., Applebaum, M. I., et al. (1996, August). *Significance tests: Should they be banned from APA journals?* Symposium conducted at the 104th Annual Convention of the American Psychological Association, Toronto, Canada.

Citation: (Shrout et al., 1996). APA references list up to the first six authors to a work. If there are more add et al. (and others) to the list of names. In text citations give just the lead author, et al. Published papers are referenced as a chapter in a book.

Government report online accessed through GPO database:

National Institute of Mental Health. (2002). *Breaking ground, breaking through: The strategic plan for mood disorders research of the National Institute of Mental Health* (Publication No. 0507-B-05). Retrieved January 19, 2003, from NIMH Web site via GPO Access: http://purl.access.gpo.gov/GPO/LPS20906

Citation: (National Institute of Mental Health [NIMH], 2002); next citation (NIMH, 2002).

Journal articles (Print, electronic copy, changed source, online journal, paged by issue):

Hypericum Depression Trial Study Group. (2002). Effect of *Hypericum perforatum* (St John's Wort) in major depressive disorder: A randomized controlled trial. *JAMA*, 287, 1807ñ1814.

Citation: (Hypericum Depression Trial Study Group, 2002). The APA *Manual* requires citing the full name of a corporate author like this; the acronym would not be easily

recognized. However, shortening the author to "Hypericum Depression Trial" in subsequent citations would probably be acceptable to editors of APA journals.

Journal article, electronic facsimile:

Hypericum Depression Trial Study Group. (2002). Effect of *Hypericum perforatum* (St John's Wort) in major depressive disorder: A randomized controlled trial [Electronic version]. *JAMA*, 287, 1807ñ1814.

Many documents are now available online as exact facsimile copies of the print original (usually in Adobe's PDF format). References to these facsimiles just add the note [Electronic version] to the reference. If the document is not an exact copy of a print version--"(e.g., the format differs from the print version or page numbers are not indicated)"--add the date you retrieved the document and the URL to the reference (APA, 2001, p. 271).

Journal article, changed/doubtful source:

Hypericum Depression Trial Study Group. (2002). Effect of *Hypericum perforatum* (St John's Wort) in major depressive disorder: A randomized controlled trial. *JAMA*, *287*, 1807ñ1814. Retrieved July 7, 2002, from http://www.jama.org/articles.html

Journal article, retrieved from a database:

Hypericum Depression Trial Study Group. (2002). Effect of *Hypericum perforatum* (St John's Wort) in major **depressive disorder: A randomized controlled trial. JAMA, 287, 1807ñ1814. Retrieved** July 7, 2002, from MEDSYS database.

Online only journal (paged by issue):

Letter to the editor:

O'Neill, G. W. (1992, January). In support of DSM-III [Letter to the editor]. *APA Monitor*, 4-5.

Magazine article:

Gardner, H. (1991, December). Do babies sing a universal song? *Psychology Today*, 70-76.

Newsletter/newspaper articles:

Brown, L. S. (1993, Spring). My research with orangs. *The Psychology Department Newsletter*, *3*, 2.

Goleman, D. (1991, October 24). Battle of insurers vs. therapists: Cost control pitted against proper care. *New York Times*, pp. D1, D9.

Markoff, J. (1996, June 5). Voluntary rules proposed to help insure privacy for Internet users. *New York Times.* Retrieved April 1, 1996, from http://www.nytimes.com/library/cyber/week/yo5dat.html

The date is given as it appears on the publication. For anonymous newspaper articles, see the previous section on "Anonymous or unknown authors."

Pamphlet:

Just Say No Foundation. (1992). *Saving our youth.* (9th ed.) [Brochure]. Washington, DC: Author.

Web page:

Dewey, R. A. (2002). *Psych Web by Russ Dewey.* Retrieved January 25, 2003 from http://www.psywww.com/

Audio Visual Equipment Borrowing Guidelines Audiovisual Resources

Both students and Faculty may borrow videos and/or video equipment from the IMS Audiovisual Section. Please refer to the IMS section for further details.

Faculty and students may also borrow videos and CD-ROMS from various libraries and/or other departments at McGill University, such as the Health Science Library, School of Nursing, School of Social Work, and hospitals affiliated with McGill.

The School maintains a collection of clinically produced videotapes with case studies from a broad range of pediatric and adult neurology, assessments in progress, as well as historic neurological treatment approaches. Lecturers contribute new materials as they are developed and can draw from pre-existing tapes for illustrative purposes.

In addition, the School maintains a small basic science and professional video and CD-ROM collection that is available for Faculty and/or students to use in class to support various learning objectives or to borrow for review purposes. The School has state-of- the-art audiovisual equipment in each of the main classrooms and a small number of video cameras, etc. for faculty to borrow.

Access to the Audio-Visual Equipment

McGill has recently upgraded a substantial number of classrooms and lecture halls with new seating and media packages. At the School of Physical & Occupational Therapy, 7 of our classrooms (Hosmer 101, 102, 202, 301, Coach House gymnasium, Davis 3 and 20) have been equipped as follows: podium, built-in PC with CD capacity and USB extension port, monitor, laptop capacity, LAN connectivity, DVD-VCR player and data projector. Hosmer 102 also has a microphone, amplifier and speakers. Standard slide projectors are being phased out across campus. Our remaining slide projectors are found in Hosmer 102 and Davis 3. Overhead projectors are still available in all classrooms. Portable LCD

projectors from IMS must be reserved from IMS far in advance by emailing Alan Hammaker: alan.hammaker@mcgill.ca.

All amphitheatres in McIntyre Medical Building, which are commonly used by the School, have similar state-of-the-art lecture hall equipment and public address systems. Where overhead projectors have been removed, document cameras have replaced them.

Furthermore, wireless internet connection is available at various areas within McGill University. Hosmer and Davis Houses have full wireless coverage, but not the Hosmer Coach House (Annex).

Audio visual equipment available by reservations only

- video cameras
- VCRs and television monitors
- 16-mm film projectors (for in-School use)
- audio cassette recorders
- slide projectors (for unequipped rooms)
- overhead projectors (for lab meetings, etc.)
- laser pointers

To reserve equipment and materials please see or email Mr. Alan Hammaker, the Chief Technician in Hosmer House, Room 100, who will help you locate the suitable materials and will ask you to fill out a loan card. Loans to students are based on an honour system: ID cards are not required.

You may view audiovisual material on the 4th floor of the Health Sciences Library in the McIntyre Medical Sciences Building, and by special arrangement in Hosmer and Davis Houses if School equipment and rooms are available.

Rules and Regulations

All audiovisual material to be borrowed <u>MUST BE SIGNED IN AND OUT</u>. A yellow loan card for this purpose is available in Hosmer House, Room 100.

- Instruction sheets and pamphlets are available for all items of equipment. STUDENTS MUST LEARN THE CORRECT METHOD OF OPERATION OF ALL EQUIPMENT BEFORE USE. If you are having problems operating the equipment, please contact your course coordinator. If the equipment is not functioning properly, please contact Mr. Alan Hammaker in Hosmer House, Room 100 (398-4516 or alan.hammaker@mcgill.ca) immediately.
- 2. Immediately after viewing, all audiovisual materials must be returned to Hosmer House, Room 100.
- 3. Any equipment in need of repair should be reported to Mr. Alan Hammaker immediately.

Catalogues:

A small selection of videotape and film catalogues is available in Hosmer House. See Mr. Hammaker in Hosmer room 100.

McGill Libraries

The Life Sciences Library is administered as 1 of 16 libraries comprising the McGill Libraries system. The Library holds 3.5 million volumes.

Since 2000, McGill has used the Unix-based Aleph online library catalogue system from Ex Libris to operate MUSE, the Library catalogue. McGill maintains high standards in its Technical Services department, ensuring that materials are catalogued so users can readily locate them.

Life Sciences Library

The Life Sciences Library occupies the 3rd and half of the 4th floor of the McIntyre Medical Sciences Building. When on campus, students in the School of Physical and Occupational Therapy are in immediate proximity, with Davis House just across Promenade-Sir-William-Osler.

The Life Sciences Library participates in a consortium of McGill-affiliated teaching hospitals. This consortium ensures that students in clinical training have access to good onsite libraries and to McGill's electronic resources.

A wing of the Life Sciences Library houses the Osler Library, the major history of medicine library in Canada and recognized internationally as the source of information on Sir William Osler. The Osler Library is a humanities library within a scientific library. It encourages students and faculty to take a different perspective and draws users from across the Faculty of Medicine as well as from other faculties.

McGill was the first library in Canada, in 1973, to search the MEDLINE database and continues to provide innovative services to the McGill community. In the early 90s, McGill became the Internet service provider to affiliated teaching hospitals, giving students, clinical faculty and researchers immediate access to databases licensed by the Library. Access has changed rapidly from print to electronic. At the end of 2001, 1,000 journals were available electronically; at the end of 2002, 2,800. These journals, as well as books and patient handouts in electronic form licensed by the Library and practice guidelines linked through the Library's web page, are available on campus and in teaching hospitals. The Library devotes significant attention to its web site (http://www.health.library.mcgill.ca) and it is heavily used. The site organizes the changing myriad of resources purchased with those available specific Occupational for free. page to Therapy (http://www.health.library.mcgill.ca/resource/ot.htm; last updated April 2003) is maintained using specified criteria for link inclusion. A training programme ensures that faculty and students are aware of the resources available and have the skills to use them effectively. Students and faculty regularly consult Library staff for help with more complicated literature searches and generally to expedite use of the Library and its changing array of resources.

Access

The Library is open through the day Monday to Friday and evenings and weekends throughout the School term.

Access to Library resources is available via all computers connected to the McGill Internet backbone and through dial-in and high-speed accounts. The Library catalogue is accessible through MUSE, a web-based online public access catalogue. Information and links relevant to the health sciences community are organized via the Health Sciences Library web site. McGill has been the Internet service provider for affiliated teaching hospitals for a decade. As a consequence, all teaching hospitals are on the McGill Internet backbone and all electronic resources licensed for access for McGill are available in all these hospitals. Occupational Therapy students have access to Library resources from clinical settings, with the access from teaching hospitals more immediate than that offered to students in other institutions almost without exception in the US and Canada.

The Life Sciences Library has been amongst the first in Canada to offer links to full text articles directly from databases, for example, MEDLINE via PubMed and the variety available via the OVID interface, used for literature searching. Increasingly, links to electronic full text are provided in the Library's online catalogue.

As well as computer access dedicated to physical and Occupational Therapy students in the Herbert Black Unit, the Library offers 36 workstations, with 20 in a bank linked to a black and white printer, a colour printer, and a scanner and including some with CD-ROM read-write and Microsoft productivity software.

Services

During regular working hours Monday to Friday, Library staff, including professional librarians and a computer technician, provides assistance. Librarians in training from the McGill Graduate School of Library and Information Studies provide assistance evenings and weekend, with more difficult questions referred to regular staff. Assistance via telephone, electronic mail, and via web request forms is also available, but is not heavily used.

The life Sciences Library emphasizes training, offering classes as the part of the Faculty of Medicine teaching curriculum, on request for customized versions, and regularly in the Library. The major responsibility of 2 professional staff positions is teaching and training for information literacy. In 2002-2003, 9 classes – lectures, demonstrations, and hands-on workshops - were given to faculty and students in the School. Classes ranged in size from 3 to 120, with a total of 308 attendees. A computer training room funded by the Faculty of Medicine was opened in May 2003. It has 23 stations for hands-on workshops. Classes given in past years in other computer labs across campus will now be given in the Library.

Library staff via interlibrary loan obtains items not held by McGill Libraries for students and faculty at no charge. The CISTI Source service allows graduate students and faculty to request items from the Canada Institute for Scientific and Technical Information directly. Collections

As of May 2003, the Life Sciences Library held on all subjects:

Print Monographs	88,865 titles
Electronic Monographs	206 titles
Microform Monographs	930 titles
Print Serials	subscriptions to 992 titles
Electronic Serials	subscriptions to 2,770 titles
Microform Serials	2,389 items
Audiocassettes	24 items
Videotapes	5,876 items

A search of the McGill catalogues for all types of materials using keywords "Occupational Therapy" locates 555 items. In the National Library of Medicine call number for Occupational Therapy (WB555), the Health Sciences Library has 120 texts on the shelves.

The following are a few of the pertinent journals available:

Canadian Journal of Occupational Therapy

American Journal of Occupational Therapy

British Journal of Occupational Therapy

Physiotherapy Canada

Physical Therapy (Journal of the American Association)

Journal of Hand Therapy

Journal of Orthopaedic and Sports Physical Therapy

American Journal of Physical Medicine

Rheumatology and Rehabilitation

Developmental Medicine and Child Neurology

Orthotics and Prosthetics

Scandinavian Journal of Rehabilitation Medicine

International Journal of Rehabilitation Research

- a) <u>Journal Stack Sections</u> Journals are placed in the STACK SECTION corresponding to the TITLE of the journal, e.g. AJOT was the title for the American Journal of Occupational Therapy for the years 1978/79, therefore look under AJOT. Prior to and following these dates, the title was changed to 'American Journal of Occupational Therapy'; therefore it is now necessary to look under American Journal of Occupational Therapy.
- b) <u>The Subject Micro Catalogue System</u> gives information about journals relevant to Occupational Therapy and Physical Therapy. Look up ... 'Occupational Therapy' or 'Physical Therapy'.
- c) <u>Index Medicus and Excerpta Medica</u> will assist in providing relevant reference material and are invaluable when writing term papers.
- d) Journals published prior to 1961 are on the 2nd floor of the McIntyre Medical Sciences Library; those published in 1961 and after are on the 3rd floor.

McGill offers access to all major databases including MEDLINE, CINAHL, and PsycInfo but excluding Excerpta Medica. Links to databases particularly relevant to Occupational Therapy are included in the Library's web page for this discipline.

Occupational Therapy Assessment Library

The Occupational Therapy Assessment Library is a learning resource of the Occupational Therapy Program. The goal of the Occupational Therapy Assessment Library is to provide Occupational Therapy students and faculty with resource materials (primarily clinical assessments) for course related purposes. It is also a resource that is made available to the clinical community and students and Faculty in Physical Therapy.

Library Operation

The library is located in Hosmer House, Room 13. An updated library timetable is posted on the door of Hosmer House, Room 13. All materials must be borrowed and returned directly to the library during library hours. In exceptional circumstances, special arrangements for borrowing or returning materials outside of library operating hours can be made by contacting the librarian at (514) 398-2048.

Library Holdings

A complete inventory list is kept at the library and is available for perusal.

Lending Procedures

The borrowing of assessments that are required for Occupational Therapy courses is restricted to the instructor and students registered for that course during the term when the course is offered. In the pre-examination period these may be restricted to use within Hosmer House room 13.

Students must return the items promptly and in the same condition as when borrowed. Most items have a two week loan policy but may be recalled if other students are waiting for the materials. It is the student's responsibility to report any lost, stolen or damaged

items immediately. Students will be responsible for the replacement cost of missing or damaged materials that were not previously reported.

Students must show their McGill ID at the time of the loan transaction and fill in a loan card with contact information.

Undergraduate and Graduate Computer Laboratory

Laboratory Location

This computer laboratory of twelve stations is for the exclusive use of the Physical and Occupational Therapy students and is located on the second floor, Room 201D and 201E (situated to the left and right of rooms 235 and 234) of the McIntyre Medical Sciences Building, 3655 Promenade Sir-William-Osler.

Hours of Operation

The laboratory is open 24 hours a day.

Access

All Physical and Occupational Therapy students will have their own NT account instead of logging on with the general student account. The student's user name will have the structure of the first 5 letters of their last name and the last two digits of his/her graduating year, example: John Smith, Graduating Year 2000, would have a user name of Smith00. If there are two or more Smith family names, then the user name would be Smith001, Smith002. Students who have a last name shorter than 5 letters will have their full last name. The initial password will be the student's ID number which is located below his/her name on his/her ID card. It usually takes the form of 9XXXXXXX.

The default client that has been chosen is Outlook Express. Email accounts have also been created for you. The user name is the same as your NT user name (see example above). Email will only have to be set up once; these settings will then be retained on the server after you logoff. This means that when you logoff and come in the next day, the email setup will be downloaded from the server.

In order to change your password, follow the instructions given at the website: https://www.medcor.mcgill.ca/management/cyrusaccpasswd.html. In order to set up Outlook Express, follow the instructions from website http://www.medcor.mcgill.ca/email/outlook_setup.htm.

Students also have space on the NT server where they may save files. By default, when you choose save from word, it will take you to your folder on the server. From Explorer you can see that there is a mapped drive with the letter K; this contains all the folders on the server for your class year. You will see all the folders for your class year but you will only have access to your own folder. This data will be backed up every night. All data on the local PC is not backed up. There is also a 35 MB Quota set per user. If you surpass this quota you will not be able to save anymore and you must perform some cleanup.

In order for other students to use the computer, you must logoff. To logoff, you click on start and select Log Off. If you do not logoff, your account is left open and may be used by the next student. This means that they can read your email or any files that you have saved on the server. All accounts will be automatically logged off after 30 minutes of inactivity; all open files will be closed but not saved. In order to change your NT password, you must logon and then press Ctrl + Alt + Delete and then click on the Change Password Button. Any comments or questions should be directed by email to pravin.mistry@mcgill.ca

Hosmer 301

A computer is equipped with CD-ROMs of clinical demonstrations for students' independent study. This may be used at any time during building hours when there is not a class in session.

II. B.SC. OCCUPATIONAL THERAPY NON-PRACTICING U1

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III. B.Sc. OCCUPATIONAL THERAPY NON-PRACTICING

OVERALL COURSE STRUCTURE

Important Dates B.Sc. Occupational Therapy Non-Practicing U1

PROFESSIONAL COURSE DESCRIPTIONS

COMBINED PHYSICAL & OCCUPATIONAL THERAPY COURSES

OCC1 245 OCCUPATIONAL THERAPY SEMINARS

POTH 250 HEALTH CARE DELIVERY

B.Sc. OCCUPATIONAL THERAPY NON-PRACTICING U1 IMPORTANT DATES

FALL TERM: Registration Period Aug. 2 to Sept. 4, 2007

Orientation Sept. 4, 2007 Lectures Begin Sept. 4, 2007 Labour Day Sept. 3, 2007

Course Change (drop/add period) Aug. 2 to Sept. 18, 2007

Thanksgiving Day

Last Day of Lectures

Examination Period

Dec. 4, 2007

Dec. 6 to 21, 2007

MERCURY Evaluation Period

Nov. 15 to Dec. 5, 2007

WINTER TERM: Lectures Begin January 3, 2008

Course Change (drop/add period) Aug. 2, 2007 to Jan. 15, 2008

Midterm Break - three days

Feb. 24 to March 1, 2008

March 21 to March 24, 2008

Easter March 21 to M Last Day of Lectures April 11, 2008

Examination Period April 14 to 30, 2008

MERCURY Evaluation Period Mar. 25 to April 13, 2008

OCC1 245 OCCUPATIONAL THERAPY SEMINARS

Credits: 3

Course Coordinators:

OT SECTION:

Heather Lambert, BSc, PhD, erg. <u>Heather.lambert@mcgill.ca</u> 514-398-4400 x 09021

Cynthia Perlman (starting October 15)

Cynthia.perlman@mcgill.ca

514-398-5593

PT SECTION:

Liliane Asseraf-Pasin, BSc (PT), PhD candidate,

Liliane.asseraf-pasin@mcgill.ca

514-398-5594

Office hours by appointment. Please call or email ahead.

Course Description:

Introduction to Occupational Therapy and Physical Therapy through interactive seminars.

Expanded Course Description:

Students will be introduced to occupational therapy and physical therapy through interactive seminars. Occupational therapists and physical therapists from diverse clinical fields and areas of research will present their contribution to promoting the health and well-being of individuals across the life span, from preterm infants to geriatrics in both physical medicine, and mental health.

Course Structure:

The course entails 3 hours per week, Monday 1-4 p.m. This may be a 3 hour lecture, site visit, practical session, or a seminar by guest speakers with a formal lecture and/or small group work. OT and PT students may be separate or joined together into one class.

Overall Objective:

By the end of this course, the student will a) understand the role of the occupational therapist and physical therapist, independently and as a member of the health care team; b) understand some of the domains where therapists work; c) have experience in attending and engaging in professional seminars.

Learning Outcomes:

Through the presence of role models, the student will gain a broader understanding and appreciation of:

- Occupational therapy and physical therapy principles and practice
- Ethical implications in occupational therapy and physical therapy
- The importance of health promotion and wellness
- Professional accountability

Upon completion of the course, the student will demonstrate knowledge of:

- Major domains in which OTs and PTs work as clinicians or researchers
- The role of the OT and PT within the Quebec health care system
- Specific perspectives of the OT and PT in patient care, including interprofessional practice and client and family-centered care and the emphasis on occupational performance and rehabilitation
- Common ethical, personal, and professional issues that arise in occupational therapy and physical therapy practice

Furthermore, the student will demonstrate adequate competency in:

- Collaborative communication with colleagues through small group work
- Active participation in seminars
- Identifying, summarizing and communicating new knowledge
- Understanding and respecting others' values and beliefs

Course Content:

Through seminars and group work, students will be introduced to the role of occupational therapists and physical therapists in the Quebec health care system. Occupational therapists and physical therapists from various fields and persons who have received OT and PT interventions will be invited to be present.

Students will be exposed to various learning techniques used to prepare active participation in a seminar. These techniques will address issues pertaining to a) preparation prior to attendance, b) active listening during the seminar, c) asking pertinent and clear questions immediately following the seminar, d) identifying new knowledge obtained through the seminar, and e) applying new knowledge.

Students will also be exposed to aspects of professionalism and professional practice in occupational and physical therapy including a) teaching and learning strategies, b) professional issues, c) professionalism and ethics, d) interviewing, e) the International Classification of Function (ICF).

Course Outline:

A. Professional Roles and Identity

B. ICF: Basic Framework for Practice

C. Learning Styles and Professional Practice

Learning Styles

Self Directed Learning

D. Professional Skills

Active Listening

Writing Objectives

Verbal and Non-verbal Communication

Cultural Awareness

E. Fields of Occupational Therapy Practice and Team Practice

General mental health

Substance Abuse

General neurology

Acute pediatrics

Pediatric feeding disorders

Pediatric private practice

Geriatric mental health

Burns

Neonatal Intensive Care

Palliative Care

Positioning

Driving evaluation

Hippotherapy

Adapted sailing

F. Perspectives on Professional Evolution: 40 years of OT

G. Occupational Therapy on the International Stage

Course Materials:

Required readings:

No required text. Readings for issues addressed by guest speakers to be assigned by the guest. Additional readings TBD.

Evaluation:

Description	Marks	Due Date
Two written questions following lectures on	15	Sept 24
Reflective Practice on Sept. 10 and 17		
Case summary and reflection following lab at	30	Nov 12
Medical Simulation Centre (Oct 29)		
Six written questions (2 for each of three	15	Nov 28
guest/faculty members) following Oct 15 th , Nov 5 th		
and/or Nov 26 th panel presentations		

Journal entries reflecting on site visits	10	Dec 3
Term paper comparing the roles of OT /PT at 2	30	Dec 10
different settings		

^{**} Please note that all written assignments will be graded on clarity of written language including spelling, grammar, and professionalism EXCEPT for the first assignment. The proportion of the mark attributed to clarity will not be less than 5% and may be more depending on the nature of the assignment.

Marking criteria

1. Written questions on Reflective Practice Modules 1 and 2 (15% of total)

Independent work

Students are to write 2 questions that they could have asked during the lectures of September 10 and 17. Questions are to be submitted on WebCT. Questions will be read and marked for thoughtfulness and relationship to lecture material.

2. Case summary (30% of total)

Group work

Each team of one PT and one OT student (to be assigned by the instructors) will select one of the cases that were covered at the Simulation Centre on October 29. The students will write a short summary of the interaction between the student therapists and the simulated patient. This does not have to be the patient that the team interacted with. The case summary <u>must not exceed 5 pages</u> and must follow the APA style.

Description of case and/or problem	3 points
Description of what was done in interview	4
Description of what was easy	5
Description of what was difficult	5
Description of what you would do differently	6
Writing clarity	5
References, APA style	2

3. Written Questions (15% of total)

Independent work

Students are to independently write 2 questions for any three of the speakers (6 questions total) who presented on Oct 15th, November 5th Faculty panel and /or Nov 26th lecture. Questions are to be submitted on WebCT. They will be read and marked for clarity, writing quality, thoughtfulness and relationship to lecture material.

4. Journal Entries (10% of total)

Independent work

Students are to independently write a journal entry for each of the site visits. Journals are to be submitted on WebCT and <u>must not exceed **250 words**</u> in length. In the journal entry, students are expected to briefly describe and reflect on what they observed at

each site visit and in what way this observation will influence their future practice. Journals will be read and marked for thoughtfulness, clarity, and writing style.

5. Term Paper (30% of total)

Group work

Each group of two OT or two PT students will complete a term paper of <u>not more than</u> **10 pages** comparing the role of OT or PT at two different settings. The settings may reflect settings that were presented in class, or if the students wish they may elect to discuss other settings. Use of reference material (articles, text books, web sites, personal communication) is expected and must be correctly referenced.

Description of role of OT / PT at first setting	3 points
Description of role of OT / PT at second setting	3
Identification of likenesses	6
Identification of dissimilarities	6
Personal opinion / reflection	5
Writing clarity and style	5
References, APA style	2

Special Requirements for Course Completion and Program Continuation:

This course falls under the regulation concerning individual and group evaluation. Please refer to the section on marks in the Course Guides pages 15-16.

Plagiarism/Academic Integrity: McGill University values academic integrity. Therefore, all students must understand the meaning of consequences of cheating, plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures (see www.mcgill.ca/integrity for more information).

Dress Code: Professionalism with respect to dressing is encouraged throughout the course of the semester. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

Attendance: Attendance at all classes is mandatory. Prior permission or a note signed by a physician is required if a student will be missing part or all of a class. Missing more than 10% of class time may constitute failure, at the discretion of the course coordinator.

Right to write in (English or in) French: "Every Student has a right to write essays, examinations and theses in English or in French except in courses where knowledge of a language is one of the objectives of the course."

Consequences of not completing assignments as requested: Late submissions will be penalized 5% per day, including weekends. Papers must be submitted before 5 p.m. on the due date.

Disability: "If you have a disability please contact the instructor to arrange a time to discuss your situation. It would be helpful if you contact the Office for Students with Disabilities at 398-6009 before you do this."

POTH 250 HEALTH CARE DELIVERY

Credits: 3

Prerequisites: None

Instructors: Liliane Asseraf-Pasin, PT, PhD Candidate (Co-Coordinator)

Susanne Mak, OT, M.Sc. (Co-Coordinator)

Access to the Instructor:

Liliane Asseraf-Pasin, Davis D7 Tel: (514) 398-5594

Email: liliane.asseraf.pasin@mcgill.ca

Susanne Mak, Davis D34A Tel: (514) 398-2772

Email: susanne.mak@mcgill.ca

Course Objective: Delivery of health care services in rehabilitation at local and global levels is influenced by social, educational, cultural, economic, legislative and demographic factors, as well as ethical regulations and standards of quality practice. Beginning foundational knowledge, skill development and examination related to responsibilities required for varied professional roles (such as: promoting the profession and promoting change within client and family-centered care models) are necessary for expanding OT & PT practice.

Course Structure: This course will incorporate three (3) hours a week of lectures/ seminars and panel presentations for thirteen (13) weeks. It is the second of four professional development courses, of which the fourth is an elective course. This course is offered in U1 winter term.

Purpose: Effective delivery of rehabilitation services requires that the entry level practitioner recognizes and responds to the influence of social, cultural, economic, legislative and demographic factors impacting on health and rehabilitation service delivery, both locally and globally.

Learning Objectives:

The student will:

- Understand:
 - The importance of self-directed learning in evolving professional growth and practice;
 - The definitions of the world health environment according to the World Health Organization and how these concepts are classified according to the International Classification of Functioning, Disability and Health;
 - The structure of the Canadian and Quebec health care systems, its policies, legislations and funding mechanisms;

- The various legal and ethical considerations with regards to professional practice;
- The role of interprofessional education and practice in relation to our own professional practice
- Be able to access, interpret and use data and information acquired from a variety of sources for evidence-based practice and research;
- Learn to write references using APA Style;
- Optimize benefits for clients by judicious use of knowledge of policy, legislation and funding sources;
- Be sensitive to the impact of public policy (present and future) on rehabilitation services:
- Be able to advocate change utilizing strategies to influence public policy;
- Keep abreast of and be able to adapt to changing and developing information systems as they relate to health care policy, systems and delivery;
- Interpret and manage clinical issues with a broad understanding of the determinants of health as well as of health promotion and wellness models

Description of Lectures:

Lecture 1:

- (Readings 1 & 2, Liliane Asseraf-Pasin and Susanne Mak)
 - o Presentation of Course Outline and Objectives/ Evaluation Methods
 - o Discussion of concepts of lifelong and self-directed learning and evidence-based practice.
- Introduction to Information Systems (Lorie Kloda)

Lecture 2: (Reading #3, Susanne Mak)

- World Health Environment International health definitions and parameters including:
 - Social, physical, cultural and spiritual context of health
 - World Health Organization (WHO) definition of health
 - The ICF Model International Classification of Functioning, Disability and Health and its components (Adriana Venturini TBC)

Lecture 3: (Liliane Asseraf-Pasin & Susanne Mak)

- Canadian and Quebec Health Care Systems, Health and Social Service Legislation/ Policy including:
 - o Canada Health Act
- Relevant health and social service organizations which influence and/or assist the delivery of health and social services (CSSS, RUIS)

Lecture 4: (Jacques Hendlisz)

- Determinants of Health
 - Population/community health indicators and measurements used globally, health status and risk status factors
 - Principles and methods of disease prevention and health promotion from a global perspective

Lecture 5: (Liliane Asseraf-Pasin)

- Relevant federal/provincial legislation
 - o Bill 90
 - Provincial licensing regulations re: CAOT & Alliance Exam, domain of practice & institutions; differentiation between mandates of the Professional Orders, Professional Associations and Unions.
 - Discussion of the Professional Code (roles of the Syndic, professional inspection, l'Office des professions du Quebec and other health care governing bodies s/a Conseil Interprofessionnel du Quebec etc).
 - The regulatory bodies (OEQ & OPPQ)
 - Differentiation between the exclusive right of practice and the reserved right of practice and description of the impact of autonomous practice on the Physical Therapy and the Occupational Therapy professions;

Lecture 6: Separate groups for OT/PT (Liliane Asseraf-Pasin, Susanne Mak and Mr. Jacques Gauthier)

Code of Ethics (Guests from OEQ & OPPQ)

Lecture 7: Midterm Exam & Question Period

Lecture 8: (Panel of Guests Lecturers including a Social Worker)

- Public funding mechanisms) which will support health and social service needs, goals and/or research for individuals and groups
- Panel of experts: SAAQ & CSST RAMQ- Medicare, Indemnification of Victims of Criminal Acts (IVAC), Welfare, Veterans Affairs
- Examples of private funding mechanisms (Shriners)

Lecture 9: (Liliane Asseraf-Pasin, Susanne Mak & Heather Lambert TBC - Casebased)

 Charting Legislation & Consent to treatment, Power of attorney as applied to persons
 with
 disabilities

Lecture 10: (Liliane Asseraf-Pasin, Susanne Mak - Case Based & Video from SAAQ)

• Ethics and Professionalism

Lecture 11: (Liliane Asseraf-Pasin, Susanne Mak & Camelia Birlean - Case -based) Communication Sciences & Disorders Guest TBC

• Inter-professional Education and Practice: identify what is Uniprofessional, Multiprofessional and Interprofessional Practice.

Lecture 12: (Sarah Ahmed, Suzanne Bartlett, Deborah Da Costa TBC)

• Health Promotion and Wellness models; ways and means of influencing public policies.

Lecture 13: To be announced

Course Materials: Course materials will be posted weekly on WebCT.

Student Assignment and Evaluation: Topics covered in this course form a framework for professional practice. The application of this material will continue to be evaluated in further professional courses given over the next three (3) years and in professional practice.

1 Group Project	35 %
1 Midterm	30 %
1 Final Exam	35 %

Required texts:

The Professional Code, Éditeur officielle du Québec.

<u>Bill 120, An Act Respecting Health Services and Social Services and Amending Various Legislation,</u> Assented to 4 September 1991, Quebec Official Publisher (1991).

Course pack: Readings

Recommended texts:

Purtillo, R., & Haddad, A. (2002). *Health Professional and Patient Interaction* (6th ed.). Philadelphia: W. B. Saunders Compa

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

Parsons & Parsons. *Health Care Ethics*. Wall & Emerson Inc.

Williams & Wilkins (1997). <u>Stedman's Concise Medical Dictionary for the Health Professional</u>, (3rd edition).

Reference texts:

Rachlis, M. & Kushner, C. (1994). <u>Strong Medicine</u>. Harper Perennial, Harper Collins Publishers Ltd.

Special Requirements for Course Completion and Program Continuation:

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