



**McGill**

**SCHOOL OF PHYSICAL AND OCCUPATIONAL THERAPY**



**COURSE GUIDE 2005-2006**

**B.Sc. OCCUPATIONAL THERAPY PROGRAM**

**U1 - U2 - U3**

**Welcome to the School of Physical and Occupational Therapy  
for the 2005-2006 Session**

You have been accepted into a challenging and exciting 105 credits seven-semester Program over three years leading to a

***B.Sc. Occupational Therapy***  
**or**  
***B.Sc. Physical Therapy***

**Year I                      2005-2006**

- Fall 2005 Semester (13 weeks beginning September 1, 2005)
- Winter 2006 Semester (21 weeks starting January 3, 2006 and ending May 19, 2006) 9-week academic block, 6-week clinical block and 3-week academic block).

**Year II                      2006-2007**

- Fall 2006 Semester (13 weeks);
- Winter 2007 Semester (13 weeks); and
- Summer 2007 Semester (12 weeks).

**Year III                      2007-2008**

- Fall 2007 Semester (9-week academic block, 5-week clinical block); and
- Winter 2008 Semester (5-week clinical block, 8 week academic block).

**This curriculum has been designed to prepare the rehabilitation professional for the Year 2005 and beyond.**

These two professional undergraduate Programs at McGill are designed to prepare a student to begin a career in clinical practice and/or enter graduate studies in Rehabilitation Science or a related discipline.

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. Similarly, those who proceed to graduate studies will also need to independently pursue knowledge.

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 graduate clinical practitioners who can independently evaluate a client across his/her lifespan, make judgments about client needs, plan and execute interventions, assess the effects of intervention and generally facilitate the health of individuals or populations.

These practitioners will make their contributions through clinical practice across diverse settings, clinical education, administration and the application of new knowledge related to rehabilitation as well as its creation through team research.

After completion of either of the 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 five Sections

I. Rules and Regulations for Student Evaluation and Promotion

II. Important Information for Students to Know

This section has been further organized by administrative policies followed by reference information.

III. B.Sc. Occupational Therapy U1 Curriculum

IV. B.Sc. Occupational Therapy U2 Curriculum

V. B.Sc. Occupational Therapy U3 Curriculum

The purpose of this guide is to give the student an appreciation of the scope and orientation of the professional courses in the Occupational Therapy Program. The guide should be read **carefully** before each course commences. The required texts should be bought in advance of the course and all pertinent information concerning procedure, type of classes, dress required, examination procedure, etc., should be noted.

## **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,
3. 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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<b>Table 1: Services/ Support to Students with Contact information</b>	
<b>Service or Support</b>	<b>Contact Person and contact information</b>
Within the School of Physical and Occupational Therapy	
<ul style="list-style-type: none"> <li>• Registration</li> <li>• Course changes/add/drop</li> <li>• Intra university transfer</li> <li>• Credit exemption</li> <li>• Supplemental deferrals</li> <li>• Exam conflicts</li> </ul>	Ms. Marlene Brettler Davis House Room D5 Tel: (514) 398-4500 Fax:(514) 398-6360 e-mail <a href="mailto:marlene.brettler@mcgill.ca">marlene.brettler@mcgill.ca</a>
<ul style="list-style-type: none"> <li>• C.P.R. certification</li> <li>• PDSB Course</li> <li>• Clinical placement supervision information</li> <li>• Immunization</li> <li>• Appointments with the ACCE</li> </ul>	Ms. Croce Riggi Davis House Room D4/D18 Tel: (514) 398-1293/6561 Fax: (514) 398-6360 e-mail: <a href="mailto:croce.filteau@mcgill.ca">croce.filteau@mcgill.ca</a> e-mail: <a href="mailto:caroline.storr@mcgill.ca">caroline.storr@mcgill.ca</a>
<ul style="list-style-type: none"> <li>• Audiovisual equipment lending or arrangements</li> <li>• Learning aids e.g. CD's, skeletal material, Videos</li> <li>• Room booking (non academic) e.g. student meetings, variety show rehearsal, etc.</li> </ul>	Mr. Alan Hammaker Hosmer House Room H11 Tel:(514) 398-4516 Fax:(514)398-8193 e-mail: <a href="mailto:alan.hammaker@mcgill.ca">alan.hammaker@mcgill.ca</a>
<ul style="list-style-type: none"> <li>• Support to sessional lecturers/faculty</li> <li>• Co-ordination for course evaluations</li> <li>• Purchase of course packs</li> <li>• Access to (key for) coach house</li> <li>• Lost and found</li> </ul>	Ms Irene Bonkowsky Hosmer House Room H100 Tel:(514)398-4517 Fax:(514)398-8193 e-mail: <a href="mailto:irene.bonkowsky@mcgill.ca">irene.bonkowsky@mcgill.ca</a>
<ul style="list-style-type: none"> <li>• Assessment Library</li> </ul>	Mr. Robert Everitt Hosmer House Room H13 Tel: (514) 398-2048 e-mail: <a href="mailto:robert.everitt@sympatico.ca">robert.everitt@sympatico.ca</a>
Within the University	
<b>STUDENT SERVICES -</b> Dean of Students Office <ul style="list-style-type: none"> <li>• Athletics</li> <li>• CAPS Career and Placement Service</li> <li>• Chaplaincy Service</li> <li>• Counseling Service</li> <li>• First Peoples House</li> <li>• First Year Office</li> <li>• Health Services &amp; Dental Clinic</li> <li>• International Student Services</li> <li>• Mental Health Services</li> <li>• Students With Disabilities</li> <li>• Tutorial Service</li> <li>• Student (Financial) Aid Office</li> <li>• Residences &amp; Student Housing</li> <li>• Student Housing (Off campus)</li> <li>• First Year Assistance for Francophone Students</li> </ul>	<a href="http://www2.mcgill.ca/stuserv">www2.mcgill.ca/stuserv</a> Tel 514-398-3825 <ul style="list-style-type: none"> <li>• Tel: 514-398-7000</li> <li>• Tel: 514-398-3304</li> <li>• Tel: 514-398-4104</li> <li>• Tel: 514-398-3601</li> <li>• Tel: 514-398-3217</li> <li>• Tel: 514-398-6913</li> <li>• Tel: 514-398-6017</li> <li>• Tel: 514-398-4349</li> <li>• Tel: 514-398-6019</li> <li>• Tel: 514-398-6009</li> <li>• Tel: 514-398-6011</li> <li>• Tel: 514-398-6013</li> <li>• Tel: 514-398-6368</li> <li>• Tel: 514-398-6010</li> <li>• Tel: 514-398-6913</li> </ul>
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.

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

# POTUS

**Table 3:**

## PHYSICAL AND OCCUPATIONAL THERAPY UNDERGRADUATE SOCIETY 2005-2006

Title	Name	E-mail
Executive Officers:		
President	Barbara Ng	<a href="mailto:barbara.ng@mail.mcgill.ca">barbara.ng@mail.mcgill.ca</a>
VP PT	Sarah Warner	<a href="mailto:sarah.warner@mail.mcgill.ca">sarah.warner@mail.mcgill.ca</a>
VP OT	Julie-Ann Gwilliam	<a href="mailto:julie-ann.gwilliam@mail.mcgill.ca">julie-ann.gwilliam@mail.mcgill.ca</a>
VP Administration	Angela DiGirolamo	<a href="mailto:angela.digirolamo@mail.mcgill.ca">angela.digirolamo@mail.mcgill.ca</a>
VP Finance	Nancy El-Bared	<a href="mailto:nancy.el-bared@mail.mcgill.ca">nancy.el-bared@mail.mcgill.ca</a>
VP External	Robert Luu	<a href="mailto:robert.luu@mail.mcgill.ca">robert.luu@mail.mcgill.ca</a>
VP Internal(Social)	Jennifer Jeudy	<a href="mailto:jennifer.jeudy@mail.mcgill.ca">jennifer.jeudy@mail.mcgill.ca</a>
Representatives:		
PT U3	Maxime Piché Anne-Marie Lambert	<a href="mailto:maxime.piche@mail.mcgill.ca">maxime.piche@mail.mcgill.ca</a> <a href="mailto:anne-marie.lambert@mail.mcgill.ca">anne-marie.lambert@mail.mcgill.ca</a>
OT U3	Laurence Lebeau Marie-Pierre Chaput	<a href="mailto:laurence.lebeau@mail.mcgill.ca">laurence.lebeau@mail.mcgill.ca</a> <a href="mailto:marie-pierre.chaput@mail.mcgill.ca">marie-pierre.chaput@mail.mcgill.ca</a>
PT U2	Chris Mainella Yagil Epstein	<a href="mailto:christopher.mainella@mail.mcgill.ca">christopher.mainella@mail.mcgill.ca</a> <a href="mailto:yagil.epstein@mail.mcgill.ca">yagil.epstein@mail.mcgill.ca</a>
OT U2	Katherine C. Jones Judith DeMonsieur	<a href="mailto:katherine.cabrejo-jones@mcgill.ca">katherine.cabrejo-jones@mcgill.ca</a> <a href="mailto:judith.demonsieur@mail.mcgill.ca">judith.demonsieur@mail.mcgill.ca</a>
PT U1	<b>TBA</b>	
OT U1	<b>TBA</b>	
CAOT/OEQ	Marie-Hélène Labonté Marie Grandisson	<a href="mailto:marie-helene.labonte@mail.mcgill.ca">marie-helene.labonte@mail.mcgill.ca</a> <a href="mailto:marie.grandisson@mail.mcgill.ca">marie.grandisson@mail.mcgill.ca</a>
CPA/OPPQ	Ayse Kuspinar Stéphanie Thibault-Gagnon	<a href="mailto:ayse.kuspinar@mail.mcgill.ca">ayse.kuspinar@mail.mcgill.ca</a> <a href="mailto:stephanie.thibault-gagnon@mail.mcgill.ca">stephanie.thibault-gagnon@mail.mcgill.ca</a>
OT Curriculum	Annie Trépanier	<a href="mailto:annie.trepanier@mail.mcgill.ca">annie.trepanier@mail.mcgill.ca</a>
PT Curriculum	Amanda Farag	<a href="mailto:amanda.farag@mail.mcgill.ca">amanda.farag@mail.mcgill.ca</a>
Athletics	Dan Friedmann	<a href="mailto:dan.friedmann@mail.mcgill.ca">dan.friedmann@mail.mcgill.ca</a>
Fundraising Reps	Sima Saleh Jasmine Pollice	<a href="mailto:sima.saleh@mail.mcgill.ca">sima.saleh@mail.mcgill.ca</a> <a href="mailto:jasmine.pollice@mail.mcgill.ca">jasmine.pollice@mail.mcgill.ca</a>
CLOM (Computer Lab Operations Manager)	<b>TBA</b>	
NTC (Note Taking Club)	<b>TBA</b>	
Grad Committee	Stéphanie Bernard Yasmine Raphaël	<a href="mailto:stephanie.bernard@mail.mcgill.ca">stephanie.bernard@mail.mcgill.ca</a> <a href="mailto:yasmine.rafael@mail.mcgill.ca">yasmine.rafael@mail.mcgill.ca</a>
Frosh Director	Chris Mainella	<a href="mailto:christopher.mainella@mail.mcgill.ca">christopher.mainella@mail.mcgill.ca</a>

# 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 Occupational Therapy and Physical Therapy is to provide the students with the skills, knowledge, attitudes and behaviours required to meet the stringent standards of licensure and to excel in the practice of the profession.

Information outlined in this section supplements the 2005-2006 McGill University Health Sciences Calendar, Section 6.4 Student Evaluation and Promotion, pages 117 to 121 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. Students will be required to remain in the same promotion period because a) they are repeating one or more courses, b) they have deferred courses, or c) they were on an approved absence. These students will be considered to be repeating a promotion period while they complete the course or courses that are outstanding.

### **1. Marks**

An overall final mark of 60% (C+) is required to pass the courses with a designation of POTH, PPTH or OCC1. Similarly, the passing grade on any remedial activity or supplemental examination is 60% 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 C (55%) or better according to the credit system of the host university. The letter grades take precedence over numerical marks.

### **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 an approved absence will not be permitted to write the final examination in the course.

No absences are permitted during any clinical fieldwork affiliation. Any absences for illness or compassionate reasons must be documented at both the site and the School, approved by the Program Director for the absence to be authorized, and the time be made up.

### **3. Student Standing**

A student's overall standing in the Occupational and Physical Therapy Programs will be recorded as Satisfactory, Unsatisfactory or Probationary. Complete regulations and details are available in the 2005-2006 Physical and Occupational Therapy Student CD ROM and on the website: [www.medicine.mcgill.ca/spot](http://www.medicine.mcgill.ca/spot).

#### Satisfactory Status

- a cumulative grade point average (CGPA) of 2.7 or above.

#### Probationary Status

- Failure and/or incomplete in two (2) or more academic courses in an academic year
- A CGPA between 2.3 and 2.7.
- Unprofessional behaviour in class or clinical affiliation. Unprofessional behaviour is defined as: a behaviour that results in disciplinary action being taken against the student for either an academic or a non-academic offence or a breach of any other policy or regulations of the University as contained in the Handbook of Students' Rights and Responsibilities.
- One (1) Failure or two (2) borderline performance evaluations in clinical affiliation.
- Failure in a course which is followed by failure of the supplementary examination.

A Student on Probationary Status 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;
- to complete all clinical affiliations at McGill sites.

A student who is placed on Probationary Status is automatically monitored by the OTPRC/PTPRC. The subsequent course(s) in which the student would be allowed to enrol is/are determined by that body. The OTPRC/PTPRC may require the student to remain on Probationary Status, undertake a remedial activity, or repeat a Promotion Period.

#### Unsatisfactory Status

- Failure of a second clinical affiliation.
- 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.

Unsatisfactory standing will require the student to withdraw from the Program.

#### **4. Promotion Periods**

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. Students required to repeat a promotion period will be placed on “academic leave” until the start of the required promotion period. During a repeated promotion period and while on academic leave, 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 Performance Review Committee.

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 two promotion periods during the professional 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 GPA of between 2.3 and 2.7 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 evaluation will require the student to repeat the course and remain in the promotion period as confirmed by the OTPRC/PTPRC.

There are five (5) clinical education/affiliation courses within the Occupational Therapy three-year professional Program: OCC1 220, OCC1 320, OCC1 321, OCC1 420 and OCC1 422 and five (5) within the Physical Therapy three-year professional Program: PHTH 220, PHTH 320, PHTH 321, PHTH 420 and PHTH 421. Within each Program, clinical affiliation courses must be passed sequentially. Students are not permitted more than one failure in a clinical affiliation throughout the curriculum. A failure in the remedial clinical affiliation or in any subsequent clinical affiliation course will result in the student being required to withdraw from the Program.

In order to be permitted to take a supplemental examination in any Program course, a student must have an overall GPA of at least 2.3 in the promotion period. Students may not take more than seven (7) credits of supplemental examinations in an academic year.

A student with two failures will be required to repeat the promotion period, as confirmed by the OTPRC/PTPRC.

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

**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. Performance Review Committees**

The Performance Review Committees for the respective Programs (i.e. OTPRC, PTPRC) will review the entire record of any student in academic difficulty.

The OTPRC/PTPRC will also review the entire record 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 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.

Students are reminded that, due to the sequential nature of the Program, the failure to successfully complete clinical affiliations within the Promotion Period may lead to delayed graduation due to the delayed completion of the Program requirements (see Clinical Affiliation Guidelines).

Students should be aware that the close sequence of certain Promotion Periods could lead to a last-minute cancellation of a Clinical Affiliation course for students who do not successfully complete the previous Promotion Period. Therefore, students who select distant locations should make travel arrangements that are changeable on short notice. (see Clinical Affiliation Guidelines).

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

Promotion Period 1 - U1	Beginning of September to end of April
Promotion Period 2 - U1	Beginning of May to end of August
Promotion Period 3 - U2	Beginning of September to end of April
Promotion Period 4 - U2	Beginning of May to beginning of September
Promotion Period 5 - U3	Beginning of September to mid December
Promotion Period 6 - U3	Beginning of January to beginning of February
Promotion Period 7 - U3	February (2 <sup>nd</sup> week) to end of April

**1. OCCUPATIONAL THERAPY PROMOTION PERIODS**

**OT PROMOTION PERIOD 1 – U1 Beginning of September to end of April**

The evaluation system for each course will be outlined in detail at the start of the course.

**Students should note** that the evaluation for Section B - Integration Block of OCC1 236 Movement I: Musculoskeletal will be held in Promotion Period 2.

**A formative comprehensive practical examination will be held during the Promotion Period. The formative examination does not count for a grade but students will receive formative feedback. Students who perform below expectations may be counselled as to possible remedial activities.**

**OCC1 236 OT Practice I: Musculoskeletal Conditions** is subdivided into sections. Each section must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a section when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in each section, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake evaluation of the failed section before the next academic year. If the student obtains a grade of C+ (60%) or better in the failed section, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the section, the course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If each section of the course is not passed with a grade of C+(60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both sections or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both section evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**POTH 239 Assessment in Rehabilitation I** is evaluated by both a theoretical and practical exam. Both the theoretical and practical exams must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a theoretical or a practical exam when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in the theoretical and practical exams, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake a second evaluation of the theoretical or practical exam before the next academic year. If the student obtains a grade of C+ (60%) or better in the theoretical and practical exams, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the theoretical and practical exams, the course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If the theoretical and practical exams of the course are not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both the theoretical and practical evaluations or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both theoretical and practical evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If both the theoretical and practical evaluations of the course are not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**Advancement to OCC1 220 Clinical Affiliation 1** is dependent on students successfully passing OCC1 235 Occupation as Therapy with a grade of C+ (60%) or better (see Clinical Affiliation Guidelines).

**OCC1 220 Clinical Affiliation 1** is a PASS or FAIL course. Students who fail OCC1 220 Clinical Affiliation I may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**If a Student fails OCC1 220 Clinical Affiliation 1, permission to complete OCC1 236 OT Practice I: Musculoskeletal Conditions Section B Integration Block must be granted by the Occupational Therapy Performance Review Committee (OTPRC).**

**Students are required** to show proof of a valid, up-to-date CPR certificate course, level C, before the first clinical fieldwork affiliation.

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

### **OT PROMOTION PERIOD 2 – U1 Beginning of May to end of August**

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

### **OT PROMOTION PERIOD 3 – U2 Beginning of September to end of April**

**OCC1 341 Assessment of Performance III** is subdivided into sections. Each section must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a section when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in each section, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake a second evaluation of the failed section before the next academic year. If the student obtains a grade of C+ (60%) or better in the failed section, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the failed section, the final course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both sections or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both section evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**A student must** successfully complete all Program courses in Promotion Period 3 in order to be promoted to Promotion Period 4.

#### **OT PROMOTION PERIOD 4 – U2 Beginning of May to beginning of September**

**OCC1 320 Clinical Affiliation 2** is a PASS or FAIL course. Students who fail OCC1 320 Clinical Affiliation 2 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**OCC1 321 Clinical Affiliation 3** is a PASS or FAIL course. Students who fail OCC1 321 Clinical Affiliation 3 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged within the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students are reminded that**, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to a delay in the completion of the Program.

**A student must** successfully all Program courses in Promotion Period 4 in order to be promoted to Promotion Period 5.



## **OT PROMOTION PERIOD 5 – U3 Beginning of September to mid December**

**OCC1 420 Clinical Affiliation 4** is a PASS or FAIL course. Students who fail OCC1 420 Clinical Affiliation 4 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students should be aware** that the close sequence of Promotions Periods 5 and 6 could lead to a last-minute cancellation of OCC1 420 Clinical Affiliation 4 for students who do not successfully complete Promotion Period 5. Students who select distant locations should make travel arrangements that are changeable on short notice (see Clinical Affiliation Guidelines).

**A student must** successfully complete all Program courses in Promotion Period 5 to be promoted to Promotion Period 6.

## **OT PROMOTION PERIOD 6 – U3 Beginning of January to beginning of February**

**OCC1 422 Clinical Affiliation 5** is a PASS or FAIL course. Students who fail OCC1 422 Clinical Affiliation 5 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students are reminded** that, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to delayed completion of the Program (see Clinical Affiliation Guidelines).

**A student must** successfully complete all Program courses in Promotion Period 6 in order to be promoted to Promotion Period 7.

## **OT PROMOTION PERIOD 7 – U3 February (2<sup>nd</sup> week) to end of April**

**A student must** successfully complete Promotion Period 7 in order to graduate.

## 2. PHYSICAL THERAPY PROMOTION PERIODS

### PT PROMOTION PERIOD 1 – U1 Beginning of September to end of April

The evaluation system for each course will be outlined in detail at the start of the course.

**Students should note** that the evaluation for Section B - Integration Block of PHTH 236 Movement I: Musculoskeletal will be held in Promotion Period 2.

**PHTH 236 Movement 1: Musculoskeletal** is subdivided into sections. In order to pass the course, Section A requires a grade of at least C+ (60%) in both the theoretical and practical components of the evaluation. In addition, a grade of at least C+ (60%) must be obtained in Section B and the total course mark.

If a student obtains a mark of C+(60%) or higher in the total course mark but fails to obtain at least C+ (60%) in a theoretical or a practical exam or a section, the course mark will be withheld from the record. The student may be permitted to take an additional evaluation after undertaking remedial work in that failed component. If the student demonstrates proficiency by obtaining a mark of C+ (60%) or higher in the additional evaluation, the original final course mark will be recorded and the student may be allowed to proceed to Clinical Affiliation 1, PHTH-220. If the student fails to obtain at least C+ (60%) in the additional evaluation, the final course mark will be recorded as F (Failure) and the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both the theoretical and practical exams or a section, the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both theoretical and practical exams or a section. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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". If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**In PHTH 241 Assessment II: Musculoskeletal**, in order to pass the course, a grade of at least C+ (60%) must be obtained in both the theoretical and practical components of the evaluation, as well as in the total course mark.

If a student obtains a mark of C+ (60%) or higher in the total course mark but fails to obtain at least C+ (60%) in a theoretical or practical evaluation component, the course mark will be withheld from the record. The student may be permitted to take an additional evaluation after undertaking remedial work in that failed component. If the student demonstrates proficiency by obtaining a mark of C+ (60%) or higher in the additional evaluation, the original final course mark will be recorded and the student may be allowed to proceed to PHTH 220 Clinical Affiliation 1. If the student fails to obtain at least C+ (60%) in the additional evaluation, the final course mark will be recorded as F (Failure) and the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both the theoretical and practical evaluations, the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both theoretical and practical evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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". If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**Students should be aware** that PHTH 236 Movement 1: Musculoskeletal PHTH 241 Assessment II: Musculoskeletal builds on knowledge from preceding courses including POTH 239 Assessment in Rehabilitation I and PHTH 235 Movement Science and Practice.

**PHTH 220 Clinical Affiliation 1** is a PASS or FAIL course. Students who fail PHTH 220 Clinical Affiliation 1 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students are required** to show proof of a valid, up-to-date CPR certificate course level C before the first clinical fieldwork affiliation.

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

## **PT PROMOTION PERIOD 2 – U1 Beginning of May to end of August**

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

## **PT PROMOTION PERIOD 3 – U2 Beginning of September to end of April**

**In PHTH 328 Biophysical Agents and PHTH 338 Movement IV: Neurological**, in order to pass the course, a grade of at least C+ (60%) must be obtained in both the theoretical and practical components of the evaluation, as well as in the total course mark.

If a student obtains a mark of C+ (60%) or higher in the total course mark but fails to obtain at least C+ (60%) in an individual evaluation component, the course mark will be withheld from the record and the student will not proceed to Clinical Affiliations PHTH 320 and PHTH 321. The student may be permitted to take an additional evaluation after undertaking remedial work in that failed component. If the student demonstrates proficiency by obtaining a mark of C+ (60%) or higher in the additional evaluation, the original course mark will be recorded and the student may be allowed to proceed to Clinical Affiliations PHTH 320 and PHTH 321. If the student fails to obtain at least C+ (60%) in the additional evaluation, the final course mark will be recorded as F (Failure) and the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both the theoretical and practical evaluations, the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both theoretical and practical evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each component of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**A student must** successfully complete all Program courses in Promotion Period 3 in order to be promoted to Promotion Period 4.

## **PT PROMOTION PERIOD 4 – U2 Beginning of May to beginning of September**

**PHTH 320 Clinical Affiliation 2** is a PASS or FAIL course. Students who fail PHTH 320 Clinical Affiliation 2 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**PHTH 321 Clinical Affiliation 3** is a PASS or FAIL course. Students who fail PHTH 321 Clinical Affiliation 3 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students are reminded** that, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to delayed graduation (see Clinical Affiliation Guidelines).

**A student must** successfully complete all Program courses in Promotion Period 4 in order to be promoted to Promotion Period 5.

## **PT PROMOTION PERIOD 5 – U3 Beginning of September to mid December**

**PHTH 420 Clinical Affiliation 4** is a PASS or FAIL course. Students who fail PHTH 420 Clinical Affiliation 4 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students should be aware** that the close sequence of Promotions Periods 5 and 6 could lead to a last-minute cancellation of Clinical Affiliation 4 (PHTH 420) for students who do not successfully complete Promotion Period 5. Students who select distant locations should make travel arrangements that are changeable on short notice (see Clinical Affiliation Guidelines).

**A student must** successfully complete all Program courses in Promotion Period 5 in order to be promoted to Promotion Period 6.

### **PT PROMOTION PERIOD 6 – U3 Beginning of January to beginning of February**

**PHTH 421 Clinical Affiliation 5** is a PASS or FAIL course. Students who fail PHTH 421 Clinical Affiliation 5 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed within the same or subsequent promotion period (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**Students are reminded** that, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to a delay in the completion of the Program.

**A student must** successfully complete all Program courses in Promotion Period 6 in order to be promoted to Promotion Period 7.

### **PT PROMOTIONS PERIOD 7 – U3 February (2<sup>nd</sup> week) to end of April**

**A student must** successfully complete all Program courses in Promotion Period 7 in order to graduate.

## **Examinations**

Information outlined in this section supplements the 2005-2006 McGill University Health Sciences Calendar, Section 6.4.7, pages 119-120.

### **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 an ethical and 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.

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.

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

- notify the P and OT Student Affairs office prior to the exam (circumstances permitting), indicating the reason for absence;
- provide appropriate written documentation to justify the absence.

If the absence is deemed to be justified, the absence will be approved and the student will be allowed to write a deferred exam.

### **2. Examination Regulations & Procedures**

#### **Regulations**

1. Any transmission of examination information between students, either in writing or verbally, is expressly prohibited without prior consent of the Director's office. No one is permitted to make written notes or to record, in any way, the contents of an examination.
2. Students must not procure, use, or attempt to use or distribute any improper or unauthorized materials.

3. Students may not 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 students is forbidden. This includes the use of cell phones and pagers. All communication devices must be deposited with the invigilators prior to the start of the examination.
5. Students 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 student 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 student 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 cannot be considered acceptable excuses.
3. The doors of the examination room will normally be opened at least five minutes before the starting hour. Students will be permitted to enter the examination room up to one-half hour after the scheduled start of the exam, as long as no other student has completed their exam and left the exam room. 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. Students must remain seated. A student 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.

### **3. 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 form with student signature. A student guide to avoid plagiarism is found at: <http://www.mcgill.ca/integrity/studentguide>.

## **Deferred Examinations, Remedials 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. (See Approved Absences above).
- 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 School 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 specific date of the examination.
- Deferred examinations are granted at the discretion of the School. The Faculty may require further corroborative documentation of the reasons for the request(s).

- In general, an examination missed for illness will be written before the end of the Promotion Period.
- Deferred examinations will generally be in the same format as the final examination.

## 2. Remedials

Remedials are activities to be undertaken by a student as required by the Performance 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 evaluation 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.

**In general**, remedial activity or supplemental examinations for students with **FAILURES** for U1 POTH, PHTH, OCC1 courses will take place in June and other courses will follow university schedules. For U2, PHTH, POTH OCC1 courses will take place in May. Other courses will follow university schedules.

## Licensure Examinations

Graduates from McGill may seek licensure around the world. Each country, province or state sets its own requirements for licensure which may necessitate examination, further course work and/or the TOEFL.

Certain provinces in Canada, states of the United States of America, and other countries require that those intending to practice Occupational Therapy or Physical Therapy within their borders comply with special provincial or state licensing regulations. Further information may be obtained from the offices of the associations listed in the School of Physical and Occupational Therapy section, Health Sciences calendar under section 6.3.5 "Professional Organizations".

Graduates seeking licensure in the United States should be aware that recent reforms in licensing and immigration laws have led to new requirements for internationally educated health care professionals entering the country.

In order to practice Occupational Therapy or Physical Therapy in the province of Quebec, a permit must be obtained from the appropriate provincial regulator body. Quebec law also requires that candidates seeking admission to the provincially-recognized Quebec regulatory bodies must possess a working knowledge of the French language, i.e., be able to communicate verbally and in writing in that language. For further information, refer to “Language Requirements for Professions” on page 9 of the Health Sciences calendar.

Occupational Therapists practising in Canada (except Quebec and Manitoba) are required to pass a National Certification Examination after graduation. For information, write to the Canadian Association of Occupational Therapists (see address in School of Physical and Occupational Therapy section, section 6.3.5 of the Health Sciences calendar).

Physical Therapists who wish to practice in provinces in Canada (other than Quebec) are required to pass a Physiotherapy National Examination. For confirmation, write to the Alliance of Physiotherapy Regulatory Boards.

Graduates of McGill’s Occupational Therapy Program are eligible for licensure with the Ordre des ergothérapeutes du Québec (OEQ). Graduates who do not have three years education in a French post-primary school must pass an examination set by the Office de la langue française during the two years which precede admission to the OEQ.

Graduates of McGill’s Physical Therapy Program are eligible for licensure with the Ordre des physiothérapeutes du Québec (OPPQ). Graduates who do not have three years education in a French post-primary school must pass an examination set by the Office de la langue française during the two years which precede admission to the OPPQ.

## **Performance Review Committees**

### **Introduction**

Within the School of Physical and Occupational Therapy, student evaluation, promotion and suitability for the practice of the profession is within the jurisdiction of the Occupational Therapy Performance Review Committee (OTPRC) and the Physical Therapy Performance Review Committee (PTPRC).

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 any student in academic difficulty. In addition, the Committee will review the entire record of any student in the following circumstances: 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 Programs.

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 will require a student to withdraw from the Program who has been found to be academically incompetent or unsuitable for the practice of Occupational Therapy or Physical Therapy.

### **Composition of the OT and the PT Performance Review Committees**

The OTPRC is a standing committee of the School. It is composed of four full-time 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 full-time 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 Student Performance Review Committee**

#### **Step 1**

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.

Occupational Therapy/Physical Therapy students who are dissatisfied with a clinical evaluation must first approach the on-site clinical coordinator (as identified on the evaluation form) to discuss the evaluation. The supervisor will provide information to clarify the evaluation. If indicated, the coordinator will obtain any further information that perhaps was not initially sought, or discuss evaluation comments which may have a different perspective in light of the student's explanation. Following discussion of the student's concerns, the clinical coordinator may leave the evaluation/ mark unchanged or may change the evaluation/mark.

If the student has met with the supervising therapist and the site clinical coordinator and has not reached a satisfactory resolution, he/she may meet with the Academic Coordinator of Clinical education (See Clinical Affiliation Guidelines).

#### **Step 2**

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

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 in sufficient detail to the Program Director and must be received within 14 calendar days of notification of the evaluation or mark.

Students who remain dissatisfied after speaking with the coordinator and the ACCE may request an impartial review of the evaluation/mark. This request must be made in writing to the OT/PT Director and must be received within 14 calendar days from the end of the clinical affiliation. If the clinical affiliation in question is followed immediately by a vacation, and this has required the student to be out of town, the time delay to request a review may be extended by an additional 10 calendar days.

A student has the right to appear before the committee to state his/her case. The instructor may also appear before the Committee. Exceptionally, submissions may be accomplished 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 will remain unchanged. Should the Committee conclude that the evaluation under review was not reasonable a "**de novo**" assessment will be provided by the Committee. In other words, the modified evaluation may remain unchanged, be upgraded or downgraded.

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

Only decisions of the OTPRC and PTPRC requiring the student to repeat a promotion period or requiring the student to withdraw from the Program may be appealed.

## **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 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:

1. Within 14 working days from notification of the decision of the OTPRC and PTPRC, the student may request a review of the decision of the OTPRC and the PTPRC. This request must be made in writing in sufficient detail to the Program Director.

2. 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, etc. In order to give the student time to prepare for the meeting, there will be a minimum 10 working days prior notice. It can be scheduled earlier if the student requests it, or otherwise agrees in advance to the shorter notice period.
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 adviser 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.

## **Glossary of Terms**

### **Advisor**

A member of the McGill community who is not paid for his/her services (e.g. a fellow student, staff member or a student from the Legal Information Clinic). The role of the advisor is to advise and help the student and/or Program Director prepare and present his/her case.

### **Deferred Examinations**

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

### **Remedials**

Activities undertaken as a consequence of a failure or unsatisfactory evaluation in a course/clinical rotation. This activity will generally include supplemental study and additional evaluation. In the context of clinical rotations, there will generally be a requirement to repeat clinical activities for a defined period.

### **Supplemental Examinations**

Formal examinations taken as a consequence of a failure or unsatisfactory evaluation in a course.

### **Program Course**

A course required in either the Occupational or Physical Therapy Programs.

### **Unprofessional Behaviour**

Conduct that constitutes an academic or a non-academic offence or breach of any other policy or regulations of the University as contained in the Handbook of Students' Rights and Responsibilities.



## II. IMPORTANT INFORMATION FOR STUDENTS TO KNOW

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## II. Important Information for Students to Know

### **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 Director of the Program.

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 required 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. Please note: permission of the instructor is required before any lecture can be taped.

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, 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 a legitimate excuse will 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. For illness necessitating an absence of a week or more, a medical certificate should be presented to the Office of the Program Director immediately after a student's return to normal attendance. Other legitimate absences include participation in an event on behalf of McGill University or a family tragedy. The instructor must be notified in advance of the event, if at all possible.

## **Code of Conduct for Users of McGill Computing Facilities**

“McGill Computing Facilities (MCF) is 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. However, 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.

Davis, Hosmer and Hosmer Coach House

#### A) Comportment

1. All full-time and part-time faculty must be addressed as professor 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 be conveyed to the course coordinator in writing.
3. Disruptive behavior (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 lectures and laboratory sessions 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.

#### C) Buildings in General

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.
3. No sitting on stairs:

- 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 a fall.
4. Keys or ID cards to access Davis or Hosmer Houses are not to be lent 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 secretarial office, D5, is accessible to all students during posted office hours. Graduate students may have access to the Xerox and computers in the secretarial offices with permission only. All other offices may not be entered except with permission of the occupant.
  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, while on any clinical affiliation, are required to adhere to their Program's dress code.
  2. All students who attend lecture/demonstrations in the clinical setting are required to dress and conduct themselves in a professional manner.
  3. 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.
  4. Undergraduate students on a clinical affiliation are expected to assume the professional role of a therapist. In other words, the student is expected to fulfill all the professional duties required by the clinical facility, i.e., patient responsibility, reliability, regard for professional ethics, etc.
  5. All health care professionals and clients must be addressed by their official title and/or surname unless otherwise instructed.

### **Counselling**

Please note that you will be assigned a faculty advisor 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**

As of January 1, 2004, the University-wide Policy on Email Communication with Students is in effect. Email will be recognized as one of the official means of communication between McGill University and its students. Information will only be sent to students' McGill email account. These should be checked regularly.

## **Examination Regulations - University**

The revised University Examination Regulations listed below were approved by Senate on April 28, 1982.

1. No candidate for examination may bring into the examination room any books, notes or other material containing information pertaining to the examination unless the examiner has given instructions that such material will be allowed. The use of pocket calculators is subject to Faculty regulations. It is the candidate's responsibility to ascertain whether the use of calculators is permitted and, if it is, whether any restrictions are imposed on the types of calculators that may be brought to the examination.
2. 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. When needed, mathematical tables, etc., will be supplied in the examination room.
3. Talk or any other form of communication between candidates is forbidden.
4. Candidates must not use or attempt to use any improper source of information.
5. 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 cannot be considered acceptable excuses.
6. 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 quietly up to one-half hour after the scheduled start of the exam. After this time they will be admitted only by special permission of the Dean or his representative or of the Chief Invigilator.
7. 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.
8. 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.
9. 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.
10. No information of any kind that might be of assistance to another candidate is to be written on the question paper. All work must be done in accordance with the examination instructions and must be handed in to the Invigilator.
11. At the close of the examination, candidates must stop writing and submit their work at once.
12. Any breach of these regulations will be reported to the Chief Invigilator and to the Dean of the student's Faculty for appropriate action. A student found guilty of cheating or attempting to cheat is liable to expulsion from the University.

### **Examination Regulations School of P & OT - Addendum**

Due to the variety of evaluation processes in the Physical and Occupational Therapy Programs, these University regulations above are extended to incorporate not only written but also oral and practical evaluations. The additions to numbers 1, 3 and 4 are:

1. No candidate for a written, oral and/or practical examination may bring into the examination room any books, notes or other material containing information pertaining to the examination unless the examiner has given instructions that such material will be allowed.
2. Talk or any other form of communication (e.g., written notes, non-verbal gestures, suggestive glances) between candidates is forbidden during any written, oral and/or practical examination. In particular, when students are partnered for certain practical examinations and one student is clearly being tested for independent performance, non-verbal type of communication is forbidden.
3. Candidates must not use or attempt to use any improper source of information (e.g., seeking previously used written examinations unless clearly made available by the original or current course professor, asking former or current students who have already taken an oral and/or practical examination about the details or specifics of it).

### **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.

### **Faculty Advisor**

Please note that you will be assigned a faculty advisor 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.

## **Guidelines for Writing a Term Paper**

No paper will be accepted late without an explanation to and on approval by the staff involved, PRIOR to the original date of submission. A new deadline may then be arranged between the staff and student if the staff considers the request to be 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:
  - title of article
  - author's name
  - course number
  - professor's name
  - date
  
- b) abstract
  - 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;
  - 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.
  - practical implications that could be drawn from the paper could be presented here.
  - 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.
  - practical implications that could be drawn from the paper could be presented here.
  - 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.
  - 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:
    - 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).

## **Leaves of Absence**

Leaves of absence will be granted only for reasons of health or family crises. Requests for leaves must be discussed with the respective Program Director. Permission is granted by the Program Director. A request must be accompanied by supporting documentation (e.g., a letter from the student's physician/counselor). In general, a medical leave is granted for up to one year. The Faculty reserves the right to impose a limitation on the number as well as the total duration of leaves. Should a prolongation be requested, the School 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/counselor. 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 clarified with the Student Affairs Coordinator. Students may be required to forfeit all or part of their tuition fees. All students must have an interview with the Student Aid Office to reassess impact on financial aid.

The respective Program Director may consider requests for other leaves under exceptional circumstances.

## **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.

Functions that specifically fall within the influence of the School of Physical and Occupational Therapy are listed below. These functions fall under the responsibilities of the Building Director.

1. Inspection and reporting of safety shortcomings are submitted to the Facilities Management Call Center. Consequent action, such as repairs to the buildings, is then followed up.
2. Annual submissions of building safety issues are prepared according to the McGill Capital alterations Procedures and submitted to the Dean of Medicine.
3. Ongoing liaison with McGill Security Services, Building Services, the Environmental Safety Office and the Fire Prevention Office.
4. Completion and submission of accident event reports to the Environmental safety Office.
5. Ensures adequate training and preparedness of the School's Faculty, Support and Administrative Staff members to provide services as first-responders.

In addition, issues of safety and well-being are addressed by Students at the Faculty-Student Liaison Meeting.

The **auditing system** for various services involved in safety and well-being is managed at multiple levels.

McGill Security Services perform security audits for the entire campus. 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 [www.mcgill.ca/eso/safetycommittees/jahsc/mandates](http://www.mcgill.ca/eso/safetycommittees/jahsc/mandates)).

Included within the Facilities Management and Development office is the provision of maintenance of unsafe conditions and systematic fire inspections.

The Environmental Safety Office provides a variety of safety training courses including CPR and radiation safety (for complete details refer to [www.mcgill.ca/eso/training](http://www.mcgill.ca/eso/training)), as well as working in concert with the Facilities Management and Development Office to coordinate hazard correction.

McGill University Walksafe Network provides a “safe and effective alternative to walking or using public transportation alone at night” ([www.ssme.mcgill.ca/walksafe](http://www.ssme.mcgill.ca/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” ([www.mcgill.ca/stuserv/](http://www.mcgill.ca/stuserv/)).

In January 2004, the safety committee of the Environmental Safety Office completed a Health and Safety Audit report, which was conducted by Water and Earth Sciences ([www.mcgill.ca/eso/safetycommittees/auditreport/](http://www.mcgill.ca/eso/safetycommittees/auditreport/)).

A variety of services are available for students. Those being most applicable to OT and PT students are: Career and Placement Services, Chaplaincy Service, Counselling Service,

Dean of Student's Office, First Year Office, Health Service, International Student Service, McGill Athletics, Mental Health Service, Student Aid office, Tutorial Service, First People's House, Students with Disabilities and Off Campus Housing.

According to a survey distributed to U3 Students in 2003, 82% of the students reported that they were aware of where to obtain information regarding these services.

### **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 offense."

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

### **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, the following penalties are considered appropriate:

1. At a minimum, the plagiarized work would receive a mark of F (0). (If this results in failure of the course, any right to supplemental work originally granted in the course continues to apply.)
2. A sufficiently serious case (as above) would result in failure in the course. (Any right to supplemental work is forfeited.)

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.

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

## APA Research Style Crib Sheet

Russ Dewey  
Georgia Southern University

*[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](mailto:rdewey@gasou.edu)]*

Download the APA Crib Sheet PDF and other APA style resources from [Dr. Abel Scribe PhD](#).

See Professor Dewey's excellent [Web site](#) for Psychology Students.

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## INTRODUCTORY INFORMATION

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**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 [amazon.com](http://amazon.com). 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

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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:
  - **cf.** [use **compare**]
  - **e.g.** [use **for example**]
  - **etc.** [use **and so forth**]
  - **i.e.** [use **that is**]
  - **viz.** [use **namely**]
  - **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 offense. 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 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 example [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 *neopsychanalytic* theory).

## PAGE FORMATS

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**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 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)

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**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:

- |  |   |
|--|---|
| • <b>chap.</b> for chapter                                 | • <b>pp.</b> for page numbers (plural)    |
| • <b>ed.</b> for edition                                   | • <b>Vol.</b> for a specific Volume       |
| • <b>rev. ed.</b> for revised edition                      | • <b>vols.</b> for a work with xx volumes |
| • <b>2nd ed.</b> for second edition                        | • <b>No.</b> for Number                   |
| • <b>Ed.</b> for Edited by                                 | • <b>Pt.</b> for Part                     |
| • <b>(Eds.)</b> for multiple editors                       | • <b>Suppl.</b> for Supplement,           |
| • <b>Trans.</b> for Translated by                          | • <b>Tech. Rep.</b> for Technical Report  |
| • <b>p.</b> for page number, with a space after the period |   |

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, 1807-1814.

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, 1807-1814.

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, 1807-1814. 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, 1807-1814. 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 oranges. *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 ICC Audio-visual Section. Please refer to the **ICC** 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, tape recorders, etc. for Faculty and students to borrow. (Please see Appendix 2 Audiovisual Collection – Commercial Sources.)

### **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, our main classroom (Hosmer 102) has been equipped as a lecture hall with slide projector wired with remote control, overhead projector and cart, control panel with data input panel, video data projector, VHS video cassette player, Faculty lectern, telephone installation and network connection. Standard slide projectors and overhead projectors are considered basic equipment and were already located in the following classrooms: Hosmer 101, Hosmer 104, and Davis 3. The School also has two (2) LCD projectors for use in rooms without permanent installations. All amphitheatres in McIntyre Medical Building, which are commonly used by the School, have lecture hall equipment, as in Hosmer 102 and a public address system. Some amphitheatres are also equipped with a second slide projector and overhead projector. Furthermore, wireless internet connection is available at various areas within McGill University, including Hosmer House.

### **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.)
- pointers (mechanical and battery-powered)
- Caramates (a desk-top slide viewer)
- cables to project from computers via the McIntyre theatres' video projectors

To reserve equipment and materials please contact the Chief Technician/Building Director. If you wish to use these materials, present your student ID card to Mr. Alan Hammaker, the Chief Technician in Hosmer House, Room 11, who will help you locate the suitable materials and will ask you to fill out a loan card. Your ID card will be returned to you once the borrowed materials are returned.

You may view audiovisual material in 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 MUST BE SIGNED IN AND OUT. A yellow loan card for this purpose is available in Hosmer House, Room 11.

1. Instruction sheets and pamphlets are available for all items of equipment. They are filed alphabetically by manufacturer in Hosmer House, Room 11. 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 11 (398-4516) immediately.
2. Immediately after viewing, all audiovisual materials must be returned to Hosmer House, Room 11.
3. Any equipment in need of repair should be reported to Mr. Alan Hammaker immediately.

### Teaching Slides

A file index of slide topics is in Hosmer House, Room 11 along with the slide collection. These are also available for loan on the same basis as other audiovisual materials.

### Catalogues:

A small selection of videotape and film catalogues is available in Hosmer House, Room 11.

### **McGill Libraries**

The Health 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.



## **Health Sciences Library**

The Health Sciences Library occupies the 3<sup>rd</sup> and half of the 4<sup>th</sup> 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 Health 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 Health 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 for free. A page specific to Occupational 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 Health 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 Health 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 Health Sciences Library held on all subjects:

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

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) Journal Stack Sections – 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) The Subject Micro Catalogue System – gives information about journals relevant to Occupational Therapy and Physical Therapy. Look up ... ‘Occupational Therapy’ or ‘Physical Therapy’.

c) Index Medicus and Excerpta Medica – will assist in providing relevant reference material and are invaluable when writing term papers.

d) Journals published prior to 1961 are on the 2<sup>nd</sup> floor of the McIntyre Medical Sciences Library; those published in 1961 and after are on the 3<sup>rd</sup> 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.

### **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 9XXXXXX.

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](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](mailto: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.

### III. B.SC. OCCUPATIONAL THERAPY U1

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### **III. B.Sc. OCCUPATIONAL THERAPY U1 CURRICULUM**

#### **OVERALL COURSE STRUCTURE**

- Important Dates B.Sc. Occupational Therapy U1
- Curriculum Plan B.Sc. Occupational Therapy 2005-2006
- List of required courses for B.Sc. (OT) & B.Sc. (PT)

#### **PROFESSIONAL COURSE DESCRIPTIONS**

##### **COMBINED PHYSICAL & OCCUPATIONAL THERAPY COURSE**

ANAT 315	REGIONAL ANATOMY OF THE LIMBS & BACK
POTH 222	KINESIOLOGY
POTH 248	COMMUNICATION/PROFESSIONALISM
POTH 250	HEALTH CARE AND PROFESSIONALISM
POTH 260	LIFESPAN

##### **OCCUPATIONAL THERAPY**

OCC1 220	CLINICAL AFFILIATION 1
OCC1 235	OCCUPATION AS THERAPY
OCC1 236	OT PRACTICE I: MUSCULOSKELETAL
OCC1 240	ASSESSMENT OF PERFORMANCE I
POTH 239	ASSESSMENT IN REHABILITATION I



## B.Sc. OCCUPATIONAL THERAPY U1 IMPORTANT DATES

FALL TERM:	Registration Period Orientation Lectures Begin Labour Day Course Change (drop/add period) Thanksgiving Day Last Day of Lectures Examination Period MOLE Evaluation Period	Aug. 2 to Sept. 1, 2005 August 31, 2005 Sept. 1, 2005 Sept. 5, 2005 Aug. 3 to Sept. 13, 2005 Oct. 10, 2005 Dec. 2, 2005 Dec. 5 to 20, 2005 Nov. 17 to Dec. 4, 2005
WINTER TERM:	Lectures Begin Course Change (drop/add period) Midterm Break - three days Last Day of Lectures Examination Period MOLE Evaluation Period	Jan. 3, 2006 Aug. 3, 2005 to Jan. 17, 2006 Feb. 22 to 24, 2006 Mar. 3, 2006 Mar. 6 to 17, 2006 Feb. 20 to Mar. 5, 2006
	CLINICAL AFFILIATION 1 Easter Integration Block Integration Block Integration Block	Mar. 20 to Apr. 28, 2006 Apr. 14 to 17, 2006 May 1, 2006 May 19, 2006 May 22, 2006 May 23 to 31, 2006 TBA

# U1 CURRICULUM PLAN 2005-2006 OCCUPATIONAL THERAPY PROGRAM

## FALL TERM

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

## WINTER TERM

Academic Term (9 wks) + Exams (2 wks) + Clinical Affiliation 1 (6 wks) + integration Block (3 wks) + Exams (1 wk) = Total 21 Wks

Academic Term	Exams	Academic Term	Exams	Clinical Affiliation	Integration Block	Exams
Sept 1 to Dec 2	Dec 5 to 20	Jan 3 to Mar 3	Mar 6 to 17	Mar 20 to Apr 28	May 1 to 19	May 24 to 31
ANAT-315 ANATOMY <span style="float: right;">4cr</span>		ANAT-316 ANATOMY <span style="float: right;">2cr</span>		OCC1-220 CLINICAL AFFILIATION 1 <span style="float: right;">0cr</span>	POTH-222 KINESIOLOGY <span style="float: right;">3cr</span>	
PHGY-201 PHYSIOLOGY <span style="float: right;">3cr</span>		PHGY-202 PHYSIOLOGY <span style="float: right;">3cr</span>				
POTH-248 COMMUNICATION/PROFESSIONALISM <span style="float: right;">2cr</span>		POTH-250 HEALTH CARE AND PROFESSIONALISM <span style="float: right;">2cr</span>				
POTH-260 LIFESPAN <span style="float: right;">2cr</span>		OCC1-236 OT PRACTICE I: Musculoskeletal Conditions, <b>Section A</b> <span style="float: right;">4cr</span>				
OCC1-235 OCCUPATION AS THERAPY <span style="float: right;">3cr</span>		OCC1-240 ASSESSMENT OF PERFORMANCE I <span style="float: right;">2cr</span>				
POTH-239 ASSESSMENT IN REHABILITATION I <span style="float: right;">2cr</span>						

NOTE: ANAT = Anatomy  
 PHGY = Physiology  
 POTH = Occupational/Physical Therapy  
 OCC1 = Occupational Therapy

## U1 PHYSICAL AND OCCUPATIONAL THERAPY LIST OF REQUIRED COURSES

**Fall Term**  
Sept 1 to Dec 2, 2005

**Winter Term**  
Jan 3 to Mar 3, 2006

**Clinical Affiliations**  
Mar 20 to Apr 28, 2006

**Other Courses**  
May 1 to 19, 2006

**Exam Period**  
Dec 5 to 20, 2005

**Exam Period**  
Mar 6 to 17, 2006

**Exam Period**  
May 23 to 31, 2006

<b>2005-2006 OCCUPATIONAL THERAPY PROGRAM U1</b>		
<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>
<b>Combined Courses</b>		
ANAT-315	Regional Anatomy of the Limbs and Back	4
ANAT-316	Human Visceral Anatomy	2
PHGY-201	Human Physiology: Control Systems	3
PHGY-202	Human Physiology: Body Functions	3
POTH-222	Kinesiology	3
POTH-248	Communication/Professionalism	2
POTH-250	Health Care and Professionalism	2
POTH-260	Lifespan	2
<b>OT Courses Only</b>		
OCC1-220	Clinical Affiliation 1	0
OCC1-235	Occupation as Therapy	3
OCC1-236	OT Practice I: Musculoskeletal Conditions	4
OCC1-240	Assessment of Performance I	2
POTH-239	Assessment of Rehabilitation I	2
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 32</b>		
<b>2005-2006 PHYSICAL THERAPY PROGRAM – U1</b>		
<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>
<b>Combined Courses</b>		
ANAT-315	Regional Anatomy of the Limbs & Back	4
ANAT-316	Human Visceral Anatomy	2
PHGY-201	Human Physiology: Control Systems	3
PHGY-202	Human Physiology: Body Functions	3
POTH-222	Kinesiology	3
POTH-248	Communication/Professionalism	2
POTH-250	Health Care and Professionalism	2
POTH-260	Lifespan	2
<b>PT Courses Only</b>		
PHTH-220	Clinical Affiliation 1	0
PHTH-235	Movement Science and Practice	3
PHTH-236	Movement I: Musculoskeletal	4
PHTH-241	Assessment II: Musculoskeletal	2
POTH-239	Assessment in Rehabilitation I	2
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 32</b>		

## ANAT 315 REGIONAL ANATOMY OF THE LIMBS & BACK

**Credits:** 4

**Prerequisites:** None

**Instructors:** *Regional Anatomy Section:* G.C. Bennett, Department of Anatomy,  
*Functional Anatomy Section:* S. Mak, BSc & A. Gaglietta, BSc

**Access to the Instructors:**

*Regional Anatomy Section:*

G.C. Bennett, Department of Anatomy

Tel: (514) 398-6344, Email: [gary.c.Bennett@mcgill.ca](mailto:gary.c.Bennett@mcgill.ca)

*Functional Anatomy Section:*

S. Mak, O.T., Davis D34A, Tel: (514) 398-2772, Email: [susanne.mak@mail.mcgill.ca](mailto:susanne.mak@mail.mcgill.ca)

A. Gaglietta, Davis D38, Tel: (514) 398-4511, Email: [Amelia.gaglietta@mcgill.ca](mailto:Amelia.gaglietta@mcgill.ca)

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**REGIONAL ANATOMY SECTION** - See component submitted by Dr. Bennett

### FUNCTIONAL ANATOMY SECTION

**Course Objective:** This section follows the same organization as the Regional Anatomy section of this course, directed by Dr. G. Bennett. Specifically, students will be introduced to observation, inspection and palpation skills, the principles of planes and axes.

**Course Structure:** This section consists of laboratory sessions of two (2) hours per week for 13 weeks. It includes small group work and instructor-directed experiences.

Functional Anatomy Labs: Thursday: 8:30 – 10:30 am

Group A: Hosmer 104, 202

Group B: CHGYM

**Student Learning Objectives:**

Upon completion of this section, the student, working with a classmate, will be able to visually inspect, palpate and identify:

- bony landmarks
- soft tissue structures: muscle mass, tendons, ligaments, nervous tissue
- arterial pulses
- normal muscle action

- Demonstrate on one another and analyze the movement of body segments in terms of planes and axes
- Identify and classify muscle actions: isometric, isotonic, concentric and eccentric contractions
- Demonstrate the use of proximal muscles for stabilization while using distal joints and muscles in functional movements
- Describe potential patterns of muscle weakness or paralysis due to dysfunction of nerves, muscles and joints
- Identify joint structures and demonstrate movement of specific joints (according to classification)
- Demonstrate professional behaviour throughout the labs
- Demonstrate organization skills by completing the lab preparation activities and working independently in labs

**The student therapist is expected to present a professional approach throughout all of his/her learning experiences.**

**Course Content:** The students will apply the skills of observation, inspection, & palpation to the following bony landmarks: vertebral column, shoulder girdle, humerus, ulna, radius, carpal bone, pelvis, hip, ankle & foot.

The following soft tissue structures will also be examined: muscles of the cervical thoracic & lumbar spine, abdominal area, brachium, anterior and posterior forearm, hand, pelvis, thigh, the leg and foot. Furthermore, the ligaments of the shoulder, elbow, wrist, hand, hip, knee and ankle will be examined.

The student will be able to take the following pulses: carotid artery, brachial artery, ulnar artery, radial artery, femoral artery, dorsal pedal artery, and posterior tibial artery.

### **Course Materials:**

#### **Required text:**

Moore, K.L. & Dalley, A.F. (1999) Clinical Oriented Anatomy (5<sup>th</sup> edition). Lippincott Williams & Wilkins.

#### **Recommended reading:**

Biel, A. (2001) Trail Guide to the Body. How to locate muscles, bones, and more. 2<sup>nd</sup> ed. Books of Discovery.

Hoppenfeld, S. (1976). Physical Examination of the Spine & Extremities. Norwalk, Connecticut: Appleton & Lange.

#### **Other references of Interest:**

Brunnstrom, S. (1972) Clinical Kinesiology, 3<sup>rd</sup> Edition. Philadelphia: FA Davis.  
Kendall, F.P., McCreary, E.K., Provance, P. G. (1993) Muscles. Testing and Function. Fourth Edition. Baltimore: Williams & Wilkins.

Use one of the following websites to go to the link for the Musculoskeletal Atlas.

- [www.health.library.mcgill.ca/resource/ot.htm](http://www.health.library.mcgill.ca/resource/ot.htm)

- [www.health.library.mcgill.ca/resource/pt.htm](http://www.health.library.mcgill.ca/resource/pt.htm)

**Student Assignment and Evaluation:** The Functional Anatomy section accounts for 20% of the Anatomy of the Limbs and Back (ANAT-315) course. The student is assessed in two (2) practical evaluations, each worth 10%.

Topic	Date	grade weight
Upper Extremity	November 3	10 %
Lower Extremity	December ?	10 %

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 55%

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Required dress for laboratory sessions: Shorts and tank tops or halter-type or racer back tops.

Inappropriate dress deprives your partner of their practice time.

**Attendance:** Students who miss more than 10% of the practical laboratories without a legitimate reason will not be permitted to take the lower extremity evaluation.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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 222 KINESIOLOGY

**Credits:** 3

**Prerequisites:** None

**Instructors:** Patricia McKinley, PhD

**Access to the Instructor:**

Hosmer H300B, Telephone: (514) 398-4498, email: [patricia.mckinley@mcgill.ca](mailto:patricia.mckinley@mcgill.ca)

**Course Objective:** To understand how kinematic, kinetic and EMG assessments can help facilitate evidence based practice and provide the basis for therapeutic intervention, by 1) achieving a basic knowledge of the use of biomechanic principles and how they might be used in clinical assessment and 2) reading and understanding clinical literature to be able to determine how it might affect clinical interventions.

**Course Structure:**

Ten hours of lecture and five (5) hours lab/workshop per week.

**Student Learning Objectives:**

By the end of the course the student will:

- demonstrate the ability to participate in a group analysis of data (5-6 individuals) where kinematic, kinetic and EMG data related to specific movements are assessed
- demonstrate the ability for self-directed learning of the principles of kinesiology
- describe the role of motion analysis in addressing gait, posture and balance
- describe the role of motion analysis in addressing grip and hand function
- illustrate the role of kinesiology in motor learning and function
- demonstrate the ability to procure, summarize and discuss the primary literature in Rehabilitation Science related to principles of kinesiology
- exhibit clinical reasoning using principles of kinesiology

**Course Content (by week based on 3 weeks):**

- OVERVIEW AND MUSCLE MECHANICS AND EMG
- EMG and KINETICS relationship between muscle activity and body centre of gravity mechanics; biomechanics
- KINETICS, KINEMATICS and Motor Control Strategies

## Course Materials:

Rulers, protractors, calculators

## Required text

Parts of OT reference material from Oatis *Kinesiology* and from Shumway-Cook and Woolacott *Principles of Motor Control*.

Additional Handouts and other materials: **TBA**; to be handed out the first week of class and to be placed on WebCT

Suggested readings: **TBA** and placed on WebCT

Miscellaneous websites and articles in PDF form available on WebCT

## Student Assignment and Evaluation:

Group lab work:	25 pts
Quizzes	10 pts
Final exam	65 pts

## Final Exam:

The final exam will be short answer and problem solving and will be open book. You may use any written sources of material **except information directly obtained from another person** to help you write the exam. You may write the exam in French or English.

## Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

## 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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Appropriate for a professional.

**Attendance:** Students who have missed more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final examination.



**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 objects of the course.”

**Consequences of not completing assignments as requested:** Will lose 5% of the total mark per day unless a prior agreement with the professor is reached. You must complete all aspects of the class to receive a final mark.

**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 248 COMMUNICATION & PROFESSIONALISM

**Credits:** 2

**Prerequisites:** None

**Instructors:** Aliko Thomas, MEd (Coordinator)

**Access to the Instructor:**

Aliko Thomas: Davis D30, Telephone: (514) 398-4496, email: aliko.thomas@mcgill.ca, Tuesdays from 9:00 to 12:00 pm and Thursdays from 9:00 to 12:00 pm and 3:30 to 5:30 pm by appointment

Email and telephone messages are given priority and efforts are made to return student calls promptly.

**Course Objective:** The main objective of this course is to introduce students to the models of communication and professionalism for effective clinical practice. Through the course of the semester students will also learn about the various psychosocial issues that clients experience when faced with an injury and/or illness and learn effective methods for dealing with the psychosocial realities of these clients.

**Course Structure:**

Two (2) hours per week for 13 weeks starting September 1<sup>st</sup>, 2005 1:00 pm to 3:00 pm. The format will include lectures/labs/class participation.

**Student Learning Objectives:**

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

1. Define and apply fundamental skills and strategies necessary for effective professional communication
2. Analyze a number of psychosocial issues which have implications for body structure, activity and participation with patients of various age groups
3. Reflect on and recognize the potential impact of activity limitations and participation restrictions on the therapeutic relationship

**Course Content:**

**THEME 1: THE FUNDAMENTALS OF COMMUNICATION**

**September 1, 2005 - CLASS 1**

**Topics:**

**I. Introduction to the course**

- Course syllabus
- Expectations

**II. Communication Basics**

- The purpose of interpersonal communication
- A basic model of communication
- Types of communication
- Communication channels
- Barriers to effective communication

**Required readings:**

**Chapter 1 in Adler, R.B., Rodman, G (2000); Pages 2 to 24**

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**September 8, 2005- CLASS 2**

**Topic: Impression Formation and Relationship Development**

- Forming first impressions
- Perception and common errors in first impressions
- The power of first impressions
- Going beyond first impressions-forming therapeutic relationships
- Stages of relationship development

**Required readings:**

**Chapter 2 in Adler, R.B., Rodman, G (2000); Pages 30 to 62**

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**September 15, 2005- CLASS 3**

**Topic: Listening: An Active Process**

- The fundamentals of reflective listening
- The importance of body language
- Barriers to effective listening

**Required readings:**

**Chapters 4 and 5 in Zeuschner 2003; Pages 53 to 89**

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**September 22, 2005- CLASS 4**

**Topic: Interviewing clients: A Structured Conversation**

- The interview process
- Interviewing in the context of the therapist-client relationship
- Effective interview techniques

**Required readings:**

**Appendix 1 in Adler, R.B., Rodman, G (2000); Pages 448 to 470**

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**September 29 and October 6<sup>th</sup>, 2005 CLASSES 5 and 6**

**Interviewing techniques assignment to be completed in class**

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**THEME 2: PSYCHOSOCIAL ISSUES AND THE INTERNATIONAL CLASSIFICATION OF FUNCTION (ICF)**

**October 13, 2005 – Class 7**

**\*\*\* Quiz first 20 minutes of class \*\*\***

**Topic: Rehabilitation models, Client-centered practice and Health with the ICF**

- Current Beliefs in Rehabilitation: Holistic and client-centered practice
- From stereotypes to prejudice and discrimination
- Introduction to the ICF: Body structure, function and participation as experienced by clients in different age groups

**Required readings:**

**Articles**

- 1) **Corring & Cook (1999); Client-centered care means that I am a valued human being**
  - 2) **Darragh, Sample & Krieger, 2000); “Tears in my eyes cause somebody finally understood”**
  - 3) **Mead (2000); “Patient partnership”**
-

## **October 20, 2005- CLASS 8**

### **Topics:**

#### **I. Review of ICF with class exercise**

#### **II. Different Clients, Different Realities**

- Body structure, function and participation as experienced by clients in different age groups (continued)
- Body structure, function and participation as experienced by males versus females
- Body structure, function and participation as experienced by people from different cultural/religious backgrounds

### **Required readings:**

#### **Articles**

#### **ICF document by the World Health Organization in course pack**

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## **October 27 and November 3, 2005 CLASSES 9 and 10**

**Topic:** Dealing with Emotional Reactions to limitations in body structure, function and participation

- Stages of adjustment to illness and disability
  - Emotional realities of adapting to body structure, function and participation limitations
  - Denial, depression, and anger
  - Suicidal clients
  - Emotional reactions of families
- 

## **November 10, 2005- CLASS 11**

**Topic:** Topics Related to Sexuality

- Personality types in medical management
  - Sexual functioning with ICF
  - Sexual abuse
  - Sexual orientation: dealing with clients who are gay or lesbian
  - Burnout
- 

## **November 17, 2005- CLASS 12**

### **STUDENT PRESENTATIONS ON PROJECTS**

**\*\*\* WRITTEN PROJECT DUE**

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November 24<sup>th</sup>

## STUDENT PRESENTATIONS ON PROJECTS

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December 1, 2005- CLASS 13

## STUDENT PRESENTATIONS ON PROJECTS

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### Course Materials:

#### Required text:

Thomas, Aliko (2004). Course pack. This can be purchased at the McGill bookstore.

**Suggested text:** It is strongly recommended that each student have access to the Publication Manual of the American Psychological Association (**APA**). This is a book that all students will need throughout the Program as it provides a detailed account of how to write papers and reference citations and sources used in preparation of term papers.

- All readings included in this course syllabus are mandatory and it is the student's responsibility to ensure that he/she has read all the materials prior to class.
- Additional readings may be assigned as necessary
- WebCT will be used as an on-line learning platform. All course notes, assignments and additional recommended readings will be posted on WebCT. It is the responsibility of each student to print the notes weekly and come to class prepared. WebCT will also be used as a communication method between the instructor and the students so that weekly messages and queries can be posted on the bulletin board and the instructor will monitor it on a regular basis.

**Student Assignment and Evaluation:** The following assignments will be used to evaluate learning. A detailed description of these can be found at the end of the syllabus. Additional information will be provided during the course of the semester.

1. Psychosocial Issue Project:	30%	due on class #12 (November 17 <sup>th</sup> , 5pm
2. Group oral presentation on projects:	15%	on last 3 classes
3. Quiz:	10%	class 7 October 13th
4. Interviewing techniques assignment:	5%	September 29 and October 6
5. Final exam:	40%	during the final exam period

**Special Requirements for Course Completion and Program Continuation:**

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the course of the semester. The assignments that require a group presentation or lab work will be evaluated on presentation and professionalism both with respect to style and dress code. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

**Attendance:** Attendance to classes is mandatory. It is the responsibility of each student to attend classes prepared and be actively involved. Although attendance will not be taken, the materials covered in class will be subject to evaluation.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Assignments not completed on time will be penalized by one (1) mark per day. In the event that an assignment cannot be submitted on its due date, students are encouraged to inform the instructor as soon as possible.

**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 AND PROFESSIONALISM

**Credits:** 2

**Prerequisites:** None

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

**Access to the Instructor:**

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

Email: [liliane.asseraf.pasin@mail.mcgill.ca](mailto:liliane.asseraf.pasin@mail.mcgill.ca)

**Course Objective:** Effective delivery of rehabilitation services requires that the entry level practitioner recognize and respond to the influence of social, cultural, economic, legislative and demographic factors impacting on health and rehabilitation service delivery, both locally and globally. This is a companion course with Communication/Professionalism POTH 248.

**Course Structure:** This course will incorporate two (2) x two (2) hours lectures/seminars and panel presentations for six (6) weeks and two (2) hours a week for three (3) weeks for a total of 27 hours.

**Student Learning Outcomes:**

Upon completion of this course the student will:

1. Describe the fundamental structure of the health care system in Quebec and differentiate the roles of the professional associations, the regulatory bodies (OEQ & OPPQ), l'Office des professions du Quebec and other health care governing bodies;
2. Differentiate exclusive right of practice from reserved right of practice and describe the impact of autonomous practice on the Physical Therapy and the Occupational Therapy professions;
3. Access, interpret and use data and information acquired from a variety of sources for evidence-based practice and research;
4. Interpret and manage clinical issues with a broad understanding of external factors which influence health and social status, including varied cultural values and belief systems;
5. Incorporate international health perspectives and determinants of health principles within evidence-based practice;



6. Describe the potential impact of public policy (present and future) on rehabilitation services and be able to suggest strategies to influence public policy;
7. Demonstrate ethical behaviour in their clinical affiliation (CPI Criteria 1 to 5) by:
  - a. respecting cultural differences and ethics of particular groups or individuals;
  - b. developing interactions with clients, colleagues, employers and others;
  - c. demonstrating accountability, responsibility, commitment, and effective communication skills (verbal, nonverbal, written);
  - d. respecting professional standards of practice and clinical guidelines;
  - e. practicing according to legal standards of practice in any health service delivery.
8. Select and justify all interventions (with the clients, clients' family members and other health care team members) in accordance to the Code of Ethics.

**Course Content:** - TBA on WebCT prior to the first week of classes.

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

**Required texts:**

The Professional Code, Éditeur officielle du Québec.

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

**Recommended texts:**

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

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

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

**Reference texts:**

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

Purtilo, R. (1993). Ethical Dimensions in the Health Professions, (2<sup>nd</sup> edition). W.B. Saunders Co.

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

Group Project	30 %	(To be handed in by March 3, 2006)
2 exams (2 x 20%)	40 %	(Will be given in class time)
Take Home Final Exam	30 %	(Selected ethical case studies)

**Special Requirements for Course Completion and Program Continuation:**

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Students are expected to demonstrate professional behaviour and attire at all times.

**Attendance:** Class attendance is highly recommended.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** Professionalism marks will be deducted for late assignments.

**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 260 LIFESPAN

**Credits:** 2

**Prerequisites:** None

**Instructors:** Rena Birnbaum, MSc (Coordinator)

**Access to the Instructor:**

Telephone: (514) 412-4407, email: [rena.birnbaum@muhc.mcgill.ca](mailto:rena.birnbaum@muhc.mcgill.ca)

**Course Objective:** This course will provide an overview of competency across performance domains required through the lifespan.

**Course Structure:** This is an interactive lecture course, two (2) hours per week for the Fall term.

**Student Learning Objectives:**

- To describe how the lifespan is an ongoing developmental process involving both continuity and change, and how it is influenced by genetic and environmental factors.
- To summarize different developmental events from the perspective of major developmental theories.
- To describe and compare neuro-maturational and motor control theories of development.
- To explain the sequence of development that occurs across sensory, cognitive/perceptual, physical/motor, play/leisure, language, and psychosocial domains from conception to death.
- To characterize the unique changes associated with each stage of development.
- To appraise the influences of cultural background as well as family dynamics on development.
- To recognize and report major areas of controversy and new directions in the study of human development.
- To apply a self-directed approach to learning.

**Course Content:**

- Developmental theories and controversies
- Basic embryology and genetics
- Neonatal neurobehavioral performance
- Motor principles and theories
- Developmental competencies in gross motor, fine motor, perceptual, cognitive, social, behavioral, play, daily living skills and language for the:
  - infant
  - preschooler
  - school age child
  - adolescent
- Family function and cultural background and their effects on development
- Theories and developmental changes characteristic of the young adult and during the middle years.
- Physiologic, psychosocial and cognitive changes associated with aging
- Changing roles and activities in the elderly
- Death and dying

**Course Materials:****Required text:**

Berger, K.S. (1997). The developing person through the lifespan. New York, Worth Publishers.

**Student Assignment and Evaluation:**

Child observation	30%
Midterm Examination	30%
Final Examination	35%
Group presentation	5%

**Special Requirements for Course Completion and Program Continuation:**

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

**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](http://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:** Students are expected to attend all lectures and are required to attend all student presentations.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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.”

## OCC1 220 CLINICAL AFFILIATION 1

**Credits:** 0

**Prerequisites:**

- **PDSB workshop** (*Principes de déplacements sécuritaires des bénéficiaires*): all students must successfully complete this workshop, which is included in the Assessment of Rehabilitation I (POTH-239) course, in Winter term.
- **CPR/First Aid:** Students are responsible for getting certified and renewing certification. A minimum of a level C, 12-hour course including adult, children and infants (e.g. with Red Cross, St-John's Ambulance, Bronze Medallion). Students are required to bring a proof of status to Croce Riggi, room D4.
- **Immunization:** All students must ensure that their immunization records are complete and show supporting documentation to McGill Student Health Services. This must be completed by December 2005. McGill Student Health Services maintains an active record list that may be requested by facilities. It is the student's responsibility to request these records from health services and bring them to each clinical placement.
- **Clinical affiliation seminars:** All students must attend the clinical affiliation seminars scheduled in the fall and winter terms of U1.
- **U1/U3 shadowing project:** All U1 students must do a minimum of one (1) site visit where a U3 student is doing a placement. More information regarding this project will be given during the fall clinical affiliation seminars.
- **Occupation as Therapy (OCC1-235):** Students must pass this course with a grade of C+ or above prior to Clinical Affiliation 1.

**Important:**

**Failure to complete the required prerequisites before the clinical placement may result in a student's non-admission to a clinical facility and subsequent inability to complete the clinical placement. This policy applies to all placements including international and out-of-province placements.**

**Instructors:** Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)  
  
Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

**Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34, Tel: (514) 398-2772

Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

**Course Objective:** This course is the first of five (5) clinical courses whereby students have the opportunity to integrate theoretical content with practice. Upon completion of the 5<sup>th</sup> clinical course, students are expected to have acquired entry-level clinical competence.

**Course Structure:** Clinical Affiliation commences in first year and continues at set intervals throughout the three years of the Program. The objectives for each fieldwork placement will vary, according to the student level. Each student will have the opportunity to develop clinical skills, clinical reasoning, and professional judgement, in a variety of settings. This includes preparatory seminars in first, second, and third year. By the end of the Program, each student will have completed five rotations, full-time. Each student is exposed to a variety of clientele (e.g. long-term care institutions, acute care hospitals, rehabilitation centres, CLSCs, etc.; infants, children, adolescents, adults, elderly).

The overall Program is made up of 105 credits of academic and clinical courses. The Clinical Affiliation courses are made up of over 1000 hours of clinical placement and have a value of 18 credits. These clinical affiliations start in the Winter term of U1, incorporate a summer semester of 12 weeks between U2 and U3 and finish with a winter block in U3.

Schedule of dates for the clinical placements for students entering the 2005-2006 Occupational Therapy Program:

<b>2005-2006</b>	<b>Winter Term</b> (March - April, 2006)	<b>OCC1-220</b>	<b>6 weeks</b>	<b>0 credits</b>
<b>2006-2007</b>	<b>Summer Term</b> (May - June, 2007 or June - July, 2007)	<b>OCC1-320</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2006-2007</b>	<b>Summer Term</b> (June - July, 2007 or July – Sept., 2007)	<b>OCC1-321</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2007-2008</b>	<b>Fall Term</b> (Nov.- Dec., 2007)	<b>OCC1-420</b>	<b>5 weeks</b>	<b>3 credits</b>
<b>2007-2008</b>	<b>Winter Term</b> (Jan. – Feb, 2008)	<b>OCC1 422</b>	<b>5 weeks</b>	<b>3 credits</b>

Fieldwork placements will be arranged with McGill affiliated facilities. At times, students may request fieldwork outside of the Montreal region (these regions may also include the US and overseas). The Occupational Therapy Program has developed specific guidelines pertaining to international and out-of-province placements.

Both traditional and role-emerging fieldwork placements will be used. The latter will consist of facilities/agencies/programs, which do not employ an Occupational Therapist directly on site. Supervision will be provided by Occupational Therapists who work in various settings, depending on the type of placement offered. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience.

### **Student Learning Objectives:**

1. To introduce the student to Occupational Therapy fieldwork
  - The student will identify and understand the role of OT in the specific setting
  - The student will begin the process of comparing the role of OT in his/her setting with other settings (using WebCT)
  - The student will understand his/her role within the setting and begin assuming the role of an OT
2. To allow the student to observe the clinical manifestations of physical and/or psychiatric conditions
  - The student will be expected to observe all aspects of OT interventions and communicate observations with supervisor
  - The student will be able to report his/her observations to peers, and other team members
3. To familiarize the student with assessments, interventions, treatment techniques, materials and equipment used in Occupational Therapy
  - The student will be able to perform a patient interview and share findings with supervisor
  - The student will observe and, where educational level permits, perform, under supervision, assessments, treatments and reporting procedures
4. To familiarize the student to data collection and synthesis of information
  - The student will begin process of synthesizing information gathered from interviews and assessments
  - The student will be able to write short and long term goals
  - The student will be able to plan activities for treatment and analyze the activities with accuracy



5. To give the student the opportunity to interact with patients, Occupational Therapists and other members of the health care team
  - The student will initiate contact with other professionals and share client issues
  - The student will understand the role of the interdisciplinary team
  - The student will demonstrate professionalism in all aspects of placement (time management, confidentiality, communication, reliability, decision-making)
  - The student will apply professional code of ethics to patient interactions
6. To give the student the opportunity to develop communication skills
  - The student will be able to share thoughts with supervisor in a clear manner
  - The student will be able to write simple notes
  - The student will be able to report client issues in team meetings with supervision
7. To give the student the opportunity for self-directed learning and professional development
  - The student will develop personal learning objectives and include these in CBFEE
  - The student will use various learning tools to facilitate the clinical learning
  - Where appropriate, the student will attend teaching rounds and in-service education in various fieldwork settings
  - The student will understand the concepts of feedback, critical learning, clinical reasoning as well as self-directed learning and understand the importance and the impact of these concepts in clinical practice.

**Course Content:** The exact nature of the interventions and the type of clientele seen during the placement will depend on the clinical setting where each student will be placed. Prior to the beginning of the placement, students will be informed in which setting they will be doing their placement and with which type of clientele and details will be specified by the clinical supervisor at the beginning of the placement. Many sites have completed the national site approval document (CGFE-OT) and students are expected to review this material in preparation for their clinical course. This documentation is kept in the office of the Administrative and Student Affairs Coordinator (OT and PT Clinical Education) Room D4.

**Course Materials:**

**Required texts:**

Bossers, A., Miller, L., Polatajko, H., and Hartley, M.,(2002). Competency Based Fieldwork Evaluation for Occupational Therapists. Albany: Delmar/Thomson Learning. All students must purchase this fieldwork text and give an original evaluation form to the Academic Coordinator of Clinical Education in Seminar #2.

Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999

This text is required for workshop participation and a reference for all five (5) Clinical Affiliation courses.

The Clinical affiliation seminars course pack will be provided, free of charge, at the first seminar. The Student Clinical Experience Booklet will be provided, free of charge, at the first seminar.

Additional readings that sites may assign.

**Suggested readings:**

Course materials from the previous semesters

Site approval document (CGFE-OT) on clinical settings available in the office of the Administrative and Student Affairs Coordinator (OT and PT Clinical Education), Room D4

**Other requisites:**

Computer and web access for the required WebCT component of the course

**Student Assignment and Evaluation:**

The **Competency Based Fieldwork Evaluation** (CBFE) is used to evaluate students' performance. The copyright 2002 is the only accepted version used for grading. Although each supervising therapist evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL.

It is mandatory for students to complete the **Student Clinical Experience Booklet** throughout the three-year Program. Following the completion of the final U3 clinical affiliation, students must bring their completed booklet to the Academic Coordinator of Clinical Education, Caroline Storr. Failure to complete the booklet and return it will result in delay of clinical marks and **may delay graduation**. Students are strongly encouraged to develop a **clinical portfolio** including the Student Clinical Experience Booklet, the CBFE evaluations of each placement, student's learning objectives for each placement as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements

Students are asked to post a minimum of two (2) messages on the WebCT bulletin board related to their clinical affiliation during each placement (describe the clinical setting, the OT role, case studies...)

Students may be expected to complete a project/assignment during their clinical affiliation (this will be determined in collaboration with the clinical educator)

**Special Requirements for Course Completion and Program Continuation:**

OCC1 220 Clinical Affiliation 1, is a PASS or FAIL course. Students who fail OCC1 220 Clinical Affiliation I, may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period. (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

If a Student fails OCC1 220 Clinical Affiliation 1, permission to complete OCC1 236 OT Practice I: Musculoskeletal Conditions Section B Integration Block must be granted by the Occupational Therapy Performance Review Committee (OTPRC)

**Supporting Students in Difficulty During Fieldwork:****a. Mid-term feedback from sites**

Student progress in clinical placements is monitored closely by the ACCE's through scheduled mid-term phone calls to supervisors. The calls allow us to obtain feedback on the student's performance as well as detect difficulties early in the fieldwork learning experience. This feedback mechanism is in place to ensure that students are provided with adequate counseling and assistance in order to optimize chances for a successful placement. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counseling and mentoring program is in place for all students regardless of whether they have been identified as having difficulties in their clinical courses or not. Students are encouraged to keep a portfolio of their clinical education evaluations, projects and learning objectives and to review these prior to each clinical course.

**b. Support for students in difficulty**

In situations where students are presenting with difficulties, sites are encouraged to contact us for discussion and problem solving and when necessary a visit is scheduled for a meeting to take place between the clinical supervisor, the student and the clinical coordinator from the university. This allows for effective communication between the parties and provides support for both the student and the clinical supervisor.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is required throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** It is mandatory for all students to complete all the placement hours. If a student is absent due to health reasons, the student must make up the time missed. Students should contact the ACCE in case of prolonged absence. If the supervisor is absent, he/she must arrange for the student's supervision by another therapist. If the supervisor is a sole/charge therapist, alternative arrangements are made between the ACCE and the supervisor.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**Consequences on not completing assignments as requested:**

Students may be refused to start the clinical affiliations if they do not complete the prerequisites.

**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.

**Safety:**

The student has the right to refuse to do an intervention if this poses a risk to the student's safety or health or if it poses a risk to a patient's safety or health.

## CLINICAL AFFILIATION SEMINARS

Prior to the first fieldwork affiliation, in Winter term, U1 students will participate in a series of seminars, which will cover topics related to Occupational Therapy fieldwork.

**Credits:** 0

**Prerequisites:** None

**Instructors:** Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)  
Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

### **Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561  
Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34, Tel: (514) 398-2772  
Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

### **Course Objective:**

To prepare students for their on-site clinical affiliation

**Course Structure:** The clinical affiliation seminars will be a total of nine (9) hours of compulsory lectures. Three (3) seminars of 1.5 hours will be provided in the fall semester followed by three seminars in the winter semester. The schedule of these seminars will be announced at the beginning of the fall semester.

### **Student Learning Objectives:**

1. To become familiar with first year clinical affiliation objectives (traditional fieldwork placements)
2. To apply the evaluation forms which assess the student's clinical performance and experience
3. To differentiate between the role of the student and that of the supervisor
4. To suggest methods for improving feedback effectiveness
5. To suggest several management approaches of difficult situations (e.g. with supervisor)
6. To apply principles of self-directed learning and use various learning tools
7. To become familiar with the different learning strategies and learning styles which affect performance in fieldwork

**Course Content:**

- Overview of clinical affiliations and prerequisites
- Responsibilities and learning styles
- Types of clinical affiliations: traditional, role-emerging placements, out-of-province and international placements (please refer to the descriptions provided in the next section)
- Learning objectives
- Learning strategies
- Clinical profile
- Evaluations
- Feedback
- Professional behaviour
- U3 student placement presentations

**Course Materials:**

Refer to course materials for Clinical Affiliation 1

**Special Requirements for Course Completion and Continuation:**

Minimum grade of 60%

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is required throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** Attendance during all clinical affiliation seminars is mandatory and is a prerequisite for starting the Clinical Affiliation 1.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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.

## TYPES OF CLINICAL AFFILIATIONS

### **I. TRADITIONAL PLACEMENTS**

Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. When students are placed in out-of-town facilities, travel and accommodation are the student's responsibility. Students are responsible to ensure that they purchase travel cancellation insurance in the event of unforeseen circumstances.

#### **A) QUEBEC PLACEMENTS:**

Students will be placed in McGill affiliated facilities in the greater Montreal area depending on availability, profile requirements and interest. Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical affiliations beyond the greater Montreal area in the province of Quebec to the ACCE. **Under no circumstances, should students attempt to contact sites independently.** Availability is dependent on other universities' clinical affiliation schedules.

#### **B) OUT-OF-PROVINCE PLACEMENTS:**

Students who are interested in doing their first clinical placement in another province may do so by following the application procedure as announced by the ACCE during the Fall of Term A. This will include a mandatory information meeting with the ACCE. The deadline to submit an application for an out-of-province placement for the Clinical Affiliation 1 will be approximately at the end of September 2005. Availability is subject to fluctuation and all students are strongly encouraged to develop fluency in both official languages in order to be able to complete some of the clinical affiliation courses in the Province of Quebec. There is an application fee for out-of-province placements (currently 55\$ per request, fee subject to change).

## **C) INTERNATIONAL PLACEMENTS**

### **Policy:**

### **Eligibility Criteria:**

1. To be considered for a placement outside Canada, students must be approved by the Academic Coordinator of Clinical Education (ACCE). Prior to making a recommendation, the ACCE will require the student to demonstrate the following criteria:
  - a) The student must have maintained a minimum academic standing of a GPA of 3.5 and have progressed through the Program with no conditions.
  - b) The student must maintain a B+ (75-79%) standing in each of their fieldwork placements prior to the international placement.
  - c) The student must demonstrate strong interpersonal skills, including tact and diplomacy, and well developed judgement skills as documented on previous performance evaluations [Competency Based Fieldwork Evaluation (CBFE )].
2. The student applying for an international placement shall agree to accept responsibility for:
  - a) Cost of medical coverage - (student already has access to some medical coverage, as a result of the fee paid to Student's Society)
  - b) Obtaining a visa - (this includes obtaining information from specific embassy/consulate re: requirements for specific student visa, letter from fieldwork coordinator and/or letter from facility attesting to the purpose of stay)
  - c) Accommodation - (at times, the ACCE/immediate fieldwork educator may be willing to assist in this area, but this cannot be counted on at all times; therefore the student is responsible for finding accommodation and assuming all costs. Often, embassies/consulates or tourism boards can help in this area.)
  - d) Travel - (confirmation of airplane tickets should only be carried out once the ACCE has confirmed the international placement). The student is responsible for all travel costs at all times. Travel arrangements cannot conflict with examination period. Cancellation insurance is strongly advised in the event of last minute changes
  - e) Cost of supervision in countries where there is a fee for supervision (at times this is encountered; if it does happen, the student must be prepared to pay this extra fee). This is not the responsibility of the University.



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

**Procedure:**

**NOTE:** All students will be given the guidelines for international placements during the Winter term of U1. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education (ACCE) at least one (1) year prior to the placement.

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

Exact date deadlines for international placement applications will be announced during the Winter term of U1.

The letter should state:

1. The country of desired destination, indicating an awareness of cultural, gender and social differences, and environment
2. Why the student would like to do an international placement in that country and what contributions they have to offer
3. The requested placement session for completing this experience

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

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

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

## **Restrictions:**

The student will be granted one (1) international placement per academic year, in U2 and U3 respectively, for a maximum of two (2) placements, with the following restrictions:

1. The countries chosen must be members of the World Federation of Occupational Therapy. The School reserves the right to approve the qualifications of the supervising therapist.
2. The School will develop a maximum of five (5) new international placements per year and the rest must be selected from the list of approved international placements.
3. The School reserves the right to limit the total number of international placements organized per year.
4. Students may apply for a maximum of two (2) international placements, overall, in the following combination:
  - a) one (1) in the US and one (1) overseas; or
  - b) two (2) in the US

\*Please note that some restrictions may apply to US placements for 2005-2006.

5. A second international placement may be undertaken only if the student has performed satisfactorily in the first international placement.
6. The first opportunity for a student to do an international placement will be in the summer clinical affiliation following U2 in Clinical Affiliation 3 (OCCI 321). This will be scheduled in either the second or third block of U2 summer clinical affiliations.
7. The international placement is contingent on maintaining academic and clinical standings prior to departure. Should these conditions not be met, the ACCE reserves the right to cancel the international placement and to reassign the student locally.

## **Responsibilities:**

### **Student:**

The student will:

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

2. The student will have accepted responsibility for the following:
  - a) Cost of medical coverage
  - b) Obtaining a visa
  - c) Accommodation
  - d) Travel
  - e) Cost of supervision in countries where there is a fee for supervision
  - f) Malpractice Insurance
  - g) Cost for any cancellation

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

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

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

Be responsible with permission of the ACCE for writing a letter to the field coordinator requesting placement in one (1) of their affiliated facilities.

3. Write a letter of introduction to the national Occupational Therapy association of the country or write to the coordinator of the school or facility requesting permission for a placement in which he/she wishes to complete his/her fieldwork. The following should be included in the letter:
  - a) permission has been granted from McGill University - Occupational Therapy Program to investigate the possibility of completing fieldwork in that country.
  - b) reasons for seeking fieldwork in that country.
  - c) dates and length of placement.
  - d) a request for a list of universities or facilities to contact for fieldwork opportunities.
4. Be responsible for timely fulfilment of all requirements necessary for entry into that country, i.e. student visa (if required), medical preparation (i.e. immunization/vaccination) and coverage, financial obligations [i.e. travel and accommodation arrangements, coverage of extra malpractice insurance (if required)].
5. Be knowledgeable in the language of origin of the country he/she has selected.

6. Provide the ACCE with copies of correspondence between student and facility offering the placement. The student should not call or write to the facility without prior permission from the ACCE.
7. Continue correspondence with the national Occupational Therapy association, university or facility to ensure requirements of the facility and McGill University - Occupational Therapy Fieldwork are met.
8. Begin fieldwork.
9. Agree to provide and complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements and ensure that the CBFs are completed at the Mid-Term and Final. At the end of the placement the student must submit a completed copy of the CBF to the ACCE in order to receive a grade.
10. In the event of last minute cancellations, the student must advise the site in writing.

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

### **Fieldwork Facility:**

The fieldwork facility will:

1. Provide the following information in writing, in order to meet the fieldwork site approval criteria:
  - a) documents required as per institution guidelines
  - b) an abbreviated résumé of the supervising therapist(s)

The above must be forwarded to:

Academic Coordinator of Clinical Education  
Occupational Therapy Program  
School of Physical & Occupational Therapy  
McGill University  
3654 Promenade Sir-William-Osler  
Montreal, Quebec  
Canada H3G 1Y5  
Telephone: (514) 398-6561 / Fax: (514) 398-6360

2. Ensure that the Coordinator of Occupational Therapy Services/Occupational Therapy Clinical Educator at the facility will agree to complete McGill University - School of Physical & Occupational Therapy Fieldwork Evaluation Forms.
3. Sign a cooperation agreement between McGill University and the facility, prior to the commencement of the clinical placement and define a contingency plan within the facility or another agency in case of cancellation of the rotation.
4. Commit to placement (specific dates to be determined and approved by both the ACCE and supervising Occupational Therapist) in writing.
5. Ensure that the Occupational Therapist who will be supervising the student will have knowledge of the English or French language (oral and written) in order to be able to communicate with the ACCE.

**Academic Coordinator of Clinical Education:**

The Academic Coordinator of Clinical Education (ACCE) will:

1. Review the student's application and will approve the request based on established eligibility criteria.
2. Request an abbreviated resume for the Occupational Therapy Department and the potential supervising therapist, including educational background and years of experience directly supervising students, if deemed necessary. Please note that in order to supervise a student, the therapist must have had at least one (1) year of clinical experience and must be certified/registered according to the standards of the host country.
3. Ensure that two (2) copies of an affiliation contract have been forwarded and returned, signed by the receiving facility, upon receipt of documentation fulfilling requirements of Occupational Therapy Fieldwork Education Site Approval Guidelines.
4. Forward to the facility:
  - a) a letter of confirmation for the placement
  - b) a copy of the affiliation agreement signed by all parties [student(s), facility and McGill University]
  - c) an outline of the curriculum
  - d) School of Physical & Occupational Therapy Course Guide(s)
  - e) expectations for student performance/fieldwork objectives
  - f) policies related to:
    - i. student assignments in clinical settings
    - ii. time loss
    - iii. failure during a placement
    - iv. Student Evaluation of Placement Form
5. Notify student to finalize travel and accommodation arrangements.

6. Provide resource material for supervisor (when necessary) which will be delivered by the student.
7. Initiate contact with facility via phone, fax or email at Midterm in order to obtain feedback re: progress in placement, as well as at the end of placement. Preference will be to provide email communication.
8. Write letter of appreciation to facility.

## INTERNATIONAL PLACEMENTS SCHEDULE

**Winter term (U1):** reminder to students of deadline for applying for international placements and orientation and introduction to international placements (hand out guidelines)

**Integration Block (U1):** deadline for initiating request for an international placement in U2

**Requests after this period will not be considered.**

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

## **II ROLE-EMERGING FIELDWORK PLACEMENTS**

These placements are available to U2 and U3 students. Further details on learning objectives and evaluation methods are found in the Occupational Therapy Course Guide, U2. Role responsibilities differ from the traditional role responsibilities listed below. Only interested students will be assigned to role-emerging placements.

### **FIELDWORK RESPONSIBILITIES**

#### **A) Clinical Supervising Therapist:**

1. To orient the student to the physical layout of the facility, to the Occupational Therapy Department/service (if applicable), to staff, patient case load and assessment/intervention orientation as well as available learning resources such as the library, ward rounds, etc.
2. To review the fieldwork information package sent by the ACCE in advance in order to plan for the fieldwork placement.
3. To review with the student the plan set out for the fieldwork placement, as well as clarify the student's expectations, preferably within two (2) working days of the student's arrival.
4. To develop learning opportunities commensurate with fieldwork objectives.
5. To provide students with ongoing feedback of their performance and provide suggestions for improving that performance if necessary.
6. To monitor student practice as necessary, depending on whether or not the student is inexperienced or experienced, by:
  - checking assessments the student proposes to use
  - checking proposed treatment programs
  - checking written reports
  - supervising student practice appropriate to the student's level of experience
  - being available for discussions with the students
7. To complete and present to the student a Mid-term and a Final evaluation, as fairly and objectively as possible, using the evaluation forms provided by the student. Students are expected to complete and revise their own learning objectives on the evaluation form as the placement progresses.
8. To return the completed evaluation to the ACCE within requested time lines. The evaluation must be signed with licensure #. Fieldwork educators must have a minimum of one (1) year's clinical experience.

## **B) Student:**

1. To behave professionally at all times, i.e., not only in respect to appearance, punctuality and acceptance of appropriate responsibility, but also in observation of professional ethics and the patient's right to confidentiality.
2. To strive to reach a satisfactory level of professional competence in assessment, program planning, treatment, personal learning objectives and report writing.
3. To be aware that each fieldwork placement is a gift for learning donated by the facility involved and that the primary function of each facility is to serve its clients or patients. It must be realized that facilities offering specific rotations are subject to last minute change.
4. To contact the clinical supervisor a minimum of **two (2) weeks** prior to the starting date of the placement by writing a letter of introduction to confirm time and place of arrival.
5. To email/fax the immediate supervisor's contact information to the ACCE during the first week of placement.
6. To complete facility evaluation forms and provide facilities with feedback on learning experience.

## **C) Academic Coordinator of Clinical Education (ACCE):**

1. To assist the development of facilities' clinical education programs and confirm availability prior to assigning students to a facility.
2. To develop students' clinical profile by assigning students to facilities.
3. To send pertinent course material to the facility prior to the student's arrival.
4. To contact facilities while the student is completing his/her fieldwork placement, so as to receive feedback and support learning and teaching, as well as answer any queries from the fieldwork educator.
5. To mark the evaluation forms upon their return to the School, and if needed, to inform facilities of the results of their evaluation of the student.
6. To ensure students fill out facility evaluation forms so that this information can be used to provide facilities with timely constructive feedback as needed.
7. To respond appropriately to concerns or requests made by a facility.



8. To provide ongoing support/training to fieldwork supervisors, both onsite and offsite.
9. To review each fieldwork placement with the student and if necessary, facilitate student in developing learning objectives for improved performance at the next placement.
10. To be available for counselling to students who are experiencing difficulties in their clinical placements and make site visits as needed.
11. To ensure that all fieldwork records are kept up-to -date.

## OCC1 235 OCCUPATION AS THERAPY

**Credits:** 3

**Prerequisites:** This course is a prerequisite to OCC1 220 (Clinical Affiliation 1) offered in U1, Winter term

**Instructors:** Cynthia Perlman, MEd (Coordinator)  
Susanne Mak, BSc (Co-coordinator)

### **Access to the Instructors:**

Cynthia Perlman, Hosmer 306, Tel: (514) 398-5593, Email: [cynthia.perlman@mcgill.ca](mailto:cynthia.perlman@mcgill.ca)  
By appointment.

Susanne Mak, Davis D34A, Tel: (514) 398-2772, Email: [susanne.mak@mail.mcgill.ca](mailto:susanne.mak@mail.mcgill.ca)

**Course Objective:** This is a foundational course introducing students to theoretical and clinical practice frameworks and models that will be used in all professional courses within the Program, thereby initiating the development of a professional identity as an Occupational Therapist.

### **Course Structure:**

One (1) two (2) hour lecture per week, and one (1) two (2) hour lab per week. Self-directed learning environments, including a web-based tutorial, are provided to allow for additional practice and feedback with lecture and lab material.

### **Student Learning Objectives:**

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

1. Define Occupational Therapy, occupational performance, and occupational science.
2. Explain the philosophies, definitions, frameworks and/or models of Occupational Therapy in relation to the concepts of health and function.
3. Experience a variety of purposeful activities and their impact on occupational performance needs.
4. Discriminate between the domains of the Traditional Analysis (TA) framework in order to apply a purposeful activity to meet occupational performance needs.
5. Relate the domains and sub-domains of two models of practice 1) Canadian Model of Occupational Performance (CMOP) and 2) Model of Human Occupation (MOHO).
6. Apply 'activity analysis' to the TA, CMOP, and MOHO, in terms of the individual and the environment.
7. Adapt or modify a purposeful activity (termed grading), in relation to a new content and context, to facilitate health and function.

**Course Content:**

- Introduction to the history and philosophies of Occupational Therapy
- Introduction to models of human occupation.
- Orientation to the analysis of a variety of occupational performance issues in the context of these models and/or frameworks.
- The adaptation and modification of these issues for therapeutic purposes will be studied.

**Course Materials:****Required texts:**

- CAOT (2002). *Enabling Occupation: An Occupational Therapy Perspective*. Revised edition. CAOT Publications ACE
- Selected readings for lecture and lab (Course Pack)

**Student Assignment and Evaluation:**

- Three (3) written assignments (10pts ea) 30%
- Final Examination 30%
- Project 30%
- Completion of all Web assignments 10%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

Advancement to the OCC1 220 Clinical Affiliation 1 is dependent on students successfully passing **OCC1 235 Occupation as Therapy** with a grade of C+ (60%) or better (see Clinical Affiliation Guidelines).

**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](http://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 lab and web tutorials is compulsory. Failing to attend three (3) laboratories without a written statement from a physician or other authority constitutes a failure of the course.

**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 objects of the course."

**Consequences of not completing assignments as requested:** All assignments must be completed in order to pass the course. Late submissions will result in a deduction of 10%.

**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.”

## OCC1 236 OT PRACTICE I: MUSCULOSKELETAL CONDITIONS

**Credits:** 4

**Instructors:** Sylvie Beaulieu, MSc (Co-coordinator)  
Bernadette Nedelec, PhD (Co-coordinator)  
Cynthia Perlman, MEd (Co-coordinator)

**Access to the Instructors:**

S. Beaulieu, Tel: (514) 398-5590, Email: [sylvie.beaulieu@mcgill.ca](mailto:sylvie.beaulieu@mcgill.ca)  
B. Nedelec, Tel: (514) 398-1275, Email: [bernadette.nedelec@mcgill.ca](mailto:bernadette.nedelec@mcgill.ca)  
C. Perlman, Tel: (514) 398-5593, Email: [cynthia.perlman@mcgill.ca](mailto:cynthia.perlman@mcgill.ca)

**Course Objective:** These lectures will cover the cellular composition of body tissues and their response to injury or disease processes that affect the musculoskeletal system.

The treatment of occupational performance issues, using the biomechanical approach, as it applies to musculoskeletal conditions will be discussed including the treatment of: vulnerable or injured structures, decreased strength, decreased PROM, oedema, sensory loss or hypersensitivity, impaired fine motor coordination, and decreased endurance. Emphasis will be placed on the analysis of the therapeutic value of activities prescribed. Optimization of performance using the rehabilitative approach will also be discussed as it applies to musculoskeletal conditions and illnesses.

Long and short term goal setting will be performed using a case-based approach, which requires the identification of occupational performance issues and the delineation of the components of the individual, occupation and the environment (physical, social and cultural) that are contributing to them. The formulation of realistic, understandable, measurable, behavioural and achievable short-term goals will be reinforced in the context of various musculoskeletal conditions and illnesses.

Clinical experts will review the basis for Occupational Therapy treatment of a variety of musculoskeletal conditions or illnesses and integrate the application of these treatment processes through case studies.

**Course Structure:**

This course is comprised of two (2) sections:

- Section A:** OT strategies applied to conditions of the musculoskeletal system
- Section B:** Integration Block

Section A includes a continuum of teaching styles ranging from didactic lecturing to active engagement in clinical practice skills. This format will facilitate the development of students' ability to integrate theory with clinical practice, demonstrate clinical reasoning within the educational setting and provide an environment where students can gradually develop self-directed learning behaviours. This course will include 12 hours a week for nine (9) weeks.

Section B is given as a combined course with Physical Therapy students in PHTH 236 Movement I: Musculoskeletal during an intensive three (3) week period. This opportunity for interprofessional education integrates and supports knowledge with evidence of assessment, goal setting and treatment of musculoskeletal disorders within case-based contexts. Client-centered and multidisciplinary team approaches using case management principles are emphasized.

**Student Learning Objectives:**

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

1. Describe the disorders of the musculoskeletal system, in terms of etiology, pathology and signs and symptoms of various musculoskeletal conditions.
2. Explain the structure of normal tissue in the musculoskeletal system, the basic pathological changes that occur and the impact on occupational performance.
3. Identify the basic actions and recognize the potential impact on therapeutic intervention of pharmaceutical agents used in the treatment of musculoskeletal conditions and illnesses.
4. Describe the principles involved in the biomechanical and rehabilitative approach and apply these principles to case studies across the lifespan.
5. Establish long and short term goals and a treatment plan for a given client for which the assessment results are known, using a case-based approach.
6. Discuss the role of Occupational Therapy and apply the occupational performance model for given case studies across the lifespan.
7. Use the clinical reasoning skills required to select and demonstrate meaningful and relevant activities, exercises and modalities to reduce or eliminate

occupational performance barriers for individuals with musculoskeletal injuries and illnesses.

8. Demonstrate the ability, both orally and in written form, to critically appraise the selection and performance of these treatment techniques.
9. Be able to explore possibilities for adaptations and modifications to the individual environment that will promote the client's attainment of their therapeutic goals.
10. Demonstrate the ability to perform detailed analysis of the therapeutic benefits of selected enabling and therapeutic activities as it applies to specific case studies of individuals with musculoskeletal injuries and illnesses.

**Course Content:**

To be handed out on the first day of class.

**Course Materials:**

Course Pack

McKee, P and Morgan, L. (1998). Orthotics in Rehabilitation: Splinting the Hand and Body. F. A. Davis Company, Philadelphia. **(Also required for OCC1-424 Splinting and Orthotics)**

Steinberg, G.G., Akins, C.M. and Baran, D.T. (1999). Orthopaedics in Primary Care, (3<sup>rd</sup> edition). Published by Lippincott, Williams and Wilkins.

Trombly, C. A and Radomski, M. V. (Ed.) (2002). Occupational Therapy for Physical Dysfunction, (5<sup>th</sup> edition). Baltimore, Williams & Wilkins. **(Also required for Assessment in Rehabilitation I POTH-239, OT section, OT Practice II: Neurological Conditions - Part I OCC1-335, OT Practice II: Neurological Conditions - Part II OCC1-336 and Strategies For Independent Living OCC1-339)**

**Reference texts:**

Course pack from Assessment in Rehabilitation I – Occupational Therapy section (POTH-239)

Salter, R.B. (1999) Textbook of Disorders and Injuries of the Musculoskeletal System (3<sup>rd</sup> edition) Baltimore, Maryland, Williams and Wilkins.

Sames, K (2005) Documenting Occupational Therapy Practice New York, Prentice Hall

Moore, K.L., and Dalley, A.F. (1999) Clinical Oriented Anatomy (4<sup>th</sup> edition), New York, Lippincott, Williams & Wilkins.

**Student Assignment and Evaluation:**

To be announced

Section A: 85%

Section B: 15%

**Special Requirements for Course Completion and Program Continuation:**

**OCC1 236 OT Practice I: Musculoskeletal Conditions** is subdivided into sections. Each section must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a section when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in each section, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake evaluation of the failed section before the next academic year. If the student obtains a grade of C+ (60%) or better in the failed section, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the section, the course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both sections or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both section evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**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](http://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, labs and learning activities.

**Attendance:** Students are required to attend all lectures and labs, including additional class formats.



**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 objects of the course.”

**Consequences of not completing assignments as requested:** A deduction of marks will be implemented for failure to adhere to the specific criteria of all evaluation measures.

**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.”

## OCC1 240 ASSESSMENT OF PERFORMANCE 1

**Credits:** 2

**Prerequisites:** None

**Instructors:** Sandra Everitt, MA (Coordinator)

**Access to the Instructor:**

Office: Davis 24, Tel: (514) 398-4495, Email: [sandra.everitt@mcgill.ca](mailto:sandra.everitt@mcgill.ca)

Office hours: Daily except Tuesdays

**Course Objective:**

To introduce students to the assessment of occupational performance as it applies to clients throughout the lifespan with musculoskeletal conditions and/or motor dysfunction.

**Course Structure:**

Four (4) hours per week for nine (9) weeks: two (2) hours lecture, two (2) hours laboratory. Instructor, student and self-directed learning.

**Student Learning Objectives:**

On completion of the course the student will:

1. Have an understanding of commonly used assessment tools related to occupational performance across the lifespan.
2. Be able to critically evaluate an assessment tool.
3. Be able to select an assessment tool that is appropriate to the client and consistent with a client-centered approach to therapy.

**Course Content:**

Course Topics:

Section A. INTRODUCTION TO ASSESSMENT

- Psychometric properties of assessments
- Purpose of assessment
- Selection of assessment instruments

Section B. ASSESSMENT OF MUSCULOSKELETAL CONDITIONS

- Assessment of back function
- Assessment of hand function
- Assessment of elbow and shoulder function

Section C.    ASSESSMENT OF MOTOR DEVELOPMENT IN CHILDREN

- Introduction to developmental assessment batteries
- Tests of motor proficiency and visual-motor integration

Section D.    ASSESSMENT OF TIME MANAGEMENT AND OCCUPATIONAL PERFORMANCE

- Client-completed checklists and questionnaires
- Interview scales

Section E.    ASSESSMENT OF ACTIVITIES OF DAILY LIVING / SELF CARE

- Assessment of functional independence
- Assessment of the environment
- Assessment of burden of care

Course Outline:

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

**Course Materials:**

**Required texts:**

Neistadt, M. E. (2000). Occupational therapy evaluation for adults: A pocket guide. Baltimore, Ma: Lippincott Williams & Wilkins.

Mulligan, Shelley. (2003). Occupational therapy evaluation for children: A pocket guide. Baltimore, Ma: Lippincott Williams & Wilkins.

Note: These texts will also be required for Assessment of Performance II.

**Computer access:**

Will be required to search literature for laboratory handout

**Student Assignment and Evaluation:**

Two (2) laboratory presentations and handouts: 20% each: total	40%
One (1) independent assessment and summary:	10%
Take - home examination:	50%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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:** Students may not miss more than 10% of laboratory classes without a valid reason (illness or family emergency). Failure to comply with this regulation may result in being refused permission to write the final examination.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Late submissions will be penalized 5% per day, including weekends.

**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 239 ASSESSMENT IN REHABILITATION I

**Credits:** 2

**Prerequisites:** None

**Instructors:** Sylvie Beaulieu, MSc (Co-coordinator)  
Cynthia Perlman, MEd (Co-coordinator)

### **Access to the Instructors:**

Sylvie Beaulieu, Hosmer 300c, Tel: (514) 398-5590, email: [sylvie.beaulieu@mcgill.ca](mailto:sylvie.beaulieu@mcgill.ca)  
Cynthia Perlman, Hosmer 306, Tel: (514) 398-5593, email: [cynthia.perlman@mcgill.ca](mailto:cynthia.perlman@mcgill.ca)

**Course Objective:** The Occupational Therapy student will build on knowledge and skills required for the assessment of clients with various disorders of the musculoskeletal system. Emphasis will be placed on practice of assessments and on the development of clinical reasoning skills in relation to case-based contexts.

**Course Structure:** This course includes a weekly one and a half (1 1/2) hour lecture and two (2) hour laboratory session. The course structure consists of small group work and both instructor-directed and student-directed learning experiences.

### **Student Learning Objectives:**

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

1. Understand the components of the International Classification Framework (ICF) in relation to a case-based context.
2. Chart an initial assessment according to Occupational Therapy practice guidelines, for clinical documentation, in relation to a case-based context.
3. Perform functional and physical assessments of the musculoskeletal system that address components of the individual, the occupation and the environment.
4. Perform an online literature search specific to assessments of the musculoskeletal system.
5. Identify the psychometric properties of an assessment including basic principles of reliability, validity and responsiveness.
6. Interpret the evidence of the clinical and psychometric performance of an assessment for appropriate decision making within a case-based context.
7. Demonstrate professional behaviours within simulated performances of assessment.

## **Course Materials:**

### **Required references:** *\*required in other course(s)*

Sames, K.A. (2005). Documenting Occupational Therapy Practice. Upper Saddle River: NJ. Pearson Prentice Hall.

Trombly, C.A. & Radomski, M.V. (2001) Occupational Therapy for Physical Dysfunction (5<sup>th</sup> edition). Lippincott Williams & Wilkins.

Law, S., Baptiste, S., Carswell, A., McColl, M.A., Polatajko, H. & Pollack, N. (1997). Canadian Occupational Performance Measure and Evaluation Forms. CAOT Publications ACE.

Assessment in Rehabilitation I (POTH-239) Course pack

\* Anatomy (ANAT-315) Course pack

### **Required material:**

Clinical Tools Kit (purchased in class during the first week, or acquired second hand)

Goniometers: 360°, 30 cm

180°, 15 cm

Finger

Tape measure

### **Student Assignment and Evaluation:**

Written assignments and / or tests: 50%

Practical final exam: 50%

Formative evaluations (non-graded) will be offered throughout the labs to prepare students for the final practical exam.

### **Special Requirements for Course Completion and Program Continuation:**

**POTH 239 Assessment in Rehabilitation I** is evaluated by both a theoretical and practical exam. Both the theoretical and practical exams must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a theoretical or a practical exam when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in the theoretical and practical exams, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake a second evaluation of the theoretical or practical exam before the next academic year. If the student obtains a grade of C+ (60%) or better in the theoretical and practical exams, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the theoretical and practical exams, the course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If the theoretical and practical

exams of the course are not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

If a student fails both the theoretical and practical evaluations or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both theoretical and practical evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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". If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If both the theoretical and practical evaluations of the course are not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**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](http://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:** Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

**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 objects of the course."

**Consequences of not completing assignments as requested:** A deduction of marks will be implemented for failure to adhere to the specific criteria of all evaluation measures.

An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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."

## IV. B.SC. OCCUPATIONAL THERAPY U2

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## **IV. B.Sc. OCCUPATIONAL THERAPY U2 CURRICULUM**

### **OVERALL COURSE STRUCTURE**

- Important Dates B.Sc. Occupational Therapy U2
- Curriculum Plan B.Sc. Occupational Therapy 2005-2006
- List of required courses for B.Sc. (OT) & B.Sc. (PT)

### **PROFESSIONAL COURSE DESCRIPTIONS**

#### **COMBINED PHYSICAL & OCCUPATIONAL THERAPY COURSE**

POTH 455 NEUROPHYSIOLOGY

#### **OCCUPATIONAL THERAPY**

OCC1 320 CLINICAL AFFILIATION 2

OCC1 321 CLINICAL AFFILIATION 3

OCC1 335 OT PRACTICE II: NEUROLOGICAL CONDITIONS – Part I

OCC1 336 OT PRACTICE II: NEUROLOGICAL CONDITIONS – Part II

OCC1 337 OT PRACTICE III: PSYCHIATRY

OCC1 338 OT PRACTICE IV: MENTAL HEALTH

OCC1 339 STRATEGIES FOR INDEPENDENT LIVING

OCC1 340 ASSESSMENT OF PERFORMANCE II

OCC1 341 ASSESSMENT OF PERFORMANCE III

## B.Sc. OCCUPATIONAL THERAPY U2 IMPORTANT DATES

FALL TERM:	Registration Period	Apr. 5 to Aug. 1, 2005
	Orientation	Aug. 31, 2005
	Lectures Begin	Sept. 1, 2005
	Labour Day	Sept. 5, 2005
	Course Change (drop/add period)	Apr. 5 to Sept. 13, 2005
	Thanksgiving Day	Oct. 10, 2005
	Last Day of Lectures	Dec. 2, 2005
	Examination Period	Dec. 5 to 20, 2005
	MOLE Evaluation Period	Nov. 17 to Dec. 4, 2005

WINTER TERM:	Lectures Begin	Jan. 3, 2006
	Course Change (drop/add period)	Apr. 5, 2004 to Jan. 17, 2006
	Midterm Break - three days	Feb. 20 to 24, 2006
	Easter	Apr. 14 to 17, 2006
	Last Day of Lectures	April 10, 2006
	Examination Period	April 11 to 28, 2006
	MOLE Evaluation Period	Mar. 23 to April 10, 2006

### SUMMER TERM: CLINICAL AFFILIATION 2 and III

- U2 – Two (2) six (6) Week Rotations taken during the following periods:
  - May 1 to Jun. 9, 2006  
(Holiday: Victoria Day - May 22, 2006)
  - Jun. 12 to Jul. 21, 2006  
(Holidays: Fête Nationale - Jun. 23, 2006)  
Canada Day – June 30, 2006)
  - Jul. 24 to Sept. 1, 2006

MOLE Evaluation Period TBA

## U2 CURRICULUM PLAN 2005-2006 OCCUPATIONAL THERAPY PROGRAM

### FALL TERM

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

### WINTER TERM

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

### SUMMER TERM

Clinical Affiliation 2 (6wks) + Clinical Affiliation 3 (6 wks) = Total 12 Wks

Academic Term	Exams	Academic Term	Exams	Clinical Affiliations	Clinical Affiliations	Clinical Affiliations
Sept. 1 to Dec. 2	Dec. 5 to 20	Jan. 3 to Apr.10	Apr. 11 to 28	May 1 to June 9	June 12 to July 21	July 24 to Sept. 1
ANAT-321 CIRCUITRY OF THE HUMAN BRAIN 3cr		OCC1-336 OT PRACTICE II: Neurological Conditions Part II 4cr		OCC1-320 Clinical Affiliation II 6cr	OCC1-320 Clinical Affiliation II 6cr	OCC1-321 Clinical Affiliation III 6cr
POTH-455 NEUROPHYSIOLOGY 3cr		OCC1-338 OT PRACTICE IV: Mental Health 3cr			<u>or</u>	
OCC1-335 OT PRACTICE II: Neurological Conditions Part I 2cr		OCC1-339 STRATEGIES FOR INDEPENDENT LIVIING 2cr			OCC1-321 Clinical Affiliation III 6cr	
OCC1-337 OT PRACTICE III: Psychiatry 3cr		OCC1-341 ASSESSMENT OF PERFORMANCE III 3cr			<u>or</u>	
OCC1-340 ASSESSMENT OF PERFORMANCE II 2cr		ARTS & SCIENCE COMPLEMENTARY COURSE 3cr				
ARTS & SCIENCE COMPLEMENTARY COURSE 3cr						

NOTE: ANAT = Anatomy  
PHGY = Physiology  
POTH = Occupational/Physical Therapy  
OCC1 = Occupational Therapy

## U2 PHYSICAL AND OCCUPATIONAL THERAPY LIST OF REQUIRED COURSES

**Fall Term**  
Sept. 1 to Dec. 2, 2005

**Winter Term**  
Jan. 3 to Apr. 10, 2006

**Clinical Affiliations**  
May 1 to Sept. 1, 2006

**Exam Period**  
Dec. 5 to 20, 2005

**Exam Period**  
Apr. 11 to 28, 2006

<b>2005-2006 OCCUPATIONAL THERAPY PROGRAM U2</b>		
Course Number	Course Name	Credits
<b>Combined Courses</b>		
ANAT-321	Circuitry of the Human Brain	3
POTH-455	Neurophysiology	3
<b>OT Courses Only</b>		
OCC1-335	OT Practice II: Neurological Conditions - Part I	2
OCC1-336	OT Practice II: Neurological Conditions - Part II	4
OCC1-337	OT Practice III: Psychiatry	3
OCC1-338	OT Practice IV: Mental Health	3
OCC1-339	Strategies for Independent Living	2
OCC1-340	Assessment of Performance II	2
OCC1-341	Assessment of Performance III	3
<i>Faculties of Arts of Science</i>	Arts & Science Complementary Course	3
<i>Faculties of Arts of Science</i>	Arts & Science Complementary Course	3
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 31</b>		
<b>OT Courses Only</b>		
OCC1-320	Clinical Affiliation 2	6
OCC1-321	Clinical Affiliation 3	6
<b>SUMMER TERMS – TOTAL CREDITS 12</b>		

<b>2005-2006 PHYSICAL THERAPY PROGRAM – U2</b>		
Course Number	Course Name	Credits
<b>Combined Courses</b>		
ANAT-321	Circuitry of the Human Brain	3
POTH-455	Neurophysiology	3
<b>PT Courses Only</b>		
PHTH-328	Biophysical Agents	2
PHTH-336	Movement II: Cardiorespiratory	3
PHTH-337	Movement III: Neuromuscular	3
PHTH-338	Movement IV: Neurological	4
PHTH-340	Exercise Physiology	3
<i>Faculties of Arts of Science</i>	Arts & Science Complementary Course	3
<i>Faculties of Arts of Science</i>	Arts & Science Complementary Course	3
<i>Faculties of Arts of Science</i>	Arts & Science Complementary Course	3
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 32</b>		
<b>PT Courses Only</b>		
PHTH-320	Clinical Affiliation 2	6
PHTH-321	Clinical Affiliation 3	6
<b>SUMMER TERM – TOTAL CREDITS 12</b>		

## POTH 455 NEUROPHYSIOLOGY

**Credits:** 3

**Prerequisites:** PHGY201 Human Physiology: Control Systems – 3 credits and  
PHGY202 Human Physiology: Body Functions – 3 credits

**Instructors:** Robert Dykes, PhD (Co-coordinator)  
Caryne Torkia, OT MSc candidate (Co-coordinator)  
Adriana Venturini, PT MSc (Co-coordinator)

### **Access to the Instructors:**

Robert Dykes: Hosmer 308, Office Hours: Fridays 14:30 to 17:30 and by appointment  
Telephone: (514) 398-5586  
Email: [robert.dykes@mcgill.ca](mailto:robert.dykes@mcgill.ca)

Caryne Torkia: Hosmer 303B, Office Hours: By appointment via email.  
Telephone: (514) 514-398-1021  
Email: [caryne.torkia@mcgill.ca](mailto:caryne.torkia@mcgill.ca)

Adriana Venturini: Hosmer 303, Office Hours: Tuesday and Thursday afternoon,  
Telephone: (514) 398-5541; 450-688-955, ext. 624  
Email: [adriana.venturini@mcgill.ca](mailto:adriana.venturini@mcgill.ca)

### **Course Objective:**

To provide the student with neurophysiological principles, concepts and mechanisms underlying normal and pathological functioning of the individual. These principles will be illustrated by reference to normal brain functions in animals and man as well as through illustrations of the effects of their disruption in diseases and other conditions that compromise the normal functioning of the nervous system. At the end of this course, the student will understand the function of major brain structures and will have learned signs and symptoms of a variety of neurological diseases.

### **Course Structure:**

Two (2) sessions per week totalling four (4) hours

Each week starting on Friday, the first session will consist of a lecture, while the second session will use case histories, student presentations and discussion questions to link neurophysiological principles and neurological conditions.

### Student Learning Objectives:

Upon completion of this course the students will be able to:

1. **Describe** neurophysiological concepts, principles and mechanisms underlying normal functioning and **explain** their relationships to normal and pathological functioning of the individual
2. **Identify** key components of the etiology, the epidemiology and the clinical characteristics of common neurological conditions associated with malfunctioning of brain structures and **appreciate** factors leading to a differential diagnosis.
3. **Identify** key components of the medical treatment and surgical interventions associated with common neurological conditions and **understand** the impact of such treatment on the functional outcome of clients.
4. **Organize** available information about the neurological conditions presented and **select** information that is potentially important in regard to their needs as future rehabilitation specialists.
5. **Recognize** the main impairments associated with common neurological conditions and **appreciate** how rehabilitation intervention can address the resulting disabilities.

### Course Content (by week):

Week	Date	Topics & Structure	Required readings
1	Sept 2 <sup>nd</sup> 12:00 – 14:00 Meakins McMed 521	Friday: Introduction  <b>1st hour: Presentation of</b>  1. teaching objectives and course philosophy  2. expectations for the student  3. learning environment and structure of the course and  4. how to get the most out of your study time using self-learning modules.  <b>2nd hour: Neurological methods, tools and the neurological exam</b>  Review of certain neurological diagnostic techniques. Explanation of the neurological exam.	<b>Course outline:</b> available as a  handout first class    <b>Course Pack:</b> <i>Greenberg et al.</i>

<p><b>2</b></p>	<p><b>Sept. 9<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p>14:00 – 15:00 (optional)</p> <p><b>Sept. 12<sup>th</sup></b> 13:30 – 15:30 group A room tba group B room tba</p>	<p><b>Friday: Overview of neuroembryology, CSF Production and Flow</b> <b>Conditions:</b> Hydrocephalus &amp; Spina bifida (Sign-up for Presentations and Discussion Questions)</p> <p>optional session: update on information literacy and searching skills by Health Sciences Librarian, L.Kloda</p> <p><b>Monday</b> → <b>Cases</b> related to hydrocephalus &amp; spina bifida → sample discussion question</p>	<p><b>Course Pack:</b> Sadler, T.W.</p> <p><i>Kandel, ER et al.</i> <i>Schneider, J.W et al.</i> <i>Perkin DG</i></p>
<p><b>3</b></p>	<p><b>Sept. 16<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Sept. 19<sup>th</sup></b> 13:30 – 15:30 group A room tba group B room tba</p>	<p><b>Friday: Blood Supply and Blood-Brain Barrier</b> <b>Conditions:</b> Cerebral Palsy, Encephalitis &amp; Meningitis</p> <p><b>Monday</b> → <b>QUIZ (30 min. material from Sept 2, 9, 12)</b> → <b>Cases</b> related to signs and symptoms</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Gold JT</i> <i>Pellegrino L et al.</i> <i>Greenberg et al.</i></p>
<p><b>4</b></p>	<p><b>Sept 23<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Sept 26<sup>th</sup></b> 1:30-2:30 room tba 2:30 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: The great neuromodulatory systems, the aging brain and the loss of neural functions</b> <b>Conditions:</b> Alzheimer’s disease, encephalopathies Feedback on the quiz</p> <p><b>Monday</b> → <b>Discussion questions</b> related to Alzheimer’s disease and dementia → <b>Case</b> related to treatment</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Gauthier S.</i> <i>Greenberg et al.</i></p>

<p><b>5</b></p>	<p><b>Sept. 30th</b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Oct 3rd</b> 1:30-2:30 room tba 2:30 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: Learning, memory and brain plasticity</b> <b>Conditions:</b> Autism, Dyslexia, Attention deficit/hyperactivity disorder</p> <p><b>Monday:</b> → <b>Discussion questions</b> related to etiology of autism and treatment of ADHD → <b>Case</b> related to signs and symptoms</p>	<p><b>Course Pack:</b> <i>Gordon, N.</i> <i>Anastopoulos, AD et al.</i> <i>Spencer, TJ</i> <i>Osterling, J. et al.</i></p>
<p><b>6</b></p>	<p><b>Oct 7th</b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Oct 10<sup>th</sup></b></p>	<p><b>Friday: Review of self-learning modules and conditions discussed to date</b></p> <p><b>Monday: Thanksgiving – No class</b></p>	
<p><b>7</b></p>	<p><b>Oct 14<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Oct. 17<sup>th</sup></b> 1:30-2:30 room tba 2:30 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: Brain mapping and functional localization</b> <b>Conditions:</b> CVA, Brain tumors &amp; Traumatic brain injury</p> <p><b>Monday:</b> → <b>Student presentations</b> related to signs and symptoms of stroke → <b>Case</b> about medical &amp; surgical treatments</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Wrinkler, P.A.</i> <i>Christiansen CJ et al</i></p>
<p><b>8</b></p>	<p><b>Oct. 21<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Oct. 24<sup>th</sup></b> 1:30-2:30 room tba 2:30 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: Spinal cord and the precursors of spasticity</b> <b>Conditions:</b> Spinal cord injury, tumors of the spinal cord &amp; conditions favoring spasticity.</p> <p><b>Monday:</b> → <b>Student presentations</b> related to signs and symptoms of stroke → <b>Case</b> related to signs and symptoms</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Bear, MF et al.</i></p> <p><i>Atrice, M.B.</i></p>



<p><b>9</b></p>	<p><b>Oct. 28th</b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Oct. 31st</b> 1:30- 2:00 room tba 2:00 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: Motor cortical and cerebellar pathways – The long motor pathways</b> <b>Conditions:</b> Cerebellar disorders (tremor, ataxia, movement accuracy)</p> <p><b>Monday:</b> → <b>Student presentation</b> related to signs &amp; symptoms of cerebellar disorders (<b>one</b> group for ½ hour) → <b>Case</b> related to signs and symptoms</p>	<p><b>Course Pack:</b> <i>Bear, MF et al.</i> <i>Melnick, ME</i></p>
<p><b>10</b></p>	<p><b>Nov. 4<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Nov.7<sup>th</sup></b> 1:30-3:00 room tba 3:00 to 3:30 group A room tba group B room tba</p>	<p><b>Friday: The extrapyramidal system</b> <b>Conditions:</b> Parkinsonism</p> <p><b>Monday</b> → <b>Student presentations</b> about signs &amp; symptoms, medical &amp; surgical treatments for Parkinsonism → <b>Case</b> related to signs and symptoms</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Sa, D.S.</i> <i>Unified Parkinson's Disease Rating Scale</i></p>
<p><b>11</b></p>	<p><b>Nov. 11<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Nov. 14th</b> 1:30-3:30 group A room tba group B room tba</p>	<p><b>Friday: The sensory systems &amp; cranial nerves</b> <b>Conditions:</b> Sensory deficits (deafferentations, peripheral nerve injuries)</p> <p><b>Monday:</b> → <b>Cases</b> related to signs and symptoms (review of self-learning modules)</p>	<p><b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Van Beek, AL et al.</i></p>
<p><b>12</b></p>	<p><b>Nov. 18th</b> 12:00 – 14:00 Meakins McMed 521</p> <p><b>Nov. 21st</b> 1:30-2:30 room tba 2:30 – 3:30 group A room tba group B room tba</p>	<p><b>Friday: Synaptic functions and nerve conduction</b> <b>Conditions:</b> Muscular dystrophy, Peripheral neuropathies, Guillain-Barré syndrome, ALS, Multiple Sclerosis, post-polio syndrome</p> <p><b>Monday:</b> → <b>Students presentations</b> regarding signs &amp; symptoms and clinical course of muscular dystrophy and Guillain-Barré syndrome → <b>Case</b> related to signs and symptoms, medical &amp; surgical treatments</p>	<p><b>Course Pack:</b> <i>Bear, MF et al.</i> <i>Hallum, A.</i> <i>Frankel, D.</i> <i>Sabin, T.</i></p>

13	<b>Nov. 25<sup>th</sup></b> 12:00 – 14:00 Meakins McMed 521  <b>Nov. 28<sup>th</sup></b> 1:30-3:30 room tba	<b>Friday: The pain pathways and theories of pain mechanisms</b> <b>Conditions:</b> Phantom limb pain & peripheral neuroma  <b>Monday:</b> → <b>Discussion</b> questions related to the etiology and treatment of phantom limb pain → <b>Students presentations</b> regarding signs & symptoms and clinical course of ALS & Multiple Sclerosis	<b>Course Pack:</b> <i>Kandel, ER et al.</i> <i>Wilson, PG</i> <b>Nolan, WB</b>
14	<b>Dec. 2nd</b> 12:00 – 14:00 Meakins McMed 521	<b>Friday:</b> Topic to be determined by instructors in consultation with students (1hr.)  <b>Review Session-</b> review self-learning modules (1hr.)	
15	<b>Dec. 5th</b> <b>Exam Week</b>	<b>FINAL EXAM</b>	

**Course Materials:**

**Required text:**

Course pack

**Strongly recommended:**

Bear, M.F., Connors, B.W. & Paradiso, M.A. (2001). Neuroscience: Exploring the Brain (2<sup>nd</sup> ed). Lippincott, Williams & Wilkins.

**Suggested reading:**

Kandel, E.R., Schwartz, J.H. & Jessel, T.M. (2000). Principles of Neuroscience (4<sup>th</sup> ed).

**Student Assignment and Evaluation:**

- Quiz 15%
- Final Exam 40%
- Assignments 45%
  - Discussion Questions: (20%)
  - Student Presentations: (25%)
    - Oral (10%)
    - Written (10%)
    - Peer Evaluation (5%)

**Special Requirements for Course Completion and Program Continuation:**

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

**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](http://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:** The instructors reserve the right to request attendance in classes where student participation is expected.

**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 objects of the course."

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and who does not have a university recognized reason for deferral will receive a 0 in that portion of the course. Assignments submitted late will receive a deduction of 2% per day, including week-ends.

**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."

## OCC1 320 CLINICAL AFFILIATION 2

## OCC1 321 CLINICAL AFFILIATION 3

**Credits:**           6     OCC1 320  
                      6     OCC1 321

### **Prerequisites:**

Successful completion of all U1 courses, including clinical affiliation requirements.

**CPR/First Aid:** Students are responsible for getting certified and renewing certification. A minimum of a level C, 12-hour course including adult, children and infants (e.g. with Red Cross, St-John's Ambulance, Bronze Medallion). Students are required to bring a proof of status to Croce Riggi, room D4.

**Immunization:** All students must ensure that their immunization records are complete and show supporting documentation to McGill Student Health Services. McGill Student Health Services maintains an active record list that may be requested by facilities. It is the student's responsibility to request these records from Health Services and bring them to each clinical placement.

**Clinical affiliation seminar:** All students must attend one (1) three (3) hour U2 clinical affiliation seminar.

### **Important:**

**Failure to complete the required prerequisites before the clinical placement may result in a student's non-admission to a clinical facility and subsequent inability to complete the clinical placement. This policy applies to all placements including international and out-of-province placements.**

**Instructors:**        Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)

Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

**Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34A, Tel: (514) 398-2772

Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

**Course Objective:** These courses are the second and third of five (5) clinical courses whereby students have the opportunity to integrate theoretical content with practice. Upon completion of the 5<sup>th</sup> clinical course, students are expected to have acquired entry-level clinical competence.

**Course Structure:** Clinical Affiliation commences in first year and continues at set intervals throughout the three years of the Program. The objectives for each fieldwork placement will vary, according to the student level. Each student will have the opportunity to develop clinical skills, clinical reasoning, and professional judgement, in a variety of settings. This includes preparatory seminars in first, second, and third year. By the end of the Program, each student will have completed five rotations, full-time. Each student is exposed to a variety of clientele (e.g. long-term care institutions, acute care hospitals, rehabilitation centres, CLSCs, etc.; infants, children, adolescents, adults, elderly).

The overall Program is made up of 105 credits of academic and clinical courses. The clinical affiliation courses are made up of over 1000 hours of clinical placement and have a value of 18 credits. These clinical affiliations start in the Winter term of U1, incorporate a summer semester of 12 weeks between U2 and U3 and finish with a winter block in U3.

Schedule of dates for the clinical placements for students entering the 2005-2006 Occupational Therapy Program:

**Students are advised that the Summer Semester of 2006 contains two (2) six (6) week placements. Statutory holidays include May 22, June 22 and June 30 as applicable.**

<b>2004-2005</b>	<b>Winter Term</b> (March - April, 2005)	<b>OCC1-220</b>	<b>6 weeks</b>	<b>0 credits</b>
<b>2005-2006</b>	<b>Summer Term</b> (May - June, 2006 or June - July, 2006)	<b>OCC1-320</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2005-2006</b>	<b>Summer Term</b> (June - July, 2006 or July – Sept., 2006)	<b>OCC1-321</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2006-2007</b>	<b>Fall Term</b> (Nov.- Dec., 2006)	<b>OCC1-420</b>	<b>5 weeks</b>	<b>3 credits</b>
<b>2006-2007</b>	<b>Winter Term</b> (Jan. – Feb, 2007)	<b>OCC1 422</b>	<b>5 weeks</b>	<b>3 credits</b>

Fieldwork placements will be arranged with McGill affiliated facilities. At times students may request fieldwork outside of the Montreal region (these regions may also include the US and overseas). The Occupational Therapy Program has developed specific guidelines pertaining to international and out-of-province placements.

Both traditional and role-emerging fieldwork placements will be used. The latter will consist of facilities/agencies/programs, which do not employ an Occupational Therapist directly on site. Supervision will be provided by Occupational Therapists who work in various settings, depending on the type of placement offered. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience.

### **Student Learning Objectives:**

1. To be able to explain the Occupational Therapist's role within the facility/agency/program
  - The student will be able to define the role of OT in the specific setting
  - The student will be able to compare the role of OT in his/her setting with other settings (using WebCT)
2. To apply theoretical concepts and gain experience in evaluating clients, establishing treatment goals, planning and implementing treatment, modifying treatment and presenting reports (written and oral)
  - The student will be involved in the whole OT intervention (process as per fieldwork) setting from assessment to treatment and client discharge and understand the specific OT role in each of these stages of client care
  - The student will critically assess patient change and modify care plan as appropriate
  - The student will refine clinical reasoning process by asking questions, finding answers and demonstrating competence in patient care
  - The student will demonstrate initiative, problem solving and clinical reasoning in all aspects of clinical practice
3. To continue to develop communication and professional interaction skills
  - The student will be able to give and receive feedback to peers, supervisor and other team members
  - The student will be able to complete client notes with some guidance
  - The student will demonstrate flexibility and adaptability with regards to client care
4. To develop the skills necessary to carry responsibility for caseloads close to that expected of a new graduate
  - The student will demonstrate competence in time management, setting priorities and arranging daily schedule with minimal level of supervision
  - The student will be accountable for his/her patients

5. The student will demonstrate abilities of self-directed learning and professional development in daily practice
- The student will identify and utilize all available learning resources (peers, other team members, WebCT, in-services) to achieve competence in placement and enhance learning
  - The student will develop personal learning objectives and include these in CBFE

**Course Content:** The exact nature of the interventions and the type of clientele seen during the placement will depend on the clinical setting where each student will be placed. Prior to the beginning of the placement, students will be informed in which setting they will be doing their placement and with which type of clientele and details will be specified by the clinical supervisor at the beginning of the placement. Many sites have completed the national site approval document (CGFE-OT) and students are expected to review this material in preparation for their clinical course.

**Course Materials:**

**Required texts:**

Bossers, A., Miller, L., Polatajko, H., and Hartley, M.,(2002). Competency Based Fieldwork Evaluation for Occupational Therapists. Albany: Delmar/Thomson Learning.

Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999

This text is required for workshop participation and a reference for all five clinical affiliation courses.

The Student Clinical Experience Booklet.

Additional readings that sites may assign.

**Suggested readings:**

Course materials from the previous semesters

Site approval document (CGFE-OT) on clinical settings available in the office of the Administrative and Student Affairs Coordinator (OT and PT Clinical Education) (D4)

**Other requisites:**

Computer and web access for the required Web-CT component of the course

**Student Assignment and Evaluation:**

The **Competency Based Fieldwork Evaluation** (CBFE) is used to evaluate students' performance. The copyright 2002 is the only accepted version used for grading.

Although each supervising therapist evaluates students' performance, it is the ACCE who assigns the final grade of PASS, WEAK PASS or FAIL.

It is mandatory for students to complete the **Student Clinical Experience Booklet** throughout the three-year Program. Following the completion of the final U3 clinical affiliation, students must bring their completed booklet to the Academic Coordinator of Clinical Education (ACCE), Caroline Storr. Failure to complete the booklet and return it will result in delay of clinical marks and **may delay graduation**. Students are strongly encouraged to develop a **clinical portfolio** including the Student Clinical Experience Booklet, the CBEFE evaluations of each placement, student's learning objectives for each placement as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are asked to post a minimum of two (2) messages on the WebCT bulletin board related to their clinical affiliation during each placement (describe the clinical setting, the OT role, case studies...)

Students may be expected to complete a project/assignment during their clinical affiliation (this will be determined in collaboration with the clinical educator).

### **Special Requirements for Course Completion and Program Continuation:**

**OCC1 320 Clinical Affiliation 2**, is a PASS or FAIL course. Students who fail OCC1 320 Clinical Affiliation 2 may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period. (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**OCC1 321 Clinical Affiliation 3**, is a PASS or FAIL course. Students who fail OCC1 321 Clinical Affiliation 3, may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period. (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

Students are reminded that, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to a delay in the completion of the Program.

### **Supporting Students in Difficulty During Fieldwork:**

#### a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCE's through scheduled mid-term phone calls to supervisors. The calls allow us to obtain feedback on the student's performance as well as detect difficulties early in the fieldwork learning



experience. This feedback mechanism is in place to ensure that students are provided with adequate counseling and assistance in order to optimize chances for a successful placement. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counseling and mentoring program is in place for all students regardless of whether they have been identified as having difficulties in their clinical courses or not. Students are encouraged to keep a portfolio of their clinical education evaluations, projects and learning objectives and to review these prior to each clinical course.

b. Support for students in difficulty

In situations where students are presenting with difficulties, sites are encouraged to contact us for discussion and problem solving and when necessary a visit is scheduled for a meeting to take place between the clinical supervisor, the student and the clinical coordinator from the university. This allows for effective communication between the parties and provides support for both the student and the clinical supervisor.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is required throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** It is mandatory for all students to complete all the placement hours. If a student is absent due to health reasons, the student must make up the time missed. Students should contact the ACCE in case of prolonged absence. If the supervisor is absent, he/she must arrange for the student's supervision by another therapist. If the supervisor is a sole/charge therapist, alternative arrangements are made between the ACCE and the supervisor.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**Consequences on not completing assignments as requested:** Students may be refused to start the clinical affiliations if they do not complete the prerequisites.

**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.

**Safety:** The student has the right to refuse to do an intervention if this poses a risk to the student's safety or health or if it poses a risk to a patient's safety or health.

## CLINICAL AFFILIATION SEMINARS

Prior to the U2 clinical affiliations in the Summer term, U2 Occupational Therapy students will participate in a seminar that will cover issues related to Occupational Therapy fieldwork.

**Credits:** 0

**Prerequisites:** None

**Instructors:** Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)  
Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

**Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34A, Tel: (514) 398-2772

Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

**Course Objective:**

To prepare students for their onsite clinical affiliation

**Course Structure:**

One (1) three (3) hour seminar will be provided (schedule to be announced in the Winter term).

**Student Learning Objectives:**

1. To become familiar with U2 clinical affiliation objectives (traditional and non-traditional fieldwork placements)
2. To suggest methods of improving general communication skills
3. To reflect on ethical issues he/she may be faced with
4. To reinforce the use of WebCT as a tool for cooperative peer learning
5. To further develop skills of self-directed learning by planning student learning objectives

**Course Content:**

- review clinical profile
- role-emerging placements: objectives and evaluation (please refer to the types of clinical affiliations descriptions provided in the next section)
- existing and emerging roles of Occupational Therapists
- ethical dilemmas
- review objectives and competencies of level 2 placements

**Course Materials:**

Refer to course materials for OCC1 320 Clinical Affiliation 2 and OCC1 321 Clinical Affiliation 3.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** Attendance during all clinical affiliation seminars is mandatory and is a prerequisite for starting OCC1 320 Clinical Affiliation 2 and OCC1 321 Clinical Affiliation 3.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**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.

## TYPES OF CLINICAL AFFILIATIONS

### **I. TRADITIONAL PLACEMENTS**

Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. When students are placed in out-of-town facilities, travel and accommodation are the student's responsibility. Students are responsible to ensure that they purchase travel cancellation insurance in the event of unforeseen circumstances.

#### **A) QUEBEC PLACEMENTS:**

Students will be placed in McGill affiliated facilities in the greater Montreal area depending on availability, profile requirements and interest. Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical affiliations beyond the greater Montreal area in the province of Quebec to the ACCE. **Under no circumstances, should students attempt to contact sites independently.** Availability is dependent on other universities' clinical affiliation schedules.

#### **B) OUT-OF-PROVINCE PLACEMENTS:**

Students who are interested in doing their first clinical placement in another province may do so by following the application procedure as announced by the ACCE during the Fall term. This will include a mandatory information meeting with the ACCE. Availability is subject to fluctuation and all students are strongly encouraged to develop fluency in both official languages in order to be able to complete some of the clinical affiliation courses in the province of Quebec. There is an application fee for out-of-province placements (currently 55\$ per request, fee subject to change).

### **Deadlines for Out-of-Province Placements in U2 or U3**

Approximate deadline to submit completed request form for U2 placement in May/June, June/July or July/August 2006	End of November 2005 (exact date to be confirmed)
Approximate deadline to submit completed request form for a U3 placement in Nov/Dec 2006	End of April 2006 (exact date to be confirmed)
Approximate deadline to submit completed request form for a U3 placement in Jan/Feb 2007	End of September 2006 (exact date to be confirmed)

### **C) INTERNATIONAL PLACEMENTS**

#### **Policy:**

#### **Eligibility Criteria:**

1. To be considered for a placement outside Canada, students must be approved by the Academic Coordinator of Clinical Education (ACCE). Prior to making a recommendation, the ACCE will require the student to demonstrate the following criteria:
  - a) The student must have maintained a minimum academic standing of a GPA of 3.5 and have progressed through the Program with no conditions.
  - b) The student must maintain a B+ (75-79%) standing in each of their fieldwork placements prior to the international placement.
  - c) The student must demonstrate strong interpersonal skills, including tact and diplomacy, and well developed judgement skills as documented on previous performance evaluations [Competency Based Fieldwork Evaluation (CBFE)].
2. The student applying for an international placement shall agree to accept responsibility for:
  - a) Cost of medical coverage - (student already has access to some medical coverage, as a result of the fee paid to Student's Society)
  - b) Obtaining a visa - (this includes obtaining information from specific embassy/consulate re: requirements for specific student visa, letter from fieldwork coordinator and/or letter from facility attesting to the purpose of stay)

- c) Accommodation - (at times, the ACCE/immediate fieldwork educator may be willing to assist in this area, but this cannot be counted on at all times, therefore the student is responsible for finding accommodation and assuming all costs. Often, embassies/consulates or tourism boards can help in this area)
- d) Travel - (confirmation of airplane tickets should only be carried out once the ACCE has confirmed the international placement). The student is responsible for all travel costs at all times. Travel arrangements cannot conflict with examination period. Cancellation insurance is strongly advised in the event of last minute changes
- e) Cost of supervision in countries where there is a fee for supervision (at times this is encountered; if it does happen, the student must be prepared to pay this extra fee). This is not the responsibility of the University.
- f) Malpractice Insurance - (each student has coverage for contingent malpractice insurance; at times, this insurance is not considered sufficient by certain facilities; if that is the case, the student is responsible for the payment of any extra insurance coverage requested by the facility).

**Procedure:**

**NOTE:** All students will be given the guidelines for international placements during the Winter Term of first year. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education at least one year prior to the placement.

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

Exact date deadlines for international placement applications will be announced during the Winter Term of first year.

The letter should state:

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

International placements are a privilege and are subject to the approval of the ACCE/Occupational Therapy Faculty. The student shall obtain a letter of reference from one fieldwork educator and one faculty member to support the application to

participate in an out-of-country placement. These letters of reference must be forwarded directly to Academic Coordinator of Clinical Education (ACCE).

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

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

### **Restrictions:**

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

1. The countries chosen must be members of the World Federation of Occupational Therapy. The School reserves the right to approve the qualifications of the supervising therapist.
2. The School will develop a maximum of five new international placements per year and the rest must be selected from the list of approved international placements.
3. The School reserves the right to limit the total number of international placements organized per year.
4. Students may apply for a maximum of two international placements, overall, in the following combination:
  - a) one in the US\* and one overseas; or
  - b) two in the US\*

\*Please note that some restrictions may apply to US placements for 2005-2006.

5. A second international placement may be undertaken only if the student has performed satisfactorily in the first international placement.
6. The first opportunity for a student to do an international placement will be in the summer clinical affiliation following U2 in Clinical Affiliation 3 (OCCI 321). This will be scheduled in either the second or third block of U2 summer clinical affiliations.
7. The international placement is contingent on maintaining academic and clinical standings prior to departure. Should these conditions not be met, the ACCE reserves the right to cancel the international placement and to reassign the student locally.



## **Responsibilities:**

### **Student:**

The student will:

1. Commit to the placement through a letter of intent outlining the request
2. The student will have accepted responsibility for the following:
  - a) Cost of medical coverage
  - b) Obtaining a visa
  - c) Accommodation
  - d) Travel
  - e) Cost of supervision in countries where there is a fee for supervision
  - f) Malpractice Insurance
  - g) Cost for any cancellation

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

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

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

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

3. Write a letter of introduction to the National Occupational Therapy Association of the country or write to the coordinator of the school or facility requesting permission for a placement in which he/she wishes to complete his/her fieldwork. The following should be included in the letter:
  - a) permission has been granted from McGill University - Occupational Therapy Program to investigate the possibility of completing fieldwork in that country.
  - b) reasons for seeking fieldwork in that country.
  - c) dates and length of placement.
  - d) a request for a list of universities or facilities to contact for fieldwork opportunities.

4. Be responsible for timely fulfilment of all requirements necessary for entry into that country, i.e. student visa (if required), medical preparation (i.e. immunization/vaccination) and coverage, financial obligations [i.e. travel and accommodations arrangements, coverage of extra malpractice insurance (if required)].
5. Be knowledgeable in the language of origin of the country he/she has selected.
6. Provide the ACCE with copies of correspondence between student and facility offering the placement. The student should not call or write to the facility without prior permission from the ACCE.
7. Continue correspondence with the national occupational therapy association, university or facility to ensure requirements of the facility and McGill University - Occupational Therapy Fieldwork are met.
8. Begin fieldwork.
9. Agree to provide and complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements and ensure that the CBE are completed at the Mid-Term and Final. At the end of the placement the student must submit a completed copy of the CBE to the ACCE in order to receive a grade.
10. In the event of last minute cancellations, the student must advise the site in writing.

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

### **Fieldwork Facility:**

The fieldwork facility will:

1. Provide the following information in writing, in order to meet the fieldwork site approval criteria:
  - a) Documents required as per institution guidelines
  - b) An abbreviated resume of the supervising therapist(s)

The above must be forwarded to:  
Academic Coordinator of Clinical Education  
Occupational Therapy Program  
School of Physical & Occupational Therapy  
McGill University  
3654 Promenade Sir-William-Osler  
Montreal, Quebec

Canada H3G 1Y5

Telephone: (514) 398-6561 / Fax: (514) 398-6360

2. Ensure that the Coordinator of Occupational Therapy Services/Occupational Therapy Clinical Educator at the facility will agree to complete McGill University - School of Physical & Occupational Therapy Fieldwork Evaluation Forms.
3. Sign a cooperation agreement between McGill University and the Facility, prior to the commencement of the clinical placement and define a contingency plan within the facility or another agency in case of cancellation of the rotation.
4. Commit to placement (specific dates to be determined and approved by both the ACCE and supervising Occupational Therapist) in writing.
5. Ensure that the Occupational Therapist who will be supervising the student will have knowledge of the English or French language (oral and written) in order to be able to communicate with the ACCE.

#### **Academic Coordinator of Clinical Education:**

The Academic Coordinator of Clinical Education (ACCE) will:

1. Review the student's application and will approve the request based on established eligibility criteria.
2. Request an abbreviated resume for the Occupational Therapy Department and the potential supervising therapist, including educational background and years of experience directly supervising students. Please note that in order to supervise a student, the therapist must have had at least one year of clinical experience and must be certified/registered according to the standards of the host country.
3. Ensure that two copies of an affiliation contract have been forwarded and returned signed by the receiving facility, upon receipt of documentation fulfilling requirements of Occupational Therapy Fieldwork Education Site Approval Guidelines.
4. Forward to the facility:
  - a) a letter of confirmation for the placement
  - b) a copy of the affiliation agreement signed by all parties [student(s), facility and McGill University]
  - c) an outline of the curriculum
  - d) School of Physical & Occupational Therapy Course Guide(s)
  - e) expectations for student performance/fieldwork objectives
  - f) policies related to:
    - i. Student assignments in clinical settings
    - ii. Time loss
    - iii. Failure during a placement
    - iv. Student Evaluation of Placement Form
5. notify student to finalize travel and accommodation arrangements.

6. provide resource material for supervisor (when necessary) which will be delivered by the student.
7. initiate contact with facility via phone, fax or email at mid-term in order to obtain feedback re: progress in placement, as well as at the end of placement. Preference will be to provide email communication.
8. write letter of appreciation to facility.

## INTERNATIONAL PLACEMENTS SCHEDULE

**Winter term (U1):** reminder to students of deadline for applying for international placements and orientation and introduction to International Placements (hand out guidelines)

**Integration Block (U1):** deadline for initiating request for an international placement in U2

**Requests after this period will not be considered**

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

## **II ROLE-EMERGING FIELDWORK PLACEMENTS**

### **Introduction:**

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

### **Philosophy of the Occupational Therapy Program at McGill University:**

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

### **New Trends in Occupational Therapy Roles:**

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

### **The promotion of health and prevention of illness and disability orientation of the Health Care System in Quebec:**

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

### **General Purpose of this Placement:**

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into non-traditional settings
- to produce a therapist more skilful in program development
- to gain experience in identifying clients'/agency needs
- to become familiar with the socio-cultural environment of the client(s)
- to gain experience in resourcefulness – physical, human and financial
- to assess program needs
- to provide staff with an increased understanding of the role of Occupational Therapy within the community
- to produce a therapist who will be able to relate to both lay and professional people interested in health services

### **Structure and Organization:**

Five (5) or six (6) weeks full-time placement (the second U2 placement, OCC1 321 Clinical Affiliation 3 will consist of six (6) weeks and a U3 placement will consist of five (5) weeks). Each agency/program will receive at least two (2) students at the same time to encourage peer teaching and learning. Each group of students will be

supervised by an Occupational Therapy faculty member or an Occupational Therapist working in the community (from now on this person will be referred to as an off-site supervisor).

### **Student Learning Objectives:**

By the end of the placement, the student will have:

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

### **Supervision:**

Each group of students will be supervised by an off-site supervisor (member of the OEQ) for an average of one (1) one-half (½) day/week. The supervision will be based on a consultative model; the supervisor will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site supervisor will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite supervisor will be used as a 'sounding board' for new ideas/concepts, as well as for new approaches to problem-solving. The students will be required to keep a journal to assist them with the reflection process as well as to use it as a planning tool for the supervisory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site supervisor.

### **Student Evaluation:**

The same evaluation tool (CBFE) and process will be followed as per traditional placements. A learning contract will be utilized, in order to establish learning objectives and how they will be achieved (resources, strategies and evaluating outcomes). As well, the agency/program will provide feedback to the off-site supervisor at the end of the placement, so that pertinent information concerning student's performance can be considered. The student must also complete the Student Clinical Experience Booklet as for a traditional placement. Students are expected to review and refer to role responsibilities as outlined in the red role-emerging booklet provided free of charge to all students completing a role-emerging placement.

### **Plan of Action:**

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

- determining the Occupational Therapy scope of practice within the agency/program (e.g. in a school setting, the scope of practice would be that of a consultant to the teaching staff)
- identifying the clientele/agency needs (e.g. identifying children with developmental delays)
- analysing the identified needs and prioritizing them, in order to determine how they will be met (e.g. targeting only first grade children from low income families; the need

will be met by developing a screening clinic). Each student will present a plan of action to the off-site supervisor and the contact person of the agency/program by the end of the first week of the placement, or at the latest, at the beginning of the second week.

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

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

### **Journal Entries:**

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

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

Closing comments for the journal (daily):

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

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

### **References:**

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

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

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

## **FIELDWORK RESPONSIBILITIES**

### **A) Clinical Supervising Therapist:**

1. To orient the student to the physical layout of the facility, to the Occupational Therapy Department/service (if applicable), to staff, patient case load and assessment/intervention orientation as well as available learning resources such as the library, ward rounds, etc.
2. To review the fieldwork information package sent by the ACCE before the student's arrival in order to plan for the fieldwork placement.
3. To review with the student the plan set out for the fieldwork placement, as well as clarify the student's expectations, preferably within two working days of the student's arrival.
4. To provide the student with learning opportunities commensurate with fieldwork objectives.
5. To provide students with ongoing feedback of their performance and provide suggestions for improving that performance if necessary.
6. To monitor student practice as necessary, depending on whether or not the student is inexperienced or experienced, by:
  - checking assessments the student proposes to use
  - checking proposed treatment programs
  - checking written reports
  - supervising student practice appropriate to the student's level of experience
  - being available for discussions with the students
7. To complete and present to the student a Mid-Term and a Final evaluation, as fairly and objectively as possible, using the evaluation forms provided by the student. Students are expected to complete and revise their own learning objectives on the evaluation form as the placement progresses.
8. To return the completed evaluation to the ACCE within requested time lines. The evaluation must be signed with licensure #. Fieldwork educators must have a minimum of 1 year's clinical experience.

### **B) Student:**

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



2. To strive to reach a satisfactory level of professional competence in assessment, program planning, treatment, and report writing.
3. To be aware that each fieldwork placement is a gift for learning donated by the facility involved and that the primary function of each facility is to serve its clients or patients. It must be realized that facilities offering specific rotations are subject to last minute change.
4. To contact the clinical supervisor a minimum of **two weeks** prior to the starting date of the placement by writing a letter of introduction to confirm time and place of arrival.
5. To email/fax the immediate supervisor's contact information to the ACCE during the first week of placement.
6. To complete facility evaluation forms and provide facilities with feedback on learning experience.

**C) Academic Coordinator of Clinical Education (ACCE):**

1. To assist the development of facilities' clinical education program and confirm availability prior to assigning students to a facility.
2. To develop students' clinical profile by assigning students to facilities.
3. To send pertinent course material to the facility prior to the student's arrival.
4. To contact facilities while the student is completing his/her fieldwork placement, so as to receive feedback and support learning and teaching, as well as answer any queries from the fieldwork educator.
5. To mark the evaluation forms upon their return to the School, and if needed, to inform facilities of the results of their evaluation of the student.
6. To ensure students fill out facility evaluation forms so that this information can be used to provide facilities with timely constructive feedback as needed.
7. To respond appropriately to concerns or requests made by a facility.
8. To provide ongoing support/training to fieldwork supervisors, both onsite and offsite.
9. To review each fieldwork placement with the student and if necessary, facilitate student in developing learning objectives for improved performance at the next placement.
10. To be available for counselling to students who are experiencing difficulties in their clinical placements and make site visits as needed.
11. To ensure that all fieldwork records are kept up-to-date.

**OCC1 335 OT PRACTICE II: NEUROLOGICAL CONDITIONS - PART I**  
**OT Applied to Neurological Conditions**  
**Section A: Conditions**  
**Section B: OT Applied**

**Credits:** 2

**Prerequisites:** Successful completion of all U1 courses, including clinical affiliation requirements

**Instructors:** Line Parent, BSc (Course coordinator)  
Sandra Everitt, MA

**Access to the Instructors:**

Line Parent: Office: Montreal Children's Hospital, Tel: (514) 412-4400 (ext. 22110)

Email: [line.parent@muhc.mcgill.ca](mailto:line.parent@muhc.mcgill.ca)

Sandra Everitt, Davis House, Room D24, Tel: (514) 398-4495

**Course Objectives:** This course will review the unique Occupational Therapy role for evaluating and treating various neurological conditions with pediatric, adult and geriatric population.

**Course Structure:**

This course is divided in two (2) sections:

**Section A:** two (2) hours per week: lecture/lab

**Section B:** four (4) hours of lecture/lab per week

**Student Learning Objectives:**

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

1. Describe the etiology, pathology, and signs and symptoms of common diseases;
2. Outline the medical and/or surgical approach to treatment of the above diseases;
3. Appreciate the role of the Occupational Therapist in pediatric, adult, and geriatric settings;
4. Formulate a problem list from assessment results and develop treatment objectives (short-term and long-term goals) based on problem list;
5. Describe the principle of OT treatment (i.e. neurodevelopmental, sensory-integration, motor learning, Brunnstrom, task-oriented, biomechanical, rehabilitative);
6. Recognize and describe abnormal motor and perceptual/cognitive skills, and determine the underlying components of these skills;
7. Develop strategies based on assessment results, treatment goals, and treatment approaches;
8. Utilize a client-centered approach in the treatment of neurological patients of all ages;

9. Utilize a self-directed learning approach.
10. Describe the impact of neurological conditions on occupational performance.

**Course Content:**

DATE	TOPIC	TEXT READINGS	COURSE PACK
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**Treatment Principles and Approaches**

Thurs. Sept 1 <sup>st</sup>	From Assessment to Treatment: Impairments & From assessment to disabilities, formulation of goals	C-S: p.2-5, 246-264	√
Thurs. Sept 8	Reflexes & the Development of Postural Control	C-S: p. 266-279	√
Mon. Sept 12	Atypical Motor Development	C-S: p.279-281	√
Thurs. Sept 15	Treatment Approaches 2 ( NDT, Motor Learning, Sensory Integration)	C-S: p. 51-67 p. 361-376	√
Mon. Sept 19	Treatment Approaches 1 (Brunnstrom, Task-Oriented, Biomechanical, Rehabilitative)	T: p.12-14	√

**Treatment: Focus on Motor Performance**

Thurs. Sept 22	Facilitory/Inhibitory Treatment Techniques	(Recommended: Umphred: ch.6)	√
Mon. Sept 26	Treat of Hypertonia (patient demonstration)		√
Thurs. Sept 29	Treatment Hypotonia (patient demonstration)		√
Mon. Oct 3	Treatment of Musculoskeletal Disorders (patient demonstration)		√
Thurs. Oct 6	Pediatric Case: Development of Treatment Plan		√
Thurs. Oct 13	Treatment Strategies in Adults and Geriatrics	T: p. 521-560	√
Mon. Oct 17	Treatment Strategies in Adults and Geriatrics	T: ch. 21 & 22	√
Thurs. Oct 20	Treatment Strategies in Adults and Geriatrics	T: ch. 22 & p. 631-634	√
Mon. Oct 24	QUIZ		√

## Treatment Focus on Cognition, Perception and Sensation

Thurs. Oct 27	Perception & Cognitive Impairments: Treatment Principles (concept)	Zoltan: Definition of impairment in ch. 1, 3-10	
Mon. Oct 31	Perception & Cognitive Impairments : Treatment Principles (adult/geriatrics)	Zoltan: treatment in ch. 3-10	√
Thurs. Nov 3	Perception & Cognitive Impairments : Problem & Solutions (adult/geriatrics)	Zoltan: Treatment in ch. 3-10	√
Mon. Nov 7	Perception & Cognitive Impairments: Problem & Solution (Peads)	C-S: p.861	
Thurs. Nov 10	Visual Impairments: Treatment Implication	C-S: p.788-797, 804-806	√
Mon. Nov 14	Auditory Impairments: Treatment Implications	C-S: p.780-788, 800-803.	
Thurs. Nov 17	Somatosensory & Proprioceptive Impairments: Treatment Implications	C-S: 329-377 T: ch. 27	√
Mon. Nov 21	Hand Dysfunction & Treatment	C-S: ch. 11 T: ch. 27	√
Thurs. Nov. 24	Presentation of cases at Lethbridge and Lindsay Rehabilitation Centres		
Mon. Nov 28	Preparation of Case Presentations		
Thurs. Dec 1	<b><u>Group Oral Presentation</u></b>		
Mon. Dec 5	<b><u>No Class</u></b>		

C-S = Case-Smith et al. OT for Children, 2001

T = Trombly OT for Physical Dysfunction, 2002

Umphred = Neurological Rehabilitation, 1995

### **Course Materials:**

1. OT for Children: J. Case-Smith et al., 2001. (Recommended)  
Can be purchased at McGill bookstore or borrowed at McGill Medical Library
2. OT for Physical Dysfunction: Trombly, 2002.(Recommended)  
Can be purchased at McGill bookstore or borrowed at McGill Medical Library
3. Vision, Perception and Cognition: A manual for the Evaluation and Treatment of the Neurologically Impaired Adult: Barbara Zoltan, 3<sup>rd</sup> ed., 1996. (Suggested reading).  
Can be purchased at McGill bookstore or borrowed at McGill Library.
4. Course Pack. (Recommended).  
Can be purchased at McGill School of Physical and Occupational Therapy (Eastman System) at the beginning of the semester.

**Student Assignment and Evaluation:**

In class quiz	50 %
Group oral case presentation	50 %

**Special Requirements for Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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. Shorts and T-shirts for all laboratory classes.

**Attendance:** Students are expected to attend all lectures and are required to attend all student presentations. Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

**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 objects of the course."

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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."

## OCC1 336 OT PRACTICE II: NEUROLOGICAL CONDITIONS - PART II

**Credits:** 4

**Prerequisites:** OCC1 335 OT Practice II: Neurological Conditions – Part I

**Instructors:** Isabelle Gélinas, PhD (Co-coordinator)  
Annette Majnemer, PhD (Co-coordinator)

### **Access to the Instructors:**

Office Hours by appointment.

Isabelle Gélinas, Davis House 37, Telephone: (514) 398-4514,

Email: [isabelle.gelinas@mcgill.ca](mailto:isabelle.gelinas@mcgill.ca)

Annette Majnemer: Davis House 31, Telephone: (514) 398-4515,

Email: [annette.majnemer@mcgill.ca](mailto:annette.majnemer@mcgill.ca)

**Course Objective:** This is a required course for U2 Occupational Therapy students. It is designed to address the complexity of the Occupational Therapy assessment and treatment of clients with disorders of the nervous system across the lifespan.

**Course Structure:** The course will be in a four (4) hour lecture/lab form per week where students will be expected to attend classes prepared, actively engage in group discussions and critically evaluate topics discussed and literature reviewed. The instructors will use lectures, readings, discussions, presentations, critiques and self-directed exercises.

### **Student Learning Objectives:**

The student will be able to:

1. Recognize unique roles and arenas of Occupational Therapy practice within paediatric, adult and geriatric neurological conditions;
2. Apply theoretical frameworks and treatment approaches covered in Fall term, to cases and problems presented in this course;
3. Promote competence in occupational performance domains across the lifespan;
4. Utilize a client-centered approach in the treatment of neurological patients of all ages;
5. Be cognizant of the OT's role in specialized areas (e.g. neonatal intensive care units) and with special populations (e.g. spinal cord injury);
6. Be sensitive to the parent's/family's concerns as well as the ethical considerations involved in working with patients and their families;
7. Utilize a self-directed learning approach.

**Course Materials:**

1. *OT For Children*: J Case-Smith et al, 4th ed., 2000 (C-S)
2. *OT For Physical Dysfunction*: Trombly, 5th ed., 2002 (T)
3. Course Pack

**Student Assignment and Evaluation:**

In class quiz (1)	20%
In class assignments (2)	40%
Final exam	40%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the course of the semester. The assignments that require a group presentation or lab work will be evaluated on presentation and professionalism both with respect to style and dress code. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

**Attendance:** Attendance in classes is mandatory. It is the responsibility of each student to attend classes prepared and be actively involved in his/her learning experience. Although attendance will not be taken, the materials covered in class are subject to evaluation.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Assignments not completed on time will be penalized accordingly. In the event that an assignment cannot be submitted on its due date, students are encouraged to inform the instructor as soon as possible.

**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."

## OCC1 337 OT PRACTICE III: PSYCHIATRY

**Credits:** 3

**Prerequisites:** Successful completion of all U1 courses, including clinical affiliation requirements

**Instructor:** **Section A and Section B:** Nadine Larivière, MSc

**Access to the Instructor:**

**Sections A and B:** Nadine Larivière, Hosmer 203 by appointment.

Tel: (514) 251-4015, ext. 3546. Email [nadine.lariviere@mcgill.ca](mailto:nadine.lariviere@mcgill.ca)

**Course Objective:**

On completion of the course, the student will:

1. Recognize the signs and symptoms, functional impact, and treatment approaches of the most common psychiatric conditions encountered by Occupational Therapists.
2. Begin to apply tools of practice and interventions involved in the OT therapeutic process in psychiatry.

**Course Structure:** This course will consist of two (2) lectures/week, two (2) hours each, for the entire term. The format will include lectures, case presentations and class discussions.

**Section A: Psychiatric Conditions** will include:

**Student Learning Objectives:**

Upon attending and participating in the lecture component of Section A, the student will:

1. Define the terminology used to describe mental illness;
2. Understand the current North American classification system of psychiatric conditions, the DSM;
3. Distinguish the signs and symptoms of the most common psychiatric disorders Occupational Therapists are involved with, in a lifespan perspective;
4. Recognize the theories of etiology underlying these conditions;
5. Identify the functional consequences related to these conditions;
6. Be familiar with different medical, psychotherapeutic and rehabilitative treatment approaches currently used in psychiatric settings.



**Section B: Occupational Therapy as Applied in Psychiatry** will include:

**Student Learning Objectives:**

Upon attending and participating in the lectures of this section, the student will:

1. Recognize the organization of mental health services from the past to the present.
2. Recognize the role of Occupational Therapists in a mental health care team.
3. Apply basic interviewing and counselling skills in a psychosocial practice.
4. Explain how the Occupational Therapy evaluation and intervention process can be applied to psychiatric conditions, in a lifespan perspective.

**Course Content (by week based on 13 weeks):**

**Section A: Psychiatric Conditions**

**Topics:**

- Week 1. Phenomenology: 1) introduction to signs and symptoms of abnormal human psychology; 2) mental status examination and 3) introduction to DSM-IV.
- Weeks 2 and 3. Schizophrenia and other psychotic disorders: presentation of epidemiology, diagnosis, etiology, functional impact and current treatment
- Weeks 3 and 4. Mood Disorders: presentation of epidemiology, etiology, diagnosis, functional impact and treatment of major depression and bipolar disorder.
- Weeks 5 and 6. Anxiety disorders: presentation of epidemiology, etiology, diagnosis, functional impact and treatment of panic disorder, phobias, obsessive-compulsive disorder and post-traumatic stress disorder.
- Weeks 7. Somatoform disorders: presentation of epidemiology, etiology, diagnosis, functional impact and treatment of somatization, conversion, hypochondriasis.
- Weeks 8, 9,10. Personality disorders: 1) discussion of the basic premises underlying the concept of personality; 2) presentation of etiology, diagnosis, functional impact and treatment of the main personality disorders in DSM IV.
- Week 11. Addictive disorders: presentation of epidemiology, etiology, diagnosis, functional impact and treatment of alcoholism, drug abuse (current popular drugs) and gambling.
- Week 12. Child and adolescent psychiatry: presentation of epidemiology, etiology, diagnosis, functional impact and treatment of the most common psychiatric conditions in this population.

## **Section B: Occupational Therapy as Applied in Psychiatry:**

### **Topics:**

- History of psychiatry
- Counselling: The therapeutic use of self
- Key elements of an OT psychosocial assessment
- Therapeutic use of activities
- The practice of psychosocial Occupational Therapy with different populations: guest lecturers

### **Course Materials:**

### **Required texts:**

#### **Section A: Psychiatric Conditions**

Sadock, B.J. & Sadock, V.A (2003). Kaplan and Sadock's Synopsis of Psychiatry/Behavioral Sciences/Clinical Psychiatry. (9<sup>th</sup> ed.). Baltimore : Lippincott Williams & Wilkins (available at the McGill Bookstore)

#### **Section B: Occupational Therapy as Applied in Psychiatry**

Stein, F. & Cutler, S.K. (2002). Psychosocial Occupational Therapy: A Holistic Approach (available at the McGill Bookstore)

**Student Assignment and Evaluation:** Detailed information on the evaluation process will be distributed during the first week of class.

#### **Section A: Psychiatric Conditions**

35%

- Final examination – 2 hrs; multiple choice questions based on lectures and readings

#### **Section B: Occupational Therapy as Applied in Psychiatry**

65%

- 2 Assignments: 10%
- 1 Case Study 20%
- Final Examination-2 hrs; 35%  
short answer and essay questions based on lectures and readings

### **Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

### **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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the course of the semester. The assignments that require a group presentation or lab work will be evaluated on presentation and professionalism both with respect to style and dress code. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

**Attendance:** Students are expected to attend all lectures and are required to attend all student presentations.

**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 objects of the course."

**Consequences of not completing assignments as requested:** All class assignments must be submitted and successfully completed to pass this course.

**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."

## OCC1 338 OT PRACTICE IV: MENTAL HEALTH

**Credits:** 3

**Prerequisites:** Successful completion of all U1 courses, including clinical affiliation requirements

**Instructors:**       **Section 1:** Nadine Lariviere, MSc  
                              **Section 2:** Beverlea Tallant, PhD, O.T. (C) (Coordinator)

### **Access to the Instructors:**

By appointment.

Nadine Larivière, Hosmer 203 Tel: (514) 251-4015, ext. 3546,

Email : [nadine.lariviere@mcgill.ca](mailto:nadine.lariviere@mcgill.ca)

Beverlea Tallant, Hosmer 205, Tel: (514) 398-4522

Email: [beverlea.tallant@mcgill.ca](mailto:beverlea.tallant@mcgill.ca)

### **Course Objectives:**

On completion of the course, the student will:

1. have acquired the skills and knowledge necessary to use groups and projective techniques in a therapeutic manner with clients with psychosocial needs.
2. gain some self-awareness and personal growth due to participation/observation in the group and projective process in the lab experiences.
3. become aware of the professional behaviours essential for the therapeutic use of groups and projective techniques with clients with psychosocial needs.

**Course Structure:** This course will consist of two (2) hour lectures and two (2) hour laboratory sessions weekly for the entire term.

**Section 1: Group Dynamics** will include the theories of group dynamics and practical application of groups in the practice of Occupational Therapy.

### **Student Learning Objectives (Section 1):**

Upon attending and participating in the lecture component of Section 1, the student will:

1. Compare and contrast the advantages and disadvantages of using groups in a therapeutic setting, particularly for clients with psychosocial needs.
2. Discuss group process and group content.
3. Describe theories on group development and discriminate the stages of group development.

4. Compare and contrast three (3) common group leadership styles.
5. Describe group observation techniques and explain their use.
6. Summarize the process of designing a therapeutic group, in particular for clients with psychosocial needs.

Upon completion of the lab component of Section 1, the student will:

1. Design, co-lead, and analyze the content and process of a therapeutic group.
2. Identify and explain normal behaviour in a group.
3. Begin to apply effective and empathetic interpersonal and communication skills in a group setting.
4. Demonstrate professional ethics and attitudes as well as the acceptance of the responsibilities of being a group leader.

**Section 2: Therapeutic Use of Projective Techniques** will include the theory of projection and the therapeutic use of projective media for treating individuals or groups of clients with psychosocial needs across the lifespan.

### **Student Learning Objectives (Section 2):**

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

1. define and discuss the theory of projection and its relevance to treatment;
2. define and discuss the psychotherapeutic process involved in using projective media with individual patients, groups and families with psychosocial issues;
3. discuss the development of therapeutic themes for individual patients, groups and families with psychosocial issues;
4. design treatment programs in Occupational Therapy selecting the appropriate projective media, themes and therapeutic environment for individuals and/or groups of patients and families with psychosocial needs.

On completion of the lab component of Section 2, the student should be able to:

1. discuss and select the therapeutic use of projective media for individual patients, groups and families who have psychosocial needs.
2. discuss ways of grading, presenting, and/or adapting the projective media.
3. understand, through participation as a group member and/or observer, the therapeutic use of projective activities.
4. demonstrate the professional behaviours of autonomy, competence, confidentiality, integrity, self-regulation and teamwork.

**Course Content :** A detailed course outline for each section of the course will be distributed the first day of class.

## **Course Materials:**

### **Section 1: Group Dynamics**

#### **Required texts:**

1. Posthuma, B. (2002). *Small groups in counselling and therapy: Process and leadership*, 3<sup>rd</sup> ed. Toronto: Allyn & Bacon.
2. Dimock, H.G. (1993) *How to observe your group*, 3<sup>rd</sup> ed. North York: Captus Press Inc.
3. Sadock, B.J., & Sadock, V.A. (2003). Kaplan and Sadock's Synopsis of Psychiatry, (9th edition). Baltimore: Lippincott Williams & Wilkins.
4. Stein, F. & Cutler, S.K. (2002). *Psychosocial Occupational Therapy: A Holistic Approach*. Albany: Delmar.

#### **Recommended texts:**

Cole, M.B. (1998). *Group dynamics in occupational therapy: The theoretical basis and practice application of group treatment*, 2<sup>nd</sup> ed. Thorofare: Slack.

Howe, M.C. & Schwartzberg, S.L. (2001). *A functional approach to group work in occupational therapy*, 3<sup>rd</sup> ed. New York: Lippincott, Williams & Wilkins.

Leary, S. (1994). *Activities for personal growth*. London: MacLennan and Petty.

Remocker, A.J., Storch, E.T. (1970) *Actions Speak Louder – A Handbook of Nonverbal Group Techniques*. London: Churchill-Livingstone

#### **Required supplies:**

##### **Section 1: VHS videotape**

During the lab sessions, students will co-lead (in pairs) one group. This group will be videotaped to assist students in learning to analyse group content and process.

**Students must supply their own videocassette.**

##### **Section 2: Therapeutic Use of Projective Techniques**

#### **Required text:**

Course Pack – a detailed reading list related to the course topics will be included.

**Recommended texts:**

Cole, M. B. (1998). Group dynamics in occupational therapy : The theoretical basis and practice application of group treatment, 2<sup>nd</sup> ed., Thorofare, NJ: SLACK.

Leary, S.(1994). Activities for personal growth. MacLennan & Petty, London.

Rabin, A. and Haworth, M. (1971). Projective techniques with children, Grune and Stratton, Inc., 4th Printing.

Remocker, A.J., Storch, E.T. (1970) Actions Speak Louder – A Handbook of Nonverbal Group Techniques. London: Churchill-Livingstone

**Student Assignment and Evaluation:****Section 1 Group Dynamics: 60%**

Detailed information on the evaluation process will be distributed during the first week of class.

- **Group Project: 35%**
- **Assignment: 5%**
- **Final examination: 20%** - 2 hrs; short answer questions based on lectures, readings and labs

**Section 2 Therapeutic Use of Projective Techniques: 40%**

Detailed information on the evaluation process will be distributed during the first week of class.

- **Final examination – 2 hrs;** short answer and essay problem-solving questions based on lectures, readings, and labs – **35%**
- **Reflective Journals – 5%**

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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:** Students are expected to attend all lectures and are required to attend all student presentations. Students are expected to attend **ALL labs**. Attendance will be taken and unwarranted absences will be penalized. Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** All class assignments must be submitted and successfully completed to pass this course.

**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.”



## OCC1 339 STRATEGIES FOR INDEPENDENT LIVING

**Credits:** 2

**Prerequisites:** Successful completion all U1 courses including clinical affiliation requirements

**Instructors:** Cynthia Perlman, MEd (Coordinator)

### **Access to the Instructor:**

Cynthia Perlman, Hosmer 306, Tel: (514) 398-5593, Email: [cynthia.perlman@mcgill.ca](mailto:cynthia.perlman@mcgill.ca)

**Course Objective:** This course includes a continuum of instructional methods including didactic lectures, practical application and collaborative engagement in clinical problem solving skills. This format will facilitate the integration of prior knowledge of theory and assessment of the person, occupation and environment.

**Course Structure:** This course will consist of weekly two (2) hour lecture and two (2) hour laboratory sessions for 13 weeks.

### **Student Learning Objectives:**

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

1. Assess functional capacity of an elderly client within his/her environment and determine needs for self-care.
2. Assess functional feeding skills, develop a treatment plan and strategies of intervention, across the lifespan.
3. Assess wheelchair and adaptive equipment needs.
4. Appraise architectural/environmental accessibility, determine barriers and suggest changes to meet occupational performance needs of a client.
5. Understand the principals of skin care and determine action to prevent pressure sores.
6. Apply principles of mobility and transfers to client care.

### **Course Content:**

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

## **Course Materials:**

### **Required texts:**

- Trombly, C. (Ed.) (2002). *Occupational Therapy for Physical Dysfunction*, (5<sup>th</sup> edition). Philadelphia, Lippincott, Williams & Wilkins.
- Selected Readings (workbook)

### **Student Assignment and Evaluation:**

- Written Final Examination 35%
- Architectural Accessibility Project 35%
- Two written Assignments 30%

### **Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

### **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](http://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:** Students are required to attend all lectures and labs.

**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 objects of the course."

**Consequences of not completing assignments as requested:** A deduction of marks will be implemented for failure to adhere to the specific criteria of all evaluation measures.

**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."

## OCC1 340 ASSESSMENT OF PERFORMANCE II

**Credits:** 2

**Prerequisites:** OCC1 240 Assessment of Performance I

**Instructors:** Sandra Everitt, MA

### **Access to the Instructor:**

Office: Davis 24, Tel: (514) 398-4495, E-mail: [sandra.everitt@mcgill.ca](mailto:sandra.everitt@mcgill.ca)

Office hours: Daily except Tuesdays

### **Course Objective:**

To introduce students to the assessment of occupational performance as it relates to clients throughout the lifespan with neurological, cognitive, psychological and neuropsychological conditions.

### **Course Structure:**

Four (4) hours per week for 13 weeks: two (2) hours lecture, two (2) hours laboratory. Instructor, student and self-directed learning.

### **Student Learning Outcomes:**

On completion of the course the student will:

1. Be able to analyse commonly used assessment tools related to occupational performance in the areas of neurological, neuromotor, cognitive, psychological and neuropsychological abilities.
2. Be able to critically evaluate a complex assessment battery.
3. Be able to select an appropriate assessment tool that is consistent with a client-centered approach to therapy.
4. Be able to demonstrate clinical reasoning in the selection, administration and interpretation of assessments and to formulate appropriate, client-centered treatment goals that are derived from the findings.

### **Course Content:**

#### Course Topics:

- Section A.      INFORMED DECISION-MAKING IN OCCUPATIONAL ASSESSMENT
- Introduction
  - Critical analysis of assessment tools
  - Selection of assessment instruments
  - Ethical considerations

Section B.        ASSESSMENT OF NEUROMOTOR PERFORMANCE

- Introduction
- General principles of neuromotor evaluation
- Assessment tools related to neuromotor performance
- Observation and evaluation of neurological signs

Section C.        ASSESSMENT OF COGNITIVE PERFORMANCE

- Introduction
- Assessment of cognitive function
- Neuropsychological assessment

Section D.        ASSESSMENT OF PSYCHOLOGICAL PERFORMANCE

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

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

**Course Materials:**

**Required texts:**

Neistadt, M. E. (2000). Occupational therapy evaluation for adults: A pocket guide. Baltimore, Ma: Lippincott Williams & Wilkins.  
- available at McGill Bookstore

Mulligan, Shelley. (2003). Occupational therapy evaluation for children: A pocket guide. Baltimore, Ma: Lippincott Williams & Wilkins.  
- available at McGill Bookstore

**Reference text:**

Law, M., Baum, C.,and Dunn, W. (2001). Measuring occupational performance: Supporting best practice in occupational therapy. Thorofare, NJ: Slack.  
- on reserve at McIntyre library

Computer access: web access will be required to search literature for laboratory handouts.

**Student Assignment and Evaluation:**

Two laboratory presentations and hand-outs:	20% each:	total	40%
One independent assessment and summary:			10%
Take - home examination:			50%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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:** Students may not miss more than 10% of laboratory classes without a valid reason (illness or family emergency). Failure to comply with this regulation may result in being refused permission to write the final examination.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Late submissions will be penalized 5% per day, including weekends.

**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 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."

## OCC1 341 ASSESSMENT OF PERFORMANCE III

**Credits:** 3

**Prerequisites:** Successful completion of all U1 courses, including clinical affiliation requirements

**Instructors:** Beverlea Tallant, PhD, O.T. (C) (Coordinator)  
Barbara Mazer, PhD

**Access to the Instructors:**

B. Tallant Hosmer H205, by appointment. Tel: (514) 398-4522,

Email: [beverlea.tallant@mcgill.ca](mailto:beverlea.tallant@mcgill.ca)

B. Mazer, Tel : (450) 688-9550, extension 526.

Email : [barbara.mazer@mcgill.ca](mailto:barbara.mazer@mcgill.ca)

**Course Objective:**

A theoretical and practical course to cover specialized assessment of psychological performance, social interactions, activities of daily living and the environment. Computerized assessments will be utilized.

**Course Structure:**

**Section 1: Projective assessments**

Section 1 will consist of a two (2) hour lecture for the first half of the term and a two (2) hour weekly laboratory session. This section will focus on the use of projective assessments as a measure of psychosocial performance across the lifespan.

**Section 2: Advanced and computerized assessment of daily living performance, environmental factors and quality of life**

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

**Student Learning Objectives:**

**Overall Objectives:** On completion of the course the student should:

1. Be aware of the role of subjective assessments in the clinical management of the Occupational Therapy client.
2. Be aware of the impact of quality of life on the Occupational Therapy client.
3. Be aware of research issues in relation to assessment in Occupational Therapy.

4. Be aware of the professional behaviours essential to the administration and reporting of the results of measurements of psychosocial and cognitive performance.
5. Be aware of the issues related to using computerized assessment tools in rehabilitation.

**Student Learning Objectives: Section 1: Projective assessments:** On completion of this section the student will be expected to:

1. Define and discuss the theory of projection and its relevance to assessment.
2. Analyse patients' productions and associations.
3. Select, administer and interpret projective assessments used in Occupational Therapy to assess psychosocial performance.
4. Assess and interpret a series of patient productions for purposes of change detection.
5. Discuss and compare projective assessments and their relative merits for specific psychiatric, neurological, and/or clients with psychological reactions to illness or disability, etc.
6. Demonstrate the professional behaviours of autonomy, competence, confidentiality, integrity, self-regulation and teamwork.

**Student Learning Objectives: Section 2: Advanced and computerized assessment of daily living performance, environmental factors and quality of life:** On completion of this section the student will be expected to:

1. Discuss and compare computerized assessments and their relative merits for different client populations, e.g., physical disability, neurological, psychiatric, etc..
2. Formulate and apply assessment plans to client cases.
3. Select appropriate Quality of Life Scales for different client populations, e.g., physical disability, neurological, psychiatric, etc.
4. Select and be aware of the methods of administration and interpretation of selected assessments of performance and instrumental activities of daily living.
5. Demonstrate the professional behaviours of autonomy, competence, confidentiality, integrity, and self-regulation.

**Course Content:** Detailed information on the course content for each section will be distributed during the first week of class.

### **Course Materials:**

#### **Section 1: Projective Assessments**

##### **Required texts:**

Wenck, Stanley, Ed., House-Tree-Person Drawings: An Illustrated Diagnostic Handbook (latest printing)

**Course pack** - will include the required readings and a list of the recommended readings. The professor may assign additional readings, if highly pertinent, as they become available in the literature while the course is being taught.

Available at the McGill University Bookstore.

**Blank video or DVD** – for projective assessment group project.

**Recommended text:**

Hammer, E.F. *The Clinical Application of Projective Drawings* - 5<sup>th</sup> printing. Springfield: Charles C. Thomas, Pub.

**Section 2: Advanced and computerized assessment of daily living performance, environmental factors and quality of life**

**Course pack** - will include the required readings and a list of the recommended readings.

**Student Assignment and Evaluation:**

**Section 1: Projective Assessments**

Detailed information on the evaluation process will be distributed to students during the first week of lectures.

**Section 2: Advanced and computerized assessment of daily living performance, environmental factors and quality of life**

Detailed information on the evaluation process will be distributed to students during the first week of lectures.

**Special Requirements for Course Completion and Program Continuation:**

**OCC1 341 Assessment of Performance III** is subdivided into sections. Each section must be passed with a grade of C+ (60%) or better. If a student obtains less than a C+ (60%) grade in a section when the overall course mark is C+ (60%) or better, the course mark will be withheld from the record until proficiency in each section, as evidenced by a grade of C+ (60%) or better, is obtained. The student must undertake a second evaluation of the failed section before the next academic year. If the student obtains a grade of C+(60%) or better in the failed section, the original final course mark will be recorded. If after the second evaluation the student fails to obtain a grade of C+ (60%) or better in the failed section, the final course mark will be recorded as a grade of F (Failure) and the complete course must be repeated the next time the course is offered and the evaluation done at the next regularly scheduled time. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.



If a student fails both sections or if the overall course mark is less than C+ (60%), the final course mark will be recorded as F (Failure). The student may be permitted to take a supplemental exam containing both section evaluations. If the student then passes the supplemental exam by obtaining at least C+ (60%), a supplemental grade will also be recorded. As stipulated in section 6.4.7.6 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”. If the student fails to obtain at least C+ (60%) in the supplemental examination, the entire course must be repeated the next time it is given. If each section of the course is not passed with a grade of C+ (60%) or better after one repetition, the student must withdraw from the Program.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is required throughout the course of the semester. It is each student’s responsibility to have appropriate attire during all class assignments and learning activities. Washable clothing is recommended for the laboratory sessions.

**Attendance:** Laboratory attendance is mandatory. Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** Lateness will be penalized.

**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.”

## V. B.SC. OCCUPATIONAL THERAPY U3

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## **V. B.Sc. OCCUPATIONAL THERAPY U3 CURRICULUM**

### **OVERALL COURSE STRUCTURE**

- Important Dates B.Sc. Occupational Therapy U3
- Curricula Plan B.Sc. Occupational Therapy 2005-2006
- List of required courses for B.Sc (OT) & B.Sc. (PT)

### **PROFESSIONAL COURSE DESCRIPTIONS**

#### **COMBINED PHYSICAL & OCCUPATIONAL THERAPY**

POTH 401 RESEARCH METHODS

POTH 445 ADMINISTRATION/MANAGEMENT

#### **OCCUPATIONAL THERAPY**

OCC1 420 CLINICAL AFFILIATION 4

OCC1 422 CLINICAL AFFILIATION 5

OCC1 424 SPLINTING AND ORTHOTICS

OCC1 436 OT PRACTICE V: MEDICAL & SURGICAL CONDITIONS

OCC1 437 OT AND COMMUNITY MENTAL HEALTH

OCC1 438 PSYCHOSOCIAL THEORIES IN OT

OCC1 440 PREVOCATIONAL & VOCATIONAL REHABILITATION

OCC1 441 ADVANCED TECHNOLOGY

#### **PROFESSIONAL SPECIALTY COURSES**

OCC1 442 ENABLING ENVIRONMENTS

POTH 402 ADVANCED RHEUMATOLOGY

POTH 403 PAEDIATRICS

POTH 410 CHILD & ADOLESCENT PSYCHIATRY

POTH 441 RESEARCH ELECTIVE

POTH 446 CURRENT TOPICS IN REHABILITATION – GERIATRICS

## B.Sc. OCCUPATIONAL THERAPY U3 IMPORTANT DATES

FALL TERM:	Registration Period	Mar. 31 to Aug. 1, 2005
	Labour Day	Sept. 5, 2005
	Orientation	Sept. 6, 2005
	Lectures Begin	Sept. 6, 2005
	Course Change (drop/add period)	Mar. 31 to Sept. 13, 2005
	Thanksgiving Day	Oct. 10, 2005
	Last Day of Lectures	Nov. 4, 2005
	Examination Period	Nov. 7 to 11, 2005
	MOLE Evaluation Period	Oct. 24 to Nov. 6, 2005

WINTER TERM:	Classes Commence	Feb. 6, 2006
	Course Change (drop/add period)	Mar. 31, 2005 to Jan. 17, 2006
	Midterm Break	Feb. 20 to 24, 2006
	Easter	April 14 to 17, 2006
	Last Day of Lectures	April 10, 2006
	Examination Period	April 11 to 28, 2006
	MOLE Evaluation Period	Mar. 23 to April 10, 2006

### FALL/WINTER TERM: CLINICAL AFFILIATIONS IV and V

U3 – Two (2) five (5) Week Rotations

- Nov. 14 to Dec. 16, 2005
- Jan. 2 to Feb. 3, 2006

MOLE Evaluation Period                      TBA

## U3 CURRICULUM PLAN 2005-2006 OCCUPATIONAL THERAPY PROGRAM

### FALL TERM

Academic Term (9 wks) + Exams (1 wks) + Clinical Affiliation 4 (5 wks) = Total 15 Wks

### WINTER TERM

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

Academic Term	Exams	Clinical Affiliation	Clinical Affiliation	Academic Term	Exams
Sep 6 to Nov 4	Nov 7 to 11	Nov 14 to Dec 16	Jan 2 to Feb 3	Feb 6 to Apr 10	Apr 11 to 28
POTH-401 RESEARCH METHODS <span style="float: right;">3cr</span>		OCC1-420 CLINICAL AFFILIATION IV <span style="float: right;">3cr</span>	OCC1 422 CLINICAL AFFILIATION V <span style="float: right;">3cr</span>	POTH-445 ADMINISTRATION/MANAGEMENT <span style="float: right;">4cr</span>	
OCC1-424 SPLINTING AND ORTHOTICS <span style="float: right;">2cr</span>				OCC1-440 PRE & VOCATIONAL REHABILITATION <span style="float: right;">2cr</span>	
OCC1-436 OT PRACTICE V: Medical & Surgical Conditions <span style="float: right;">3cr</span>				OCC1-441 ADVANCED TECHNOLOGY/ ERGONOMICS <span style="float: right;">2cr</span>	
OCC1-438 PSYCHOSOCIAL THEORIES IN OT <span style="float: right;">3cr</span>				PROFESSIONAL SPECIALTY COURSE FALL OR WINTER TERM <span style="float: right;">3cr</span>	
OCC1-437 OT & COMMUNITY MENTAL <span style="float: right;">3cr</span>					
PROFESSIONAL SPECIALTY COURSE FALL OR WINTER TERM <span style="float: right;">3cr</span>					

NOTE: ANAT = Anatomy  
 PHGY = Physiology  
 POTH = Occupational/Physical Therapy  
 OCC1 = Occupational Therapy

## U3 PHYSICAL AND OCCUPATIONAL THERAPY LIST OF REQUIRED COURSES

**Fall Term**  
Sept. 6 to Nov. 4, 2005

**Clinical Affiliations**  
Nov. 14 to Feb. 3, 2006

**Winter Term**  
Feb. 6 to Apr. 10, 2006

**Exam Period**  
Nov. 7 to 11, 2005

**Exam Period**  
Apr. 11 to 28, 2006

<b>2005-2006 OCCUPATIONAL THERAPY PROGRAM U3</b>		
<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>
<b>Combined Courses</b>		
POTH-401	Research Methods	3
POTH-445	Administration/Management	4
<b>OT courses Only</b>		
OCC1-420	Clinical Affiliation 4	3
OCC1 422	Clinical Affiliation 5	3
OCC1-424	Splinting and Orthotics	2
OCC1-436	OT Practice V: Medical & Surgical Conditions	3
OCC1-437	OT & Community Mental Health	3
OCC1-438	Psychosocial Theories in OT	3
OCC1-440	Prevocational & Vocational Rehabilitation	2
OCC1-441	Advanced Technology	2
<i>See B.Sc. OT U3</i>	<i>Professional Specialty Course</i>	2
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 30</b>		
<b>2005-2006 PHYSICAL THERAPY PROGRAM – U3</b>		
<b>Course Number</b>	<b>Course Name</b>	<b>Credits</b>
<b>Combined Courses</b>		
POTH-401	Research Methods	3
POTH-445	Administration/Management	4
<b>PT Courses Only</b>		
PHTH-420	Clinical Affiliation 4	3
PHTH-421	Clinical Affiliation 5	3
PHTH-432	Pain Management	3
PHTH-433	Coordinated Rehabilitation I	3
PHTH-434	Biomechanics	3
PHTH-435	Coordinated Rehabilitation II	3
PHTH-438	Fitness/Injury Management	2
POTH-446	Current Topics in Rehabilitation	2
POTH-447	Specialized Areas of Practice	2
<b>FALL &amp; WINTER TERMS – TOTAL CREDITS 31</b>		

## POTH 401 RESEARCH METHODS

**Credits:** 3

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements.

**Instructor:** Nicol Korner-Bitensky, PhD.

Final Seminar: various graduate fellows and Faculty members

**Access to Instructor:**

Hosmer H201, Telephone: (514) 398-5457, Home: 514-624-1345 (not after 9:30 PM please)  
email: [nicol.korner-bitensky@mcgill.ca](mailto:nicol.korner-bitensky@mcgill.ca)

**Course Objective:** The purpose of this course is to expand the knowledge and skills related to research, so that the graduating therapist is able to critically appraise the quality of the research available and to actively participate in research projects.

**Course Structure:**

Two (2) two (2) hour sessions per week for nine (9) weeks. Lectures, seminars or self-directed sessions. Fall term in the third year of the program

**Student Learning Objectives:**

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

1. Describe strengths, weaknesses and applications of various research designs.
2. Design a questionnaire for use with clients, family members or health professionals.
3. Discuss the factors to be considered when selecting a measurement tool for clinical practice or research.
4. Classify the current evidence on the effectiveness of an intervention according to specific guidelines and synthesize this information for clinical applicability.
5. Design an evaluation of an existing or a new program.
6. Describe the concepts of cost, cost effectiveness and cost benefit and how they relate to intervention studies.
7. Have the necessary understanding of research ethics guidelines to serve as a member of an ethics committee that reviews rehabilitation protocols.

**Course Content:**

1. Overview of course: survey methods (sampling)
2. Questionnaire design
3. Statistics: use and misuse
4. Cross-sectional studies: theory and application in rehabilitation
5. Case-control studies: theory and application in rehabilitation/ critical analysis
6. Cohort studies: theory and application in rehabilitation diagnostics /critical analysis
7. Experimental and quasi-experimental designs
8. Critical analysis of experimental designs
9. Cross over studies Association versus cause
10. Outcome measures: reliability, validity, responsiveness, selection/application
11. In-class quiz
12. Asking and answering a research question
13. Single subject designs: use in clinical practice and research
14. Program evaluation
15. Qualitative approaches
16. Cost analysis in health care
17. Ethics in research
18. Seminars for selected topics

**Course Materials:****Required text:**

*Foundations of Clinical Research : Applications to Practice.* 2<sup>nd</sup> ed. Portney LG, Watkins MP. Appleton & Lange; Norwalk, Connecticut, 2000.

**Additional readings:**

A course syllabus will be made available on the first day of class. Additional readings may be assigned during the course.

**Student Assignments and Evaluation:**

- |   |                               |
|---|-------------------------------|
| 1. Quiz:                                    | 30 marks                      |
| 2. Seminar presentation and topic critique: | 35 marks (10 oral/25 written) |
| 3. Final exam:                              | 35 marks                      |

**Special Requirements for Course Completion and Program Continuation:**

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

**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](http://www.mcgill.ca/integrity) for more information).



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

**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 objects of the course."

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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 445 ADMINISTRATION/MANAGEMENT

- Credits:** 4
- Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements.
- Instructors:** Caroline Storr, BSc, MBA (Co-Coordinator)  
Antoinette Di Re (MUHC) (Co-Coordinator)

**Access to the Instructors:**

Caroline Storr: Davis House D2, Telephone: (514) 398-6561,

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Antoinette Di Re, email: [Antoinette.dire@muhc.mcgill.ca](mailto:Antoinette.dire@muhc.mcgill.ca)

Office hours by appointment.

**Course Objective:** This course is the second professional issues course and builds on knowledge acquired in POTH 250 Health Care and Professionalism.

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

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

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

The goal of this course therefore is to sensitize students to the administrative and management processes appropriate for the changing roles that the physical or Occupational Therapy graduate will have in the years to come in order to support career planning and growth.

**Course Structure:** The course will be given from 10:00 a.m. - 12:30 p.m. on Mondays and Wednesdays starting on February 6th, 2006.

The course geared to Physical and Occupational Therapy will consist of lectures/seminars/presentations over an eight (8) week period on Monday and Wednesday mornings from 10:00 a.m. - 12:30 p.m. starting February 6, 2006 following OCC1 422 Clinical Affiliation 5 and PHTH 421 Clinical Affiliation 5.

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

1. reflect on personal leadership abilities in preparation for professional practice as a clinician and a fieldwork educator
2. given public and private rehabilitation facility situations:
  - a) perform an environmental scan
  - b) identify the administrative tasks involved in their management
  - c) identify and prepare pertinent facility records and reports and indicate how they are used and maintained
  - d) design a rehabilitation facility for each setting taking into account the specific client population needs and the economic, architectural and human resource factors and merits
  - e) understand and apply marketing principles
  - f) outline a total quality management control program including risk and utilization parameters
3. analyse and appraise the intricacies of interpersonal relationships and team interactions within the health care system
4. identify and provide positive reinforcing recommendations for interpersonal relationships and team management
5. assess and modify program process and outcomes
6. relate professional ethics, liability issues and the law to professional practice
7. apply the dimensions of Codes of Ethics to the practice of Occupational and Physical Therapy
8. position the professions of Occupational and Physical Therapy in relation to legislation, health professional organizations and unionization

## **Course Content:**

### **A. Principles of Management Theory to Include:**

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

### **B. Human Resource Policy, Planning and Management:**

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

### **C. Marketing and Entrepreneurial Strategies:**

- environmental analysis
- developing the business plan and requests for proposal
- outsourcing on non-core competencies, e.g. technical writing, public relations
- strategic marketing
  - business marketing, strategic business planning
  - social marketing

### **D. Fiscal Resource Management Including:**

- budgeting process
- productivity
- cost-effectiveness

### **E. Modes of Service Delivery Including:**

- institutional practice
- private practice
- community based practice including health management organizations (HMOs), local community health clinics (CLSCs)
- industrial/worksite based practice
- evidence-based practice

F. Strategic Information Management:

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

G. Standards of Practice Issues:

efficiency  
efficacy  
appropriateness  
cost effectiveness  
outcome measures  
ethical/legal considerations

H. Principles of Organizational Theory:

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

**Course Schedule:****WINTER TERM – 2005 - 2006**

<b>DATE</b>	<b>TOPIC</b>	<b>INSTRUCTOR</b>
Feb 6	I Leadership/Advocacy	C. Storr
Feb 8	II Human Resource Policy	C. Storr
Feb 13	III Marketing Concepts - Assignment 1	C. Storr
Feb 15	IV Private Practitioner Panel/Workshop - Project Outline Due	C. Storr & guests
Feb 27	V Entrepreneurship & small business	C. Storr
Mar 1	VI The Basics of Financial Accounting/Cost-benefit analysis	M. Ford/C. Storr
Mar 6	VII Principles of Management Theory - Assignment 1 due	A. Di Re
Mar 8	VIII Service Delivery Models/Gaps in Service	G. Prata
Mar 13	IX Quality management/program evaluation - Assignment 2	A. Di Re
Mar 15	X Standards of Practice Issues	A. Di Re
Mar 20	XI Fiscal Resources & Strategic Information Management	A. Di Re
Mar 22	XII Student Presentations	C. Storr
Mar 27	XIII Student Presentations	C. Storr
Mar 29	XIV Student Presentations	C. Storr
Apr 3	XV Student Presentations	C. Storr
Apr 5	XVI Student Presentations - Assignment 2 Due	C. Storr

**Course Materials:****Required readings:**

Code des Professions - Editeur Official du Québec  
To be assigned by different lecturers.

Course Pack

**Recommended readings:**

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

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

Health Care Restructuring: A Resource Manual for Physiotherapists (CPA) (Available from the McGill Book Store)

Hickok, R.J. Physical Therapy Administration and Management, (2<sup>nd</sup> edition). American Physical Therapy Association.

Fazio, L. (2001) Developing Occupation-Centered Programs for the Community. Prentice Hall, N.J.

Gabard, D. L., Martin, M. W. (2003) Physical Therapy Ethics, Davis Company, Philadelphia.  
Physiotherapy/Occupational Therapy Workload Measurement System-Manuel de Gestion Financiere.

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

Purtilo, R. & Haddad, A. (2002). Health Professional and Patient Interaction (6<sup>th</sup> ed). W.B. Saunders.

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

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

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

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

### **Additional references**

Kotler, Philip, Turner, Ronald, E., Marketing Management 1989, Prentice Hall, Inc., Scarborough, Ont.

CAOT Publications – Jesierski Rhoda, Gauch, Patric, On Your Own An Introduction to Private Practice and Self Employment.

Carlson, J. (2003) Complementary Therapies and Wellness. Prentice Hall, N.J.

Ontario Society of Occupational Therapy Developing a Private Practice

Ontario Physiotherapy Association Private Practice Manual, Setting up a Physiotherapy Practice in Ontario

Sandstrom, R.W., Lohman, H. Bramble, J.D. (2003) Health Services, Policy and Systems for Therapists. Prentice Hall, N.J.

The American Occupational Therapy Association, Inc. 1990 Private Practice, Strategies for Success

### Links to marketing business plan

1. [HTTP://STRATEGIS.IC.GC.CA](http://strategis.ic.gc.ca)
2. [HTTP://WWW.CBSC.ORG/IBP](http://www.cbsc.org/ibp)
3. [WWW.SSMU.MCGILL.CA/START-UP](http://www.ssmu.mcgill.ca/start-up)
4. [HTTP://mss.gouv.qc.ca](http://mss.gouv.qc.ca) (good for C.V.)
5. [WWW.yesmtl.org](http://www.yesmtl.org) (Montreal-based resource for young entrepreneurs)

### Student Assignment and Evaluation:

- |    |  |       |     |
|----|--|-------|-----|
| 1. | Group OT/PT Project                              |       | 50% |
|    | √ Presentation (scheduled during last 5 classes) | (45%) |     |
|    | √ Project Outline - Due: Feb 15, 2006            | ( 5%) |     |

Description in course pack

- |    |                                     |       |     |
|----|-------------------------------------|-------|-----|
| 2. | Case-based Assignments (Individual) |       | 50% |
|    | √ Case 1 - Due: March 6, 2006       | (25%) |     |
|    | √ Case 2 - Due: April 5, 2006       | (25%) |     |

### Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least C+ (60%) must be obtained as a total course mark. A supplemental exam is permitted in this course. Please refer to Section 6.4, Student Evaluation and Promotion, pages 117 to 121 of the 2005/2006 McGill University Health Sciences Calendar for information on University regulations regarding final examinations and supplementals.

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**Attendance:** Students are expected to attend every lecture. Attendance is compulsory for all group presentations and will be marked accordingly.

**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 objects of the course. Group oral presentations are to be given in English as they are a group learning activity.

**Consequences on not completing assignments as requested:** Assignments are due on dates posted on the schedule. Late assignments will be penalized by two (2) marks deducted for each day late. All assignments must be submitted in hard copy. Email submissions will not be accepted.



**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.

## OCC1 420 CLINICAL AFFILIATION 4

## OCC1 422 CLINICAL AFFILIATION 5

**Credits:**           3   OCC1 420  
                      3   OCC1 422

### **Prerequisites:**

Successful completion of all U2 courses, including clinical affiliation requirements.

**CPR/First Aid:** Students are responsible for getting certified and renewing certification. A minimum of a level C, 12-hour course including adult, children and infants (e.g. with Red Cross, St-John's Ambulance, Bronze Medallion). Students are required to bring a proof of status to Croce Riggi, room D4.

**Immunization:** All students must ensure that their immunization records are complete and show supporting documentation to McGill Student Health Services. McGill Student Health Services maintains an active record list that may be requested by facilities. It is the student's responsibility to request these records from Health Services and bring them to each clinical placement.

**Clinical affiliation meeting:** All students must attend the U3 clinical affiliation meeting. Students having completed role-emerging and/or international placements will be invited to be part of a panel showcasing clinical experiences.

### **Important:**

**Failure to complete the required prerequisites before the clinical placement may result in a student's non-admission to a clinical facility and subsequent inability to complete the clinical placement. This policy applies to all placements including international and out-pf-province placements.**

**Instructors:**           Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)

Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

**Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34, Tel: (514) 398-2772

Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

**Course Objective:** These courses are the fourth and fifth of five (5) clinical courses whereby students have the opportunity to integrate theoretical content with practice. Upon completion of the 5<sup>th</sup> clinical course, students are expected to have acquired entry-level clinical competence.

**Course Structure:** Clinical Affiliation commences in first year and continues at set intervals throughout the three years of the Program. The objectives for each fieldwork placement will vary, according to the student level. Each student will have the opportunity to develop clinical skills, clinical reasoning, and professional judgement, in a variety of settings. This includes preparatory seminars in U1, U2, and U3. By the end of the Program, each student will have completed five (5) rotations, full-time. Each student is exposed to a variety of clientele (e.g. nursing homes, long-term care institutions, acute care hospitals, rehabilitation centres, CLSCs, etc.; infants, school-aged children, young adults, elderly).

**Schedule:**

The overall Program is made up of 105 credits of academic and clinical courses. The Clinical Affiliation courses are made up of over 1000 hours of clinical placement and have a value of 18 credits.

<b>2003-2004</b>	<b>Winter Term</b> (March - April, 2004)	<b>OCC1-220</b>	<b>6 weeks</b>	<b>0 credits</b>
<b>2004-2005</b>	<b>Summer Term</b> (April - June, 2005 or June - July, 2005)	<b>OCC1-320</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2004-2005</b>	<b>Summer Term</b> (June - July, 2005 or July - August, 2005)	<b>OCC1-321</b>	<b>6 weeks</b>	<b>6 credits</b>
<b>2005-2006</b>	<b>Fall Term</b> (November - December, 2005)	<b>OCC1-420</b>	<b>5 weeks</b>	<b>3 credits</b>
<b>2005-2006</b>	<b>Winter Term</b> (January - February, 2006)	<b>OCC1 422</b>	<b>5 weeks</b>	<b>3 credits</b>

Fieldwork placements will be arranged with McGill affiliated facilities. At times students may request fieldwork outside of the Montréal region (these regions may also include the US and overseas). The Occupational Therapy Program has developed specific guidelines pertaining to international and out-of-province placements.

Both traditional and role-emerging fieldwork placements will be used. The latter will consist of facilities/agencies/programs, which do not employ an Occupational Therapist directly on site. Supervision will be provided by Occupational Therapists who work in various settings, depending on the type of placement offered. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience.

**Student Learning Objectives:**

1. To be able to explain with accuracy the OT role within the facility/agency/program
  - The student will be able to define accurately the role of OT in the specific setting
  - The student will be able to compare the role of OT in a variety of settings
2. To further pursue the application of theoretical concepts to the fieldwork setting
  - The student will demonstrate entry-level to practice clinical reasoning and critical thinking
3. To continue gaining experience in:
  - evaluating clients
  - establishing treatment goals
  - planning and implementing treatment
  - modifying treatment
  - presenting reports - written or oral;
  - functioning as a member of an inter-disciplinary team
4. To master the skills necessary for entry level professional practice.
  - The student will achieve entry-level professional competence in communication, initiative, problem solving and professionalism
  - The student will be independent in work management skills
  - The student will carry a workload which is close to that of entry-level practitioner
  - The student will be fully accountable for his/her patients and use supervisor as a coach/mentor
  - The student will demonstrate motivation to be involved in other areas of practice and role-emerging areas
  - The student will be independent in representing patients in all aspect of health care interventions
  - The student will liaise with community agencies and be an advocate for his/her patients
5. To demonstrate mastery of abilities in self-directed learning and professional development in daily practice
  - The student will establish own learning objectives, self-evaluate their performance and include goals in CBFÉ
  - To mentor an OT U1 student for 1/2 day.

**Course content:** The exact nature of the interventions and the type of clientele seen during the placement will depend on the clinical setting where each student will be placed. Prior to the beginning of the placement, students will be informed in which setting they will be doing their placement and with which type of clientele and details will be specified by the clinical supervisor at the beginning of the placement. Many sites have completed the national site approval document (CGFE-OT) and students are expected to review this material in preparation for their clinical course.

### **Course Materials:**

#### **Required texts:**

Bossers, A., Miller, L., Polatajko, H., and Hartley, M.,(2002). Competency Based Fieldwork Evaluation for Occupational Therapists. Albany: Delmar/Thomson Learning.

Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999. This text is required for workshop participation and a reference for all five Clinical Affiliation courses.

The Student Clinical Experience Booklet.

Additional readings that sites may assign.

#### **Suggested readings:**

Course materials from the previous semesters

Site approval document (CGFE-OT) on clinical settings available in the office of the Administrative and Student Affairs Coordinator (OT and PT Clinical Education) (D4)

#### **Other requisites:**

Computer and web access for the required Web-CT component of the course

#### **Student Assignment and Evaluation:**

The **Competency Based Fieldwork Evaluation** (CBFE) is used to evaluate students' performance. The copyright 2002 is the only accepted version used for grading. Although each supervising therapist evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL.

It is mandatory for students to complete the **Student Clinical Experience Booklet** throughout the three-year Program. Following the completion of the final U3 clinical affiliation, students must bring their completed booklet to the Academic Coordinator of Clinical Education (ACCE), Caroline Storr. Failure to complete the booklet and return it will result in delay of clinical marks and **may delay graduation**. Students are strongly encouraged to develop a **clinical portfolio** including the Student Clinical Experience Booklet, the CBFE evaluations of each placement, student's learning objectives for each placement as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are asked to post a minimum of two (2) messages on the Web-CT bulletin board related to their clinical affiliation during each placement (describe the clinical setting, the OT role, case studies...)

Students may be expected to complete a project/assignment during their clinical affiliation (this will be determined in collaboration with the clinical educator)

### **Special Requirements for Course Completion and Program Continuation:**

**OCC1 420 Clinical Affiliation 4**, is a PASS or FAIL course. Students who fail OCC1 420 Clinical Affiliation 4, may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period. (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

**OCC1 421 Clinical Affiliation 5**, is a PASS or FAIL course. Students who fail OCC1 421 Clinical Affiliation 5, may be granted permission to do a remedial clinical affiliation if they are in satisfactory standing. The dates of the remedial will be arranged with the Academic Coordinator of Clinical Education (ACCE) and will depend on the availability of clinical sites. Every effort will be made to have the remedial completed with the same or subsequent promotion period. (see Clinical Affiliation Guidelines). If the repeated placement or any subsequent placement is failed, the student will be asked to withdraw from the Program.

Students are reminded that, due to the sequential nature of the Program, the failure to successfully complete both clinical affiliations at this time may lead to delayed completion of the Program (see Clinical Affiliation Guidelines).

### **Supporting Students in Difficulty During Fieldwork:**

#### a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCE's through scheduled mid-term phone calls to supervisors. The calls allow us to obtain feedback on the student's performance as well as detect difficulties early in the fieldwork learning experience. This feedback mechanism is in place to ensure that students are provided with adequate counseling and assistance in order to optimize chances for a successful placement. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counseling and mentoring program is in place for all students regardless of whether they have been identified as having difficulties in their clinical courses or not. Students are encouraged to keep a portfolio of their clinical education evaluations, projects and learning objectives and to review these prior to each clinical course.

#### b. Support for students in difficulty

In situations where students are presenting with difficulties, sites are encouraged to contact us for discussion and problem solving and when necessary a visit is scheduled for a meeting to take place between the clinical supervisor, the student and the clinical coordinator from the university. This allows for effective communication between the parties and provides support for both the student and the clinical supervisor.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** It is mandatory for all students to complete all the placement hours. If a student is absent due to health reasons, the student must make up the time missed. Students should contact the ACCE in case of prolonged absence. If the supervisor is absent, he/she must arrange for the student's supervision by another therapist. If the supervisor is a sole/charge therapist, alternative arrangements are made between the ACCE and the supervisor.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**Consequences on not completing assignments as requested:** Students may be refused to start the clinical affiliations if they do not complete the prerequisites.

**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.

**Safety:** The student has the right to refuse to do an intervention if this poses a risk to the student's safety or health or if it poses a risk to a patient's safety or health.

## CLINICAL AFFILIATION SEMINARS

**Credits:** 0

**Prerequisites:** None

**Instructors:** Caroline Storr, BSc, MBA, Academic Coordinator of Clinical Education (ACCE)

Suzanne Mak, BSc, Assistant Academic Coordinator of Clinical Education (AACCE)

**Access to the Instructors:**

Caroline Storr, Office: Davis House D2, Tel: (514) 398-6561

Email: [caroline.storr@mcgill.ca](mailto:caroline.storr@mcgill.ca)

Suzanne Mak, Office: Davis House D34, Tel: (514) 398-2772

Email: [suzanne.mak@mail.mcgill.ca](mailto:suzanne.mak@mail.mcgill.ca)

**Course Objective:**

To prepare students for their on-site clinical affiliation and review clinical profile.

**Course Structure:** In the Fall term, U3 students will participate in one seminar, date to be announced. Students who participated in international placements and role-emerging placements will be invited to make brief presentations during an informal colloquium during the Winter term.

**Student Learning Objectives:**

1. To review clinical profile and address outlined strengths and weaknesses in U2 clinical placements
2. To review personal learning objectives
3. To be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA
4. To acquire strategies in improving his/her employability

**Course Content:**

- Level 3 competencies
- Development of clinical profile
- Individual learning objectives
- Sharing of clinical experiences
- Follow-up continuation of WebCT

**Course Materials:**

Refer to course materials for OCC1 320 Clinical Affiliation 2 and OCC1 321 Clinical Affiliation III.



**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the clinical placements. It is each student's responsibility to have appropriate attire during clinical placements as well as during the clinical affiliation seminars. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement.

**Attendance:** Attendance during all clinical affiliation seminars is mandatory and is a prerequisite for starting Clinical Affiliation 2.

**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 objects of the course. Students are expected to write in the language of the facility during their clinical affiliation.

**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.

## TYPES OF CLINICAL AFFILIATIONS

### I. TRADITIONAL PLACEMENTS

Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. When students are placed in out-of-town facilities, travel and accommodation are the student's responsibility. Students are responsible to ensure that they purchase travel cancellation insurance in the event of unforeseen circumstances.

#### **A) QUEBEC PLACEMENTS:**

Students will be placed in McGill Affiliated Facilities in the greater Montréal area depending on availability, profile requirements and interest. Although every effort will be made to place students in the Montreal region (unless otherwise requested), students should expect the possibility of being placed in areas outside Montreal region, in the event of shortage of placement offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical affiliations beyond the greater Montréal area in the province of Quebec to the ACCE. **Under no circumstances, should students attempt to contact sites independently.** Availability is dependent on other universities' clinical affiliation schedules.

#### **B) OUT-OF-PROVINCE PLACEMENTS:**

Students who are interested in doing their first clinical placement in another province may do so by following the application procedure as announced by the ACCE during the Fall term. This will include a mandatory information meeting with the ACCE. Availability is subject to fluctuation and all students are strongly encouraged to develop fluency in both official languages in order to be able to complete some of the clinical affiliation courses in the province of Quebec. There is an application fee for out-of-province placements (currently 55\$ per request, fee subject to change).

#### **Deadlines for Out-of-Province placements in U3**

Approximate deadline to submit completed request form for a U3 placement in Nov/Dec 2005	End of April 2005 (deadline passed)
Approximate deadline to submit completed request form for a U3 placement in Jan/Feb 2006	End of September 2005 (exact date to be confirmed)

## C) INTERNATIONAL PLACEMENTS

### Policy

#### Eligibility Criteria:

1. To be considered for a placement outside Canada, students must be approved by the Academic Coordinator of Clinical Education (ACCE). Prior to making a recommendation, the ACCE will require the student to demonstrate the following criteria:
  - a) The student must have maintained a minimum academic standing of a **GPA of 3.5** and have progressed through the Program with no conditions.
  - b) The student must maintain a B+ (75-79%) standing in each of their fieldwork placements prior to the international placement.
  - c) The student must demonstrate strong interpersonal skills, including tact and diplomacy, and well developed judgement skills as documented on previous performance evaluations [Competency Based Fieldwork Evaluation (CBFE)].
2. The student applying for an international placement shall agree to accept responsibility for:
  - a) Cost of medical coverage (student already has access to some medical coverage, as a result of the fee paid to Student's Society).
  - b) Obtaining a visa (this includes obtaining information from specific embassy/consulate re: requirements for specific student visa, letter from fieldwork coordinator and/or letter from facility attesting to the purpose of stay).
  - c) Accommodation (at times, the ACCE/immediate fieldwork educator may be willing to assist in this area, but this cannot be counted on at all times, therefore the student is responsible for finding accommodation and assuming all costs. Often, embassies/consulates or tourism boards can help in this area).
  - d) Travel (confirmation of airplane tickets should only be carried out once the ACCE has confirmed the international placement). The student is responsible for all travel costs at all times. Travel arrangements cannot conflict with examination period. Cancellation insurance is strongly advised in the event of last minute changes.
  - e) Cost of supervision in countries where there is a fee for supervision (at times this is encountered; if it does happen, the student must to be prepared to pay this extra fee). This is not the responsibility of the University.

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

**Procedure:**

**NOTE: All students will be given the guidelines for international placements during the Winter Term of first year. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education at least one year prior to the placement.**

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

Exact date deadlines for international placement applications will be announced during the Winter Term of first year.

The letter should state:

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

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

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

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

## **Restrictions:**

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

1. The countries chosen must be members of the World Federation of Occupational Therapy.
2. The School reserves the right to approve the qualifications of the supervising therapist.
3. The School will develop a maximum of five new international placements per year and the rest must be selected from the list of approved international placements.
4. The School reserves the right to limit the total number of international placement organized per year.
5. Students may apply for a maximum of two international placements, overall, in the following combination:
  - (a) one in the US and one overseas; or
  - (b) two in the US

\*Please note that some restrictions may apply to US placement.

6. A second international placement may be undertaken only if the student has performed satisfactorily in the first international placement.
7. The first opportunity for a student to do an international placement will be in the summer clinical term following U2 in OCC1 321 Clinical Affiliation 3. This will be scheduled in either the second or third block of U2 summer clinical affiliations.
8. The international placement is contingent on maintaining academic and clinical standings prior to departure. Should these conditions not be met, the ACCE reserves the right to cancel the international placement and to reassign the student locally.

## RESPONSIBILITIES

### Student:

The student will:

1. Commit to the placement through a letter of intent outlining the request.
2. The student will have accepted responsibility for the following:
  - a) Cost of medical coverage
  - b) Obtaining a visa
  - c) Accommodation
  - d) Travel
  - e) Cost of supervision in countries where there is a fee for supervision
  - f) Malpractice Insurance
  - g) Cost for any cancellation

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

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

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

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

3. Write a letter of introduction to the National Occupational Therapy Association of the country or write to the coordinator of the school or facility requesting permission for a placement in which he/she wishes to complete his/her fieldwork. The following should be included in the letter:
  - a) permission has been granted from McGill University - Occupational Therapy Program to investigate the possibility of completing fieldwork in that country.
  - b) reasons for seeking fieldwork in that country.
  - c) dates and length of placement.
  - d) a request for a list of universities or facilities to contact for fieldwork opportunities.

4. Be responsible for timely fulfilment of all requirements necessary for entry into that country, i.e. student visa (if required), medical preparation (i.e. immunization/vaccination) and coverage, financial obligations [i.e. travel and accommodations arrangements, coverage of extra malpractice insurance (if required)].
5. Be knowledgeable in the language of origin of the country he/she has selected.
6. Provide the ACCE with copies of correspondence between student and facility offering the placement. The student should not call or write to the facility without prior permission from the ACCE.
7. Continue correspondence with the national occupational therapy association, university or facility to ensure requirements of the facility and McGill University - Occupational Therapy Fieldwork are met.
8. Begin fieldwork.
9. Agree to provide and complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements and ensure that the CBFE are completed at the Mid-Term and Final. At the end of the placement the student must submit a completed copy of the CBFE to the ACCE in order to receive a grade.

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

10. In the event of last minute cancellations, the student must advise the site in writing.

### **Fieldwork Facility:**

The fieldwork facility will:

1. Provide the following information in writing, in order to meet the fieldwork site approval criteria:
  - a) Documents required as per institution guidelines.
  - b) An abbreviated resume of the supervising therapist(s). The above must be forwarded to:

Academic Coordinator of Clinical Education  
Occupational Therapy Program  
School of Physical & Occupational Therapy  
McGill University  
3654 Promenade Sir-William-Osler  
Montreal, Quebec  
Canada H3G 1Y5  
Telephone: (514) 398-6561 / Fax: (514) 398-6360

2. Ensure that the Coordinator of Occupational Therapy Services/Occupational Therapy Clinical Educator at the facility will agree to complete McGill University - School of Physical & Occupational Therapy Fieldwork Evaluation Forms.
3. Sign a cooperation agreement between McGill University and the Facility, prior to the commencement of the clinical placement and define a contingency plan within the facility or another agency in case of cancellation of the rotation.
4. Commit to placement (specific dates to be determined and approved by both ACCE and supervising Occupational Therapist) in writing.
5. Ensure that the Occupational Therapist who will be supervising the student will have knowledge of the English or French language (oral and written) in order to be able to communicate with the ACCE.

**Academic Coordinator of Clinical Education:**

The Academic Coordinator of Clinical Education (ACCE) will:

1. Review the student's application and will approve the request based on established eligibility criteria.
2. Request an abbreviated resume for the Occupational Therapy Department and the potential supervising therapist, including educational background and years of experience directly supervising students. Please note that in order to supervise a student, the therapist must have had at least one year of clinical experience and must be certified/registered according to the standards of the host country.
3. Ensure that two copies of an affiliation contract have been forwarded and returned signed by the receiving facility, upon receipt of documentation fulfilling requirements of Occupational Therapy Fieldwork Education Site Approval Guidelines.
4. Forward to the Facility:
  - a) a letter of confirmation for the placement
  - b) a copy of the affiliation agreement signed by all parties [student(s), Facility and McGill University]
  - c) an outline of the curriculum
  - d) School of Physical & Occupational Therapy Course Guide(s)
  - e) expectations for student performance/fieldwork objectives
  - f) policies related to:
    - i. student assignments in clinical settings
    - ii. time loss
    - iii. failure during a placement
    - iv. Student Evaluation of Placement Form



5. Notify student to finalize travel and accommodation arrangements.
6. Provide resource material for supervisor (when necessary) which will be delivered by the student.
7. Initiate contact with facility via phone, fax or E-mail at mid-term in order to obtain feedback re: progress in placement, as well as at the end of placement. Preference will be to provide email communication.
8. Write letter of appreciation to facility.

### **INTERNATIONAL PLACEMENTS SCHEDULE**

**Winter term (U1):** reminder to students of deadline for applying for international placements and orientation and introduction to International Placements (hand out guidelines)

**Integration Block (U1):** deadline for initiating request for an international placement in U2

**Requests after this period will not be considered**

<b>RESPONSIBILITIES OF STUDENT</b>	<b>SUGGESTED TARGET DATES</b>
Request the international placement (or Item # 1)	12 months prior to placement. Student must respect deadline provided by the ACCE.
Accept responsibility for all items mentioned in #2 (or Item 2)	Immediately upon acceptance of placement by ACCE
Find the placement/facility and/or select from list of available placements and write a letter requesting a placement (or Item 3)	Immediately upon being granted approval for the placement by the ACCE
Be responsible for all requirements for entry into the country of choice (or Item 4)	ongoing
Keep ACCE informed of all communications and/or provide copies of correspondence with the facility (or Item 6)	ongoing
Continue correspondence with the facility and the University in order to ensure that all requirements are met (or Item 7)	ongoing

RESPONSIBILITIES OF STUDENT	SUGGESTED TARGET DATES
Must consider a contingency plan (placement in Quebec or outside Quebec) if the international placement is cancelled	ongoing
Agree to complete student evaluation of placement and ensure that CBFE is completed at Mid-Term and Final	end of placement

## **II ROLE-EMERGING FIELDWORK PLACEMENTS**

### **Introduction:**

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

### **Philosophy of the Occupational Therapy Program at McGill University:**

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

### **New Trends in Occupational Therapy Roles:**

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

### **The promotion of health and prevention of illness and disability orientation of the Health Care System in Quebec:**

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

**General Purpose of this Placement:**

- To allow students to learn new roles in community programs/services
- To produce a therapist more confident to move into non-traditional settings
- To produce a therapist more skilful in program development
- To gain experience in identifying clients/agency needs
- To become familiar with the socio-cultural environment of the client(s)
- To gain experience in resourcefulness – physical, human and financial
- To assess program needs
- To provide staff with an increased understanding of the role of Occupational Therapy within the community
- To produce a therapist who will be able to relate to both lay and professional people interested in health services

**Structure and Organization:**

Five (5) or six (6) weeks full-time placement [the second U2 placement, OCC1 321 Clinical Affiliation 3 will consist of six (6) weeks and a U3 placement will consist of five (5) weeks]. Each agency/program will receive at least two (2) students at the same time to encourage peer teaching and learning. Each group of students will be supervised by an Occupational Therapy faculty member or an Occupational Therapist working in the community (from now on this person will be referred to as an off-site supervisor).

**Student Learning Objectives:**

By the end of the placement, the student will have:

- defined the Occupational Therapy role within the agency/program
- identified the clientele/agency concerns or needs, as they relate to Occupational Therapy
- determined how the clientele/agency needs will be met

**Supervision:**

Each group of students will be supervised by an off-site supervisor (member of the OEQ) for an average of one ½ day/week. The supervision will be based on a consultative model; the supervisor will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site supervisor will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite supervisor will be used as a 'sounding board' for new ideas/concepts, as well as for new approaches to problem-solving. The students will be required to keep a journal to assist them with the reflection process as well as to use it as a planning tool for the supervisory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site supervisor.

**Student Evaluation:**

The same evaluation tool (CBFE) and process will be followed as per traditional placements. A learning contract will be utilized, in order to establish learning objectives and how they will be achieved (resources, strategies and evaluating outcomes). As well, the agency/program will provide feedback to the off-site supervisor at the end of the placement, so that pertinent information concerning student's performance can be considered. The student must also complete the Student Clinical Experience Booklet as for a traditional placement. Students are expected to review and refer to role responsibilities as outlined in the red role-emerging booklet provided free of charge to all students completing a role-emerging placement.

**Plan of Action:**

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

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

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

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

**Journal Entries:**

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

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

Closing comments for the journal (daily):

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

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

**References:**

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

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

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

**FIELDWORK RESPONSIBILITIES**

**A) Clinical Supervising Therapist:**

1. To orient the student to the physical layout of the facility, to the Occupational Therapy Department/service (if applicable), to staff, patient case load and assessment/intervention orientation as well as available learning resources such as the library, ward rounds, etc.
2. To review the fieldwork information package sent by the ACCE before the student's arrival in order to plan for the fieldwork placement.
3. To review with the student the plan set out for the fieldwork placement, as well as clarify the student's expectations, preferably within two working days of the student's arrival.
4. To provide the student with learning opportunities commensurate with fieldwork objectives.
5. To provide students with ongoing feedback of their performance and provide suggestions for improving that performance if necessary.

6. To monitor student practice as necessary, depending on whether or not the student is inexperienced or experienced, by:
  - checking assessments the student proposes to use
  - checking proposed treatment programs
  - checking written reports
  - supervising student practice appropriate to the student's level of experience
  - being available for discussions with the students
7. To complete and present to the student a Mid-Term and a Final evaluation, as fairly and objectively as possible, using the evaluation forms provided by the student. Students are expected to complete and revise their own learning objectives on the evaluation form as the placement progresses.
8. To return the completed evaluation to the ACCE within requested time lines. The evaluation must be signed with licensure #. Fieldwork educators must have a minimum of 1 year's clinical experience.

**B) Student:**

1. To behave professionally at all times, i.e., not only in respect to appearance, punctuality, and acceptance of appropriate responsibility, but also in observation of professional ethics and the patient's right to confidentiality.
2. To strive to reach a satisfactory level of professional competence in assessment, program planning, treatment, and report writing.
3. To be aware that each fieldwork placement is a gift for learning donated by the facility involved and that the primary function of each facility is to serve its clients or patients. It must be realized that facilities offering specific rotations are subject to last minute change.
4. To contact the clinical supervisor a minimum of **two weeks** prior to the starting date of the placement by writing a letter of introduction to confirm time and place of arrival.
5. To email/fax the immediate supervisor's contact information to the ACCE during the first week of placement.
6. To complete facility evaluation forms and provide facilities with feedback on learning experience.

**C) Academic Coordinator of Clinical Education (ACCE):**

1. To assist the development of facilities' clinical education program and confirm availability prior to assigning students to a facility.
2. To develop students' clinical profile by assigning students to facilities.
3. To send pertinent course material to the facility prior to the student's arrival.
4. To contact facilities while the student is completing his/her fieldwork placement, so as to receive feedback and support learning and teaching, as well as answer any queries from the fieldwork educator.
5. To mark the evaluation forms upon their return to the School, and if needed, to inform facilities of the results of their evaluation of the student.

6. To ensure students fill out facility evaluation forms so that this information can be used to provide facilities with timely constructive feedback as needed.
7. To respond appropriately to concerns or requests made by a facility.
8. To provide ongoing support/training to fieldwork supervisors, both onsite and offsite.
9. To review each fieldwork placement with the student and if necessary, facilitate student in developing learning objectives for improved performance at the next placement.
10. To be available for counselling to students who are experiencing difficulties in their clinical placements and make site visits as needed.
11. To ensure that all fieldwork records are kept up-to-date.

## OCC1 424 SPLINTING AND ORTHOTICS

**Credits:**

2

**Prerequisites:** Working knowledge of musculoskeletal anatomy and review  
OCC1 236 OT Practice I: Musculoskeletal

**Instructors:** Caryne Torkia, MSc Candidate (Coordinator)  
Bernadette Nedelec, PhD

**Access to the Instructor:**

Hosmer House, Room 303B, Tel: 514-398-1021

E-mail: [caryne.torkia@mcgill.ca](mailto:caryne.torkia@mcgill.ca)

Office hours: By appointment

**Course Structure:** This course consists of 19 hours of lecture and 15 hours of laboratory (six (6) sessions, 2 1/2 hours per lab). A two (2) hour optional session has also been scheduled for those students who have questions with regard to the case study assignments.

**Student Learning Objectives:**

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

1. demonstrate the clinical reasoning supporting a clinical decision
2. demonstrate problem-solving approaches to splinting
3. design, fabricate and modify splints to meet clients' needs of different age groups
4. apply biomechanical principles involved in the fabrication of static and dynamic splints
5. apply evidence-based practice in the integration of splinting in the OT treatment program
6. demonstrate professional skills in oral and written presentations

**Course Materials:**

McKee, P. & Morgan, L. (1998). Orthotics in rehabilitation: Splinting the hand and body. Philadelphia: F.A. Davis Company.

Rehabilitation of the hand and upper extremity (2002) volume one and two has been placed on reserve in the Health Science Library for all students to consult.



## **Student Assignment and Evaluation:**

- **Lab work (3 out of the 5 splints)** **30%**
  - Submission of the Mid-term splint evaluation: TBA
  - Submission of the Final splint evaluation: TBA
  
- **Case study (35% for written report & 5% for oral presentation)** **40%**
  - written report due during class: TBA

**Final exam (during examination period)** **30%**

## **Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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 to Laboratory is mandatory. Students should promptly inform the coordinator of any potential schedule conflict and make the necessary arrangements. Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Failure to submit assignments or written splint evaluations by the due time and date will be penalized to the equivalence of 1% of the marks allocated for the item per day.

**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."

## OCC1 436 OT PRACTICE V: MEDICAL & SURGICAL CONDITIONS

**Credits:** 3

**Prerequisites:** Successful completion of all U2 courses, including clinical affiliation requirements

**Instructor:** Aliko Thomas, MEd (Coordinator)

**Access to the Instructor:**

Thursdays by appointment

Tuesdays 9:00 am to 1:00 pm

Davis House Room 30. Tel: (514) 398-4496, Email: aliki.thomas@mcgill.ca

**\*\*\*\* E-mail and telephone messages are given priority and efforts are made to return student calls promptly**

**Course Objective:** The objective of this course is to expose students to the etiology, epidemiology, and medical and rehabilitative approaches to assessment and treatment of a number of medical and surgical conditions seen in OT practice. In Section A students will gain knowledge of the evaluation and management of various medical and surgical conditions relevant to Occupational Therapy practice (pulmonary conditions, adult and pediatric cardiac conditions, diabetes, congenital hand deformities, palliative care, cardiovascular conditions and lower extremity amputations, etc...). In Section B students will integrate and apply the knowledge gained in Section A towards the OT assessment and treatment of those conditions.

**Course Structure:**

**SECTION A: CONDITIONS** Tuesdays from 3:00 to 5:00 pm and Thursdays from 3:30 to 5:00 PM

This section comprises a total of 11 lectures and two (2) seminars. During the first week of term, (**September 7<sup>th</sup> and 9<sup>th</sup>, 2005**) the combined OT/PT class will meet for two (2) case-based, problem solving seminars on the topic of HIV and AIDS. The remainder of the classes will be two (2) hour lectures on various medical and surgical conditions for the OT students only where physicians provide lectures on different conditions seen in rehabilitation.

**SECTION B:** Fridays from 9:00 am -2:00 pm except for the first class on PAIN which will be given from 2:00 to 5:00 pm on Friday September 9<sup>th</sup>.

This section comprises nine (9) lectures where clinician guest lecturers will present on OT application (evaluation and treatment) of the conditions covered in Section A. Classes for this section begin on **September 9<sup>th</sup>, 2005**.

### Student Learning Objectives:

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

1. describe the etiology, pathophysiology and clinical features of medical & surgical conditions seen in rehabilitation.
2. outline the medical and/or the surgical approach to the treatment of these conditions.
3. understand the functional implications of the deficits related to these conditions.
4. be familiar with principles of OT treatment of medical & surgical conditions in paediatric and adult settings.
5. develop treatment strategies based on assessment results, treatment goals and theoretical frameworks.
6. link clinical experience with the theoretical knowledge base of medical & surgical conditions

### Course Content: Section A

DATE & TIME	LOCATION	TOPIC	SPEAKER
<b>Tues., Sept. 6</b> 3:00 - 5:00	Meakins Amphitheatre	Pain	Dr. Lamontagne P&OT
<b>Wednesday, Sept. 7</b> 9:00 - 12:00	Palmer Amphitheatre	HIV and AIDS Part I	Dr. Gilmore Montreal Chest Institute
<b>Thurs, Sept. 8</b> 3:30 - 5:00	Martin Amphitheater	Pulmonary I	Dr. Boudreau (McGill)
<b>Fri. Sept. 9</b> 10:30 - 1:30	Meakins Amphitheatre	HIV and AIDS Part II Rehab Approach	Aliki Thomas & guests
<b>Tues., Sept. 13</b> 3:00 - 5:00	Meakins Amphitheater	Pulmonary II	Dr. Olivenstein (Montreal Chest Institute)
<b>***Thurs. Sept.15th</b>		NO CLASS	
<b>Tues., Sept. 20</b> 2:00 to 5:00	Meakins Amphitheater	Adult Cardiac Conditions I	Dr. Honos (Jewish General Hospital)
<b>Thurs., Sept. 22</b> 3:30 - 5:00	Meakins Amphitheater	Pediatric Cardiac Conditions	Dr. Rohlicek (Montreal Children's Hospital)
<b>Tues., Sept. 27</b> 3:00 - 5:00	Meakins Amphitheater	Oncology and Palliative Care	Dr. Borod MGH
<b>Thurs., Sept. 29</b> 3:30 - 5:00	Meakins Amphitheater	Congenital hand anomalies	Dr. Stanciu (Ste-Justine)
<b>Tues., Oct. 4</b> 3:00 - 5:00	Meakins Amphitheater	Traumatic Injuries	TBA
<b>Thurs., Oct. 6</b> 3:30 - 5:00	Meakins Amphitheater	Diabetes	TBA
<b>Tues., Oct. 11</b> 3:00 - 5:00	Meakins Amphitheater	Lower extremity amputations Diabetes	Dr. McKenzie RVH

**Course Content: Section B**

<b>Time</b>	<b>Topic</b>	<b>Speaker and Location</b>
Friday Sept. 9 2:00 to 5:00	Chronic pain	Norma –Christine Cassane Davis House Room 3
Friday Sept. 16 9:00 – 12:00	Respiratory Conditions	S. Mak Davis House Room3
Friday Sept. 23 9:00 – 12:00	Respiratory Conditions	S. Mak Davis House Room3
Friday Sept. 30 9:00 – 12:00	Pediatric heart conditions	Rena Birnbaum Montreal Children’s Hospital Davis House Room 3
Friday Oct. 7 9:00 – 12:00	U/E Amputations	S. Madon, OT Institute de Réadaptation  Davis House Room3
Friday Oct. 14 9:00 – 12:00	U/E Amputations	S. Madon, OT Institute de Réadaptation Davis House Room 3
Friday Oct. 21 9:00 – 12:00	L/E Amputations	Violaine Farly Lecture at the Lindsay Rehabilitation
Friday Oct. 28 9:00 – 12:00	Death, Dying and Palliative Care	Aliki Thomas Davis House Room 3
Friday Nov. 4 9:00 – 12:00	Death, Dying and Palliative Care	Aliki Thomas Davis House Room3

**Course Materials:** All readings and handouts will be available to students at the beginning of the semester (with the condition that the documents have been submitted to the coordinator of the course by the guest lecturers). It is the student's responsibility to attend classes prepared by reading all notes and handouts in advance when they are available. All readings are helpful in completing lectures and understanding subject matter. Recommended readings can supplement your knowledge of the subject.

### **Suggested text**

- Additional readings in: Trombly A.C, & Radomski, V.M. (2002) Occupational Therapy for Physical Dysfunction, 5<sup>th</sup> edition, Lippincott, Williams and Wilkins.
- Additional readings may be assigned as necessary
- WebCT will be used as an on-line learning platform. Some course notes and additional recommended readings will be posted on WebCT. It is the responsibility of each student to print the notes and come to class prepared. WebCT will also be used as a communication method between the instructor and the students so that weekly messages and queries can be posted on the bulletin board which the instructor will monitor on a regular basis.

### **Student Assignment and Evaluation:**

The following assignments will be used to evaluate learning. Additional information will be provided during the course of the semester.

- Midterm exam: 40%
- Final exam: 60%
- A Mid-Term exam will be held during regular class time and will include content covered in conditions section and medical content of HIV/AIDS seminar. This exam will include multiple-choice questions and short answer questions and will be worth 40% of final grade.
- A Final exam will be held during final exam period and will include subject matter from Section B and the applied portion of the AIDS seminar. This exam will be a mixed format: short answer, vignettes and multiple choice questions. It will be worth 60% of the final grade.

### **Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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 to classes is mandatory. It is the responsibility of each student to attend classes prepared and be actively involved in their learning experience. Although attendance will not be taken, the materials covered in class will be subject to evaluation.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Assignments not completed on time will be penalized accordingly. In the event that an assignment cannot be submitted on its due date, students are encouraged to inform the instructor as soon as possible.

**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."

## OCC1 437 OT AND COMMUNITY MENTAL HEALTH

**Credits:** 3

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements

***PART I - Focus on Occupational Therapy in Community Health***

***PART II - Focus on Occupational Therapy in the International Community***

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### **PART I - Focus on Occupational Therapy in Community Health**

**Instructor:** Catherine Vallée, PhD (Candidate) (Coordinator)

**Access to the Instructor:**

Email: [catherine.vallee@mcgill.ca](mailto:catherine.vallee@mcgill.ca) or [cvallee@uottawa.ca](mailto:cvallee@uottawa.ca)

**Course Objective:** To examine the structure and organization of community mental health practice and to identify the roles and services supplied by Occupational Therapists in community practice.

**Course Structure:** This course (Part I) consists of three (3) hours per week of lectures in the Fall term.

**Student Learning Objectives:**

By the end of this course, the student will be able to:

1. Define the various roles of Occupational Therapists within community mental health programs or services;
2. Differentiate community treatment services from rehabilitation or case management programs;
3. Reflect on the recovery process and its impact on Occupational Therapy practice;
4. Identify the challenges and issues associated with community mental health practice;
7. Demonstrate understanding of the psychiatric rehabilitation process;
8. Critically analyse psychosocial rehabilitation approaches and case management models as they relate to Occupational Therapy.

**Course Content:**

- Community health practice
- Case management services and functions
- Support systems and community integration
- Recovery process
  - Definition of the recovery process
  - Prevention and health promotion
  - Early intervention plans
- Psychiatric rehabilitation
  - Functional assessments in community mental health
  - Skill development
- Community mental health services
  - Case management programs
  - Assertive community treatment teams
  - Supports for natural support networks
  - Vocational rehabilitation approaches
  - Residential rehabilitation programs
  - Clubhouses and support groups

**Course Materials:** All the readings (required and suggested) will be included in a course pack. Reference lists for every topic will also be included. Since there is a WebCT component in this course, it is required that students access a computer and the Web.

**Student Assignment and Evaluation:**

The final grade will be calculated this way:

Reflective exercises on WebCT

- Discriminative exercise ..... 10%
- Participation in the forum on Case Management..... 10%
- Participation in the forum on Community integration..... 10%
- Participation in the forum on Social and Occupational justice..... 10%
- Individual assignment on Recovery..... 20%

Team assignments (2)

- On case management..... 20%
- On psychosocial rehabilitation..... 20%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.



**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](http://www.mcgill.ca/integrity) for more information). There will be no tolerance for plagiarism: if evidence is found (for example, two very similar copies), a grade of zero will be attributed.

**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 is expected from all students, since students will participate in activities during most classes. Students are strongly encouraged to take their own notes in lectures to facilitate the understanding of the lecture and avoid misinterpretation. Permission of the instructor is required before any lecture may be taped.

**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 objects of the course.

**Consequences of not completing assignments as requested:** Assignments and exams must be submitted within the set timelines. A penalty of one point will be attributed for each day of delay (up to a maximum of 20%). Exceptional circumstances must be discussed with the course instructor prior to due date or late submission will be penalized.

**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."

## **Part II - OT in the Community-International**

**Instructor:** Laurie Snider, PhD (Coordinator)

**Access to the Instructor:**

Hosmer House Room 302, Tel: (514) 398-5863, Email : [laurie.snider@mcgill.ca](mailto:laurie.snider@mcgill.ca)  
(By appointment, please)

**Course Objective:** To gain understanding of OT community-based practice with a variety of populations, with particular emphasis on OT community-based practice within the Quebec health care system and in developing countries.

**Course Structure:** Part II of this course consists of three (3) hours per week of lectures for seven (7) weeks and one (1) practical session of four (4) hours given in the Winter term.

**Student Learning Objectives:**

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

1. Gain factual knowledge regarding developing countries, refugees, immigration and associated terminology.
2. Describe health promotion and disability prevention in the context of community-based practice
3. Explain health determinants and the influence of environmental factors on occupational performance and OT community-based practice.
4. Recognize a culture shock and be sensitive to the impacts of one's culture when assessing and treating clients with different cultural backgrounds.
5. Recognize the importance of partnership and sustainability for community-based rehabilitation projects.
6. Compare and contrast OT community-based practice in Canada and in developing countries.
7. Justify the importance of community-based OT services in the context of:
  - a) continuity of health care services in Canada
  - b) developing countries
8. Elaborate a project proposal for a potential OT community-based project in Canada or in a developing country.

**Course Content:**

TBA on the first day of class

**Course Materials:**

**Required readings:**

TBA on the first day of class

**Suggested readings:**

TBA on the first day of class

**Student Assignment and Evaluation:**

Detailed assignments and evaluation methods will be announced on the first day of class.

1. Individual and group assignments: 60%
2. Project proposal (group): 40% (10% letter of intent, 30% final project)

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**Plagiarism/Academic Integrity:** McGill University values academic integrity.

Therefore, all students must understand the meaning and consequences of cheating, plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures (see <http://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 small group learning sessions is compulsory.

**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 objects of the course.

**Consequences of not completing assignments as requested:** Assignments and exams must be submitted within the set timelines. A penalty of one point will be applied for each day of delay (up to a maximum of 20%).

**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.

## OCC1 438 PSYCHOSOCIAL THEORIES IN OT

**Credits:** 3

**Prerequisites:** Success completion of all U2 courses including clinical affiliation requirements

**Instructor:** Beverlea Tallant, PhD, O.T. (C) (Coordinator)

**Access to the Instructor:**

B. Tallant, Hosmer H205, by appointment.

Tel: (514) 398-4522, Email: [Beverlea.tallant@mcgill.ca](mailto:Beverlea.tallant@mcgill.ca)

**Course Objective:** The course is designed to acquaint the student with the current theoretical frames of reference used in Occupational Therapy for clients with psychosocial dysfunction. The implementation of these theories in the practice of Occupational Therapy will be discussed.

**Course Structure:** This course will consist of five (5) hours per week of interactive lectures and/or problem-solving case-based discussions over a nine (9) week period.

**Student Learning Objectives:**

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

1. Define the terminology inherent in each of the theories.
2. Discuss and compare the theories and their relevant merits for specific psychiatric clients and/or group of clients with psychosocial dysfunction.
3. Design treatment programs in Occupational Therapy selecting the appropriate theoretical frame of reference, evaluation procedures, therapeutic activities and relationships for a specific individual and/or group of clients with psychosocial dysfunction.
4. Demonstrate the professional behaviours of autonomy, responsibility to the profession, self-regulation, teamwork, clinical reasoning, and constructive critical analysis.

## **Course Content:**

### **Theoretical Frames of Reference**

- Object Relations Frame of Reference
- Lifespan Development Frame of Reference
- Behavioural Frame of Reference
- Cognitive - Behavioural Frame of Reference
- Occupational Behaviour Frames of Reference

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

**Course Materials:** Available at the McGill University Bookstore.

### **Required texts:**

Bruce, Mary Ann Giroux & Borg, Barbara (2002) Psychosocial frames of reference: Core for occupation-based practice, 3<sup>rd</sup> edition, Thorofare, NJ: SLACK Incorporated.

**Course pack** - will include the required readings and a list of the recommended readings. The professor may assign additional readings, if highly pertinent, as they become available in the literature while the course is being taught.

### **Recommended texts:**

Stein, Franklin & Cutler, Susan K. (1998) Psychosocial occupational therapy: A holistic approach, 2<sup>nd</sup> edition, Albany, NY: Delmar, Thomson Learning Incorporated.

Cole, Marilyn B. (1998) Group dynamics in occupational therapy: The theoretical basis and practice application of group treatment, 2<sup>nd</sup> edition, Thorofare, NJ: SLACK Incorporated.

**Student Assignment and Evaluation:** Detailed information will be distributed during the first week of lectures including course materials required for the group project.

### **Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

### **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](http://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:** Students are expected to attend all lectures and are required to attend all student presentations.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** Lateness will be penalized.

**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.”

# OCC1 440 PREVOCAATIONAL AND VOCATIONAL REHABILITATION

**Credits:** 2

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements

**Instructor:** Bernadette Nedelec, BSc OT (C), erg. PhD (Coordinator)

**Access to the Instructor:**

Before and after each lecture or by appointment

Tel: (514) 398-1275, Email: [bernadette.nedelec@mcgill.ca](mailto:bernadette.nedelec@mcgill.ca)

**Course Objective:** To introduce students to work theory and its application to prevocational and vocational assessment and training in rehabilitation. The application of ergonomics to rehabilitation will be discussed in a case-based context.

**Course Structure:** This course presents the main components of vocational rehabilitation (job demands analysis, functional capacity evaluation, and return to work). Vocational rehabilitation issues regarding the psychology of activity participation, cumulative trauma injuries and head traumas are presented. Ergonomic principles are introduced. Practical learning opportunities include a measurement lab, an onsite office ergonomics evaluation and on onsite workplace evaluation.

The course consists of six (6) hours per week for nine (9) weeks.

**Student Learning Objectives:**

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

1. conduct a worksite job tasks analysis
2. define, discuss and critically evaluate functional capacity evaluation protocols
3. define and discuss ergonomic principles and their application to rehabilitation
4. evaluate and elaborate upon intervention strategies to reduce occupational performance barriers limiting clients' ability to return to work
5. develop safe and effective return to work rehabilitation programs

**Course Content:**

- Schedule to be distributed the first day of class
- Content:
  - Introduction to Vocational rehabilitation
  - Jobs Tasks Analysis
  - Functional Capacity Evaluation
  - Office Ergonomics

- Workstation Measurement
- Return to Work
- Psychology of Activity Participation
- Prevocational Evaluation
- Ergonomic Principles for Injury Prevention
- Head Injuries
- Cumulative Trauma Disorders

**Course Materials:**

**Required texts:**

Trombly, CA and Radomski MV eds. Occupational Therapy for Physical Dysfunction. Baltimore, Maryland: Williams and Wilkins, 5<sup>th</sup> ed., 2002.

Course Pack and Course Notes.

**Required readings:**

Rice VJ and Luster S. Restoring Competence for the Worker Role. In: Trombly, CA and Radomski MV eds. Occupational Therapy for Physical Dysfunction. Baltimore, Maryland: Williams and Wilkins, 5<sup>th</sup> ed., 2002 (pages 715-744).

Bear-Lehman, J. Orthopedic conditions – Low Back Pain. In: Trombly, CA and Radomski MV eds. Occupational Therapy for Physical Dysfunction. Baltimore, Maryland: Williams and Wilkins, 5<sup>th</sup> ed., 2002 (pages 922-924)

**Optional readings:**

Cooper VA, Rigby P, Letts L, Stewart D, Strong S, Law M. Assessing Context: Home, Community, and Workplace Access. In: Trombly, CA and Radomski MV eds. Occupational Therapy for Physical Dysfunction. Baltimore, Maryland: Williams and Wilkins, 5<sup>th</sup> Ed., 2002 (pages 249-252)

Shamberg S. Optimizing Access to Home, Community, and Work Environments. In: Trombly, CA and Radomski MV eds. Occupational Therapy for Physical Dysfunction. Baltimore, Maryland: Williams and Wilkins, 5<sup>th</sup> Ed., 2002 (pages 783-795)

**Student Assignment and Evaluation:**

Practical lab:	5%
Ergonomic Workstation Evaluation:	15%
Workplace Job Tasks Analysis Report:	30%
Final exam	50%

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.



**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](http://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:** Students are expected to attend all lectures and actively participate in class discussions.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Late submission of assignments will be penalized 5% per day.

**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."

## OCC1 441 ADVANCED TECHNOLOGY

**Credits:** 2

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements

**Instructor:** Cynthia Perlman, MEd (Coordinator)

**Access to the Instructor:**

Office: Hosmer House Room 306, Tel: (514) 398-5593,  
Email: [cynthia.perlman@mcgill.ca](mailto:cynthia.perlman@mcgill.ca)

**Course Objective:**

To explore and examine the current knowledge and evidence about product design, development, accessibility and 'fit' of assistive technology in relation to a client's occupational performance needs and the environmental context.

**Course Structure:** Exploration and application of high and low-technology assistive devices to promote independence, participation, and health leading to fulfilment of occupational performance needs, including self-care aids, alternative computer access, augmentative communication, wheelchair controls and electronic aids to daily living. Social and professional issues regarding technology service delivery will be explored.

The course consists of three (3) hours per week for nine (9) weeks, comprising lectures, seminars, and student-directed collaborative activities.

**Student Learning Objectives:**

At completion of the course, the student will be able to:

1. Recognize the functional, adaptive, and integrative uses of current high and low assistive technology devices used across the lifespan.
2. Apply this knowledge to determine suitability for case-based contexts, meeting occupational performance, accessibility and environmental (physical, social, cultural, institutional) needs, i.e. determine best 'fit' between client, environment, and assistive technology.
3. Examine knowledge of current assistive technology (low and high technology) used in both public and private sectors, including computer access, computer mice, electronic aids to daily living, adapted keyboards, switches, and telephones.
4. Explore and appraise the appropriate functional, adaptive, and contraindicated uses of current assistive technologies incorporating prior knowledge of various musculoskeletal, neurological, and/or developmental conditions.



**Attendance:** Students are required to attend all lectures and student project presentations.

**Right to write in (English or in) French:** Students have the right to write essays, examinations and projects in French, however should not mix both English and French in the same text.

**Consequences of not completing assignments as requested:** Oral and written project presentations will be graded according to the specific project criteria. All late submissions of the project will result in a deduction of 10%. A failure to submit a part of the written project will result in complete deduction of marks for that part.

**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.”

## OCC1 442 ENABLING ENVIRONMENTS

**Credits:** 2

**Prerequisites:** OCC1-339 Strategies for Independent Living

**Instructors:** Erika Gisel, PhD (Coordinator)

**Access to the Instructor:**

By appointment

Erika Gisel, Hosmer 204, Tel: (514) 398-4510, Email: [erika.gisel@mcgill.ca](mailto:erika.gisel@mcgill.ca)

**Course Objective:** To bring together Occupational Therapy and architecture students in order to gain greater depth and breadth in the assessment and development of accessible physical structures.

**Course Structure:** This course will consist of lectures, field trips, and studio work.

**Student Learning Objectives:**

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

1. Assess an environmental problem taking the unique client needs into account.
2. Develop environmental solutions in collaboration between Occupational Therapy and architecture students.
3. Present their solution with justifications regarding their objectives, needs and feasibility of a given solution.

**Course Content:** Course content focuses on the specific environmental needs of persons with disabilities. The history and provisions in the law for environmental accessibility will be explored.

**Course Materials:**

**Required texts:**

The workbook (available from E. Gisel) contains pertinent reading selections compiled from the medical as well as the architectural literature. Readings will be chosen to be pertinent with the weekly topics.



## POTH 402 ADVANCED RHEUMATOLOGY

**Credits:** 2

**Prerequisites:** Basic knowledge of the rheumatic diseases and clinical experience in the treatment of physical disabilities

**Instructors:** Ada Pagnotta (Co-coordinator)  
Susan Sofer (Co-coordinator)

**Access to the Instructors:**

Instructors are available by appointment only.

Ada Pagnotta can be contacted by email [adapagnotta@hotmail.com](mailto:adapagnotta@hotmail.com) and at the Jewish Rehabilitation Hospital, Tel: (450) 688-9550 (ext. 221), Monday to Friday from 8h30 to 16h30.

Susan Sofer can be contacted by telephone: (514) 733-1414 or by email: [susansofer@actdriving.com](mailto:susansofer@actdriving.com)

**Course Objective:** This course is designed for U3 Occupational Therapy students who are interested in developing professional proficiency in the specialized area of rheumatology practice. The course offers a comprehensive review of disease pathology in several common rheumatic diseases, an orientation to specific O.T. tasks and responsibilities in this area of expertise, and opportunities to develop skills in O.T. evaluation and treatment in rheumatology practice.

**Course Structure:**

Class Schedule: 9h00 – 12h00, one (1) hour lunch, 13h00 – 16h00  
Five (5) consecutive Sundays except for one Sunday (TBA) during spring break

Class Location: Jewish Rehabilitation Schedule  
3205 Place Alton Goldbloom  
Chomedey, Laval

***Report to front entrance for the first class***

Active thinking and participation of the students is expected in this course.

Conjointly with lecture presentations on the same content and with instructor guidance, the students will engage in small group work for practice in administering evaluations and for practice of critical thinking in case management.

Persons with arthritis will be invited on a regular basis to engage in discussions with the students and assist in demonstrations of evaluation procedures.

Instructors individually teach different portions of the course.

### **Student Learning Objectives:**

By the end of the course, students will be able to:

1. identify the common rheumatic conditions from a multi-system focus of disease process such as disease etiology, pathophysiology and pathomechanics of deformity
2. identify O.T. tasks and responsibilities as a member of an interdisciplinary rheumatology team and as a liaison for patients to arthritis community resources
3. -demonstrate satisfactory skill in administering O.T. physical evaluation  
-demonstrate satisfactory skill in interpretation of results from the physical and functional evaluations  
-demonstrate satisfactory skill in critical thinking and planning a comprehensive client-centred O.T. treatment

### **Course Content:**

1. Major rheumatic diseases such as:

- ◆ Polyarthritis :  
Rheumatoid Arthritis  
Juvenile Rheumatoid Arthritis  
Ankylosing Spondylitis  
Psoriatic Arthritis  
Reiter's Syndrome
- ◆ Connective Tissue Disorders :  
Systemic Lupus Erythematosus  
Scleroderma  
Polymyositis and Dermatomyositis
- ◆ Degenerative Joint Diseases

Other :

Fibromyalgia

2. Detailed O.T. assessments in the following areas:

Musculoskeletal  
Self-care  
Instrumental activities of daily living  
Hand  
Foot



3. O.T. treatment interventions in the area of:
  - Patient education
  - Functional adaptation such as adaptive methods and assistive devices in ADL, IADL, work, and leisure
  - Orthotics
  - Remedial activities and physical modalities
4. Review of current interdisciplinary practices in rheumatology

### **Course Schedule**

<b>Week 1</b>	<b>9h00 – 12h00</b>	Systemic Joint Disease vs. Orthopedic Joint Disorders O.T. Approach to all systemic joint diseases (Ada Pagnotta)
<b>Week 1</b>	<b>13h00 – 16h00</b>	Comprehensive team management of the rheumatic patient at different stages of physical and functional involvement (Ada Pagnotta)
<b>Week 2</b>	<b>9h00 – 12h00</b>	Evaluation Methods and O.T. Interventions (Ada Pagnotta)
<b>Week 2</b>	<b>13h00 – 16h00</b>	Foot Pathology , Evaluation and Treatment (Susan Sofer)

### **Spring Break**

<b>Week 3</b>	<b>9h00 – 12h00</b>	Hand Pathology and Evaluation (Susan Sofer)
<b>Week 3</b>	<b>13h00 – 16h00</b>	Hand Pathology and Evaluation (Susan Sofer)
<b>Week 4</b>	<b>9h00 – 12h00</b>	Patient Education Instruction Architectural and Environmental Barriers Assistive Devices and Equipment for Functional Difficulties (Ada Pagnotta)
<b>Week 4</b>	<b>13h00 – 16h00</b>	Spondyloarthropaties, Fibromyalgia Juvenile Rheumatoid Arthritis (Ada Pagnotta)

<b>Week 5</b>	<b>9h00 – 10h30</b>	Case Presentation Lab preparation (Susan Sofer)
<b>Week 5</b>	<b>10h30 – 12h00</b> <b>13h00 – 16h00</b>	Connective Tissue Diseases Surgical Interventions and Post-op Treatments (Susan Sofer)

**Course Materials:**

**Required text:**

*The Rheumatic Disease Assessment Battery*. Ada Pagnotta and Susan Sofer. Copies available in class.

**Recommended text:**

*Rheumatic Disease in the Adult and Child: Occupational Therapy and Rehabilitation*. Jeanne Melvin, edition 3, F.A. Davis Company.

**Suggested readings:**

Several journal articles, pamphlets and prepared handouts are provided for additional reading and for deeper comprehension of the material covered in class but for which the student is not responsible for the final exam.

Access to the Internet is necessary for part of assignment 1.

**Student Assignment and Evaluation:**

15% assignments  
20% mini quizzes  
15% lab exam  
50% final exam

**Assignments: 15%**

Assignments are group work projects.

1. Exploring resources and well-being options for people with arthritis in the community: short report, class presentation, due by session 3
2. Case Presentations: setting goals and planning treatment, due dates TBA
3. Designing a hand or foot home exercise program, due on final exam date

Assignments must be handed in for due dates, no late submissions accepted.

**Mini Quizzes: 20%**

Given at the beginning of each class day with the exception of the last class when it is given on the day of the final exam. The quizzes cover the previous class material included in the lecture notes and required reading handouts. Short answers questions.

**Lab Exam: 15%**

Technique administration and identification of purpose in 5 pre-selected hand and foot evaluation methods. The lab exam is given on a designated lecture day.

**Final Exam: 50%**

The location of the final exam is to be announced (Jewish Rehabilitation Hospital or McGill campus) off-class time 2 weeks prior to official final exam period.

The final exam is a combination of true and false, best answers, multiple choice, matching and short-answers questions. There will be 1 case presentation provided for long-term, short-term goals and intervention planning.

The student may submit their short answers in French.

A missed final exam will be replaced by a term paper if the final exam was not written for substantiated and valid reason(s). The instructors require written notice of this circumstance.

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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:** Students who miss more than 10% of laboratory or small group sessions for reasons which are not valid or approved may be refused permission to write the final exam.

Attendance at all classes is compulsory Absences for reasons of sickness or family tragedy must be documented.

If a student must be absent from a class (for valid reasons), the instructor must be notified and the marks of the missed quiz will be redistributed.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** An individual who does not complete a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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 403 ADVANCED PAEDIATRICS**  
**"Clinical Reasoning in OT Interventions with Infants & Children"**

**Credits:** 2

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements

**Instructors:** Laurie Snider, PhD (Coordinator)

**Access to the Instructor:**

Hosmer Room 302, Tel:(514) 398-5863, Email: [laurie.snider@mcgill.ca](mailto:laurie.snider@mcgill.ca)  
(By appointment, please)

**Course Objective:** To examine specialized interventions of the Occupational Therapist in developmental paediatrics.

**Course Structure:** A lecture seminar course (10 sessions at three and a half (3.5) hours)

**Student Learning Objectives:** On completion of this course, the student will be able to:

1. Identify key steps in the clinical reasoning process and apply them to OT interventions, which are specific to infants and children in developmental paediatrics.
2. Relate the fundamental processes of impairment, disability and handicap to the occupational performance of infants and children.
3. Explain how the motor and sensory systems influence movement and learning in infancy.
4. Identify key studies in the literature that address the quality of the evidence for motor and sensory system influence on functional outcomes.
5. In different professional contexts, be able to apply the process of clinical reasoning.

**Course Content**

- **A description of the topics to be addressed in the course:**  
*To be handed out on the first day of class.*

## Course Materials:

**Required texts:** (available on reserve at the Health Sciences Library)

Case-Smith, J. (1998). Pediatric occupational therapy and early intervention (2nd Ed.) Butterworth-Heinemann.

Parham, L.D., Fazio, L.S. (1997). Play in occupational therapy for children. Toronto, Mosby.

Missiuna, C. (2001). Children with developmental coordination disorder: Strategies for success. New York: Haworth Press.

Dunn, W. (2000). Best practice occupational therapy B In community services with children and families. Thorofare: Slack (Chapters 3 &4)

## Student Assignment and Evaluation:

### Evaluation:

Class/Seminar Participation	20%
Clinical Intervention Project Presentation	40%
Clinical Intervention Project Report	40%

## Special Requirements for Course Completion and Program Continuation:

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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 compulsory. Absences for reasons of sickness or family tragedy must be documented.

**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 objects of the course."

**Consequences of not completing assignments as requested:**

Students are expected to complete all assignments and learning activities as outlined in the Evaluation section.

**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 410 CHILD AND ADOLESCENT PSYCHIATRY

**Credits:** 3

**Prerequisites:** Successful completion of all U2 courses including clinical affiliation requirements.

**Instructor :** Sylvie Laplante, BSc (Coordinator)

**Access to the Instructor:**

Telephone: (514) 761-6131 #2028, email: sylvie.laplante@douglas.mcgill.ca

**Course Objective:**

Present the principles of basic psychosocial and developmental assessments and treatment approaches regarding the most common child and adolescent psychiatric conditions.

**Course Structure:** This course consists of three (3) hours of lectures, observation and problem solving case-based analysis and discussions done in small groups or individually, once a week over a full semester.

**Student Learning Objectives:**

Upon completion of this course, the student will:

1. Identify the characteristics (signs and symptoms) of the most commonly encountered psychiatric conditions in early childhood, pre-adolescence and adolescence seen in Occupational Therapy;
2. Identify the functional consequences related to these conditions;
3. Discriminate and apply the most commonly used theoretical frames of references used in youth mental health;
4. Select appropriate assessment and treatment methods using evidence based knowledge;
5. Produce intervention plans that are appropriate with the evaluations outcome and consistent with a client-centered practice;
6. Discuss the significance of practical aspects of Occupational Therapy practice in youth psychiatry i.e.: considering the family, ensuring security, using specialized equipments, issues of confidentiality in children, use of play as therapy...
7. Become familiar with and able to apply the following therapeutic interventions: Basics of sensory integration therapy, Cognitive-behavioral techniques, basic behavioral methods: modeling, relaxation techniques, chaining for teaching skills; Psycho-educational methods, Group dynamics, and Play therapy .



8. Each student will be assigned a real case of a child or adolescent during the semester and elaborate an appropriate intervention plan using their researched knowledge.

**Course Content:**

1. Introduction to Occupational Therapy in Child Psychiatry  
basic theories, general clinical information, and introduction to Psychiatric issues in Early Childhood: Conditions and OT intervention.
2. Developmental Disorders: Conditions and OT interventions.
3. Pre-adolescent Issues: Conditions and OT intervention.
4. Adolescence and its challenges: Conditions and Occupational Therapy assessments and intervention particularities.
5. Visit of a Child and Adolescent Psychiatric Facility, participation to intakes, assessments and/or intervention, groups, class observation, therapeutic equipment trial...
6. Sexual Abuse Intervention as a Specialty.
7. Individual and group psychotherapy.
8. Play Therapy

**Course Materials:**

**Required texts:**

1. Kaplan, H.I. & Sadock, B.J. (1998). Synopsis of Psychiatry – Behavioral Sciences/ Clinical Psychiatry. Eighth edition.
2. Course pack (Available at McGill Book Store)
3. Additional handouts will be provided in class.

**Student Assignment and Evaluation:**

- |                                      |       |
|--------------------------------------|-------|
| 1. Class assignments                 | % TBA |
| 2. Quiz to review reading materials  | % TBA |
| 3. Case study and Class presentation | % TBA |
| 4. Final exam (essay type)           | % TBA |

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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 compulsory. Absences for reasons of sickness or family tragedy must be documented.

**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 objects of the course.”

**Consequences of not completing assignments as requested:** All assignments must be completed in order to pass this course.

**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 441 RESEARCH ELECTIVE

**Credits:** 3

**Prerequisites:** POTH 401 Research Methods or equivalent

**Instructor:** Nicol Korner-Bitensky, PhD (Coordinator)

**Access to the Instructor:**

Office: Davis Room 45 Tel: (514) 398-5867, Email: [eva.kehayia@mcgill.ca](mailto:eva.kehayia@mcgill.ca)

**Course Objective:** The purpose of the Research Elective is twofold: to gain graduate level knowledge on research methods and, to create and conduct a research study that yields information related to rehabilitation and is “presentable” or “publishable”.

**Course Structure:**

Weekly three (3) hour sessions in class and at times on-site for nine (9) weeks. Students will decide together on a group project they wish to undertake.

**Student Learning Objectives:**

Upon completion of this course the student will have completed each step in the conduct of an actual research project and should be able to:

1. formulate a clear research question that can be successfully realized
2. conduct a literature review on a specific topic
3. analyze the quality of the literature related to a specific topic and identify gaps in knowledge and opportunities for further research
4. define clear study objectives, including operational definitions
5. create a study protocol that includes a description of the rationale, subjects, methods, analysis
6. critically appraise existing consent forms and create a consent form that respects the guidelines for informed consent of subjects
7. conduct a research study, being aware of each of the steps needed to develop and conduct the research, including collection of the data and preparation of the data for analysis using a computerized database
8. analyze the results using appropriate basic descriptive statistics and inferential statistics
9. interpret the results based on the research findings and past work in the area
10. prepare the results for presentation or publication in written format and disseminate the results

**Course Content:** Subjective to the research topic chosen and will be defined in the first week of classes

**Course Materials:** None, but specific readings will be assigned relative to the research project pursued.

**Student Assignment and Evaluation:**

Completion of the specific goals of the project demonstrating that knowledge related to research methodology has been gained, in accordance with the specified timeline, and submission of a final paper: 100%.

Examples of reasonable projects:

1. Plan and conduct a small survey of students, patients, parents, caregivers, health professionals or others related to rehabilitation.
2. Design and conduct a feasibility or pilot study
3. Analyze an existing clinical database and prepare information for presentation.
4. In collaboration with a clinical department, plan an evaluation of a specific program.

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://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:** Group participation in all activities is expected.

**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 objects of the course."

**Consequences of not completing assignments as requested:** An individual who does not complete their portion of a required assignment and does not have a university recognized reason for deferral would receive a 0 in that portion of the evaluation.

**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 446 CURRENT TOPICS IN REHABILITATION- GERIATRIC

**Credits:** 2

**Prerequisites :** Successful completion of all U2 courses including clinical affiliation requirements

**Instructors:** Isabelle Gélinas, PhD (Co-coordinator)  
Aliko Thomas, MEd (Co-coordinator)

### **Access to the Instructors:**

I. Gélinas, Davis D37, Telephone: (514) 398-4514, email: isabelle.gelinas@mcgill.ca  
Office hours are posted outside instructor's office

A. Thomas, Davis D30, Telephone: (514) 398-4496, email: aliki.thomas@mcgill.ca  
Office hours are posted outside instructor's office

**Course Objective:** This is a professional elective course for U3 Occupational Therapy students. It is designed to address the complexity of the Occupational Therapy interventions with the geriatric client, examine the various causes of Occupational Performance dysfunction, examine the structure and organization of geriatric health care delivery and the unique role of Occupational Therapists in this context. Students in this course will utilize a client-centered approach to the evaluation and treatment of the older adult in different clinical scenarios.

**Course Structure:** The course will be in a lecture/seminar form where students will be expected to attend classes prepared, actively engage in group discussions and critically evaluate topics discussed and literature reviewed. The instructors will use lectures, readings, discussions, presentations, critiques and fieldtrips.

**Class time:** Tuesdays: 1:00 pm to 3:00 pm  
Thursdays: 1:30 pm to 3:00 pm

### **Student Learning Objectives:**

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

- 1) Identify the changes that accompany the normal aging process and describe the environmental factors that interact with the elderly person's occupational performance.
- 2) Explain the major agents of geriatric health care delivery and the associated referral process to the multidisciplinary team.
- 3) Explain the unique role of OT within the various areas of geriatric practice.

- 4) Analyze the various risk factors that act upon an older adult's occupational performance and the causes and consequences of the resulting dysfunction.
- 5) Identify and explain the existing and developing methods of evaluation and treatment approaches used with a geriatric clientele in keeping with evidence-based practice.
- 6) Apply a client-centered approach in the evaluation and treatment of a geriatric clientele within different clinical scenarios.
- 7) Analyze ethical considerations in the intervention approach to the geriatric client.

### **Course Materials:**

#### **Required texts:**

Functional performance in older adults. Bette R. Bonder & Marilyn B. Wagner.  
Publishers: F.A. Davis, 2001.

Course pack available at the bookstore.

All readings included in this course syllabus are mandatory and it is the student's responsibility to ensure that he/she has read all the materials prior to class.

It is possible that additional recommended and required readings can be provided to students throughout the semester. Students will be responsible for obtaining and completing these readings.

It is strongly recommended that each student have access to the Publication Manual of the American Psychological Association (**APA**).

All students should have access to library and computer services for research required in final term projects as well as for complementary readings.

#### **Student Assignment and Evaluation:**

In class participation	5%
Reading Guides (2)	10%
Site visit	20%
Quiz	10%
Project	55% (5% for outline, 50% for paper)

Participation will be evaluated by the instructors and involves active participation and quality contribution to the class and to the development of the course. Remember that participation is not based on quantity but rather on quality of contribution.

All group work will be monitored carefully and any evidence of inequitable contribution of team members to the assignments will be evaluated accordingly. Reading guides will be handed in to the instructors but will not be graded. All assignments must be produced with word processor, follow APA guidelines and not surpass the length determined by the instructors.

**Special Requirements for Course Completion and Program Continuation:**

Minimum grade of 60%. A supplemental exam is permitted in this course.

**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](http://www.mcgill.ca/integrity) for more information).

**Dress Code:** Professionalism with respect to dressing is encouraged throughout the course of the semester. The assignments that require a group presentation or lab work will be evaluated on presentation and professionalism both with respect to style and dress code. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

**Attendance:** Attendance to classes is mandatory. It is the responsibility of each student to attend classes prepared and be actively involved in her/his learning experience. Although attendance will not be taken, the materials covered in class are subject to evaluation.

**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 objects of the course."

**Consequences of not completing assignments as requested:** Assignments not completed on time will be penalized accordingly. In the event that an assignment cannot be submitted on its due date, students are encouraged to inform the instructor as soon as possible.

**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."