



School of Physical and Occupational Therapy



SP & OT



EXCELLENCE THROUGH GROWTH

MASTER'S APPLIED (OCCUPATIONAL THERAPY): COURSE GUIDE 2011-2012

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I. Master of Science, Applied in Occupational Therapy

A. Important Dates

FALL 2011

- July 28 – September 1 Registration period
- September 1 Classes officially begin
- September 13 Course add/drop deadline
- December 7 Study day Wednesday
- December 8 Exams begin
- December 22 Classes and Exams end

LEGAL HOLIDAYS

- September 5 Labour Day
- October 10 Thanksgiving Day

WINTER 2012

- January 3 Classes officially begin
- January 15 Master's Program application deadline
- January 18 Course change (add/drop) deadline
- February 20 - 24 Study Week
- February 27 Classes begin
- April 14 & 15 Study days Saturday and Sunday
- April 17 Exams begin
- April 30* Classes and Exams end

LEGAL HOLIDAYS

- January 1 New Year's Day Sunday
(Administrative offices will be closed
Monday January 2)
- April 6 Good Friday
- April 9 Easter Monday

Notes (a) In extenuating circumstances exams may be held outside of McGill exam period **(b)** Due to 7 weeks of clinical practicum beginning January 3, followed by 1 week spring break, the M1 academic courses start on February 27 and end on April 30 (including exam period).

B. Curriculum Plan 2011-2012

M1 SUMMER TERM

OCC1 501	Clinical Practicum 1	7cr
OCC1 502	Clinical Practicum 2	7cr

M1 FALL TERM

POTH 612	Advanced Research Methods	3cr
OCC1 618	Applied Psychosocial Theory	5cr
OCC1 620	Work Ergonomics	2cr
OCC1 617	Occupational Solutions 2	6cr

M1 WINTER TERM

OCC1 503	Clinical Practicum 3	7cr
OCC1 622	Community Based OT	3cr
OCC1 623	Assistive Technology	2cr
1 Professional Complementary Courses		3cr

M2 SUMMER TERM

POTH 624	Master's Project	
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Note Implemented and submitted by the end of August. To be credited in the Fall term of M2.

M2 FALL TERM

OCC1 602	Clinical Practicum 4	7cr
POTH 624	Master's Project	6cr

C. Professional Courses

The following course guides are meant to provide an overview of each course. Please be sure to confirm course details with the appropriate course instructor or coordinator at the start of the term.

PROFESSIONAL COURSES

OCC1 501	Clinical Practicum 1
OCC1 502	Clinical Practicum 2
OCC1 503	Clinical Practicum 3
OCC1 602	Clinical Practicum 4
OCC1 617	Occupational Solutions 2
OCC1 618	Applied Occupational Therapy Psychosocial Theory
OCC1 620	Work Ergonomics
OCC1 622	Community-Based Occupational Therapy
OCC1 623	Assistive Technology
POTH 612	Advanced Research Methods
POTH 624	Master's Project

OCC1 501 CLINICAL PRACTICUM 1

Credits: 7

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Prerequisites: Successful completion of all Qualifying year courses as well as acceptance into the Masters' Program.

CPR/First Aid: Students are responsible for certification and renewal of their CPR/First Aid certification. A minimum of a level C course including adult, children and infants, is required. It is the student's responsibility to contact one of the CPR/First Aid course providers (e.g. Red Cross, St-John's Ambulance, Bronze Medallion...), to register and pay the registration fees. Students are required to bring a proof of status to the first clinical seminar in January 2012 (TBA)

Immunization and Mask-Fitting Instructions: Prior to starting their first clinical course, students must ensure that their immunization records are complete and that they have completed their mask fitting. Students are to contact Student Health Services for a mask fitting appointment or attend announced group appointments. All supporting documentation regarding immunization must be submitted to McGill Student Health Services. McGill Student Health Services maintains an active record that is sent to the faculty twice during an academic year.

McGill Student Health Services will provide students with cards that will contain information regarding mask fit and missing vaccines to complete their

immunizations. Cards will be provided to new students during their orientation or during a nursing appointment. When the immunization is complete, the card will be signed and stamped by a nurse from McGill Student Health Services. Students will also be provided with a copy of their record. It is, however, the student's responsibility to ensure that they receive a copy of these records from McGill Student Health Services and bring them to each clinical course.

Please consult this website for information on the specific immunization requirements: <http://www.mcgill.ca/studenthealth/immunize/>

PDSB: Principles for Moving Patients Safely (PDSB) is a pre-requisite for this practicum. All students must attend the mandatory PDSB course content in OCC1-546 in term A and maintain competency in transfer and mobility techniques.

Name Tags: Nametags are organized by the clinical education team and are given to the students during the Nametag Ceremony at the end of the U3/QY Winter term, prior to Clinical Practicum I. Name tags are mandatory and must be worn at all times during the clinical practicum.

Clinical Practicum Seminars: All students must attend the mandatory clinical practicum seminars (TBA). This content builds on the knowledge developed in the Qualifying Year course OCC1-546 with which students are expected to be familiar. An outline of the clinical practicum seminars is provided in the subsequent document.

Computer and Web Access: Computer and web access are required for the mandatory WebCT component of the course.

Security Checks: Some sites (e.g.: Ste-Anne's Veterans Hospital, Summit School, Peter Hall, Centre de Réadaptation de l'Ouest de Montréal,...) require security checks. The security check should be completed as soon as possible as it will take 4 weeks to complete. The institution dataform and FS-PRO indicate which teaching sites require this.

IMPORTANT:

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

Schedule: The overall Program is made up of 58 credits of academic and clinical courses. There are 4 clinical practicum courses which cumulatively require over 1000 hours of clinical practice and have a value of 28 credits.

Course number	Course Title	Number of full-time weeks	Number of credits
OCC1-501	Clinical Practicum	7	7
OCC1-502	Clinical Practicum	7*	7
OCC1-503	Clinical Practicum	7*	7
OCC1-504	Clinical Practicum	8	7

*** Exception: Students undertaking international placements will have a course duration of 61 days if they intend to apply for financial aid.**

Course Description: This first clinical practicum introduces students to history taking, clinical reasoning, assessment and treatment skills for physical and psychiatric conditions and provides exposure to the different roles of health care practitioners in inter-disciplinary client-centered care. Students are expected to begin integration of theory and application to different clinical scenarios. Students will be exposed to different OT interventions in traditional, community service development and role-emerging areas of practice and develop understanding of inter-disciplinary client-centered care.

Course Structure: This is the first of four clinical practicum courses.

Practice education will be arranged with McGill affiliated facilities. At times, students may request a clinical practicum outside of the Montreal region (these regions may also include Canada and international locations including the US). The Occupational Therapy Program has developed specific guidelines pertaining to

out-of-province and international placements. All students must follow these guidelines without exception.

Every attempt will be made by the university to place students within McGill's catchment territory. In the event that there is no availability, students will be placed in rural areas of Quebec and more remote McGill RUIS territory. All costs related to local and distant locations are the students' responsibility and it is expected that students will plan accordingly. In some instances, partial funding is available and all attempts will be made to assist students. Once students have been assigned to their respective course locations, based on interest, clinical profile requirements and site availability, students are not permitted to request changes.

Both traditional, community service development and role-emerging fieldwork sites will be used. The latter will consist of facilities/agencies/programs, which do not employ an Occupational Therapist directly on site. Supervision/consultation will be provided by Occupational Therapists who work in various settings with the relevant expertise. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience. Typically, the role-emerging experience is better suited for the level 2b and 3 student.

This first course is scheduled for 7 weeks full-time. In this practicum, learning objectives and expectations will be considered level 1.

Instructional Methods: Clinical education will be provided by occupational therapists that work in various settings, depending on the rotation type of practicum offered. The type of teaching will be commensurate with the student's level of training and previous fieldwork experience. In conjunction with the on-site practicum learning, students will be expected to engage in peer-learning by using web-based technology tools and maintain a student professional portfolio.

Course Content: The exact nature of the interventions and the type of clientele seen during the clinical course will depend on the clinical setting where each student will be placed. Prior to the beginning of the course, students will be informed in which setting they will be doing their course and with which type of clientele. Details will be specified by the clinical educators at the beginning of the course. 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. Please note that the most up to date contact information is contained in the student data information sheet. Students are expected to abide by policies established at each institution and failure to do so can result in immediate failure

and termination of the course. Students are expected work the hours as stated by the individual setting and additional preparation is expected.

Level 1 Learning Objectives:

The student will be able to:

1. Define OT role and develop professional identity
 - 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 Web-CT)
 - The student will understand his/her role within the setting and begin assuming the role of an OT
2. Develop observational skills
 - The student will be expected to observe all aspects of OT interventions and communicate observations with clinical educator
 - The student will be able to report his/her observations to peers, and other team members
3. Interact Professional
 - 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)
4. Demonstrate competency in communication
 - The student will be able to write simple notes
 - The student will be able to share thoughts with clinical educator in a clear manner
 - The student will be able to report client issues using professional terminology in team meetings with supervision
5. Interview
 - The student will be able to perform a client interview and share findings with clinical educator

6. Analyze activity
 - The student will be able to plan activities for treatment and analyze the activities with accuracy
7. Implement assessments and plan treatment
 - When appropriate, the student will perform parts of or complete assessments
8. Collect data and synthesize 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
9. Apply the concepts of feedback, critical thinking, clinical reasoning as well as self-directed learning
 - Understand the importance and the impact of these concepts in clinical practice
10. Develop personal learning objectives
 - Include these in CBFÉ

Required Texts: The following 4 texts are required for all four Clinical Practicum courses:

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

Please note that it is essential that each OT student purchases this text during the start of the Winter term prior to the first clinical seminar (early January). This text is used for all 4 clinical courses throughout the rest of the program. Note that the bookstore returns all un-bought books in mid-March so this text must be purchased before that time as it is not available later on. All students must submit a section of this text (blank evaluation form) as proof of purchase in accordance with copyright law in the second clinical seminar.

2. Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999.
This text is required for workshop participation and a reference for all future clinical practicum.
3. Student Clinical Experience Booklet.(provided in first clinical seminar)

4. Student Clinical Practicum Manual (provided in first clinical seminar)

Additional readings that sites may assign.

Suggested Readings:

1. Course materials from the previous semesters.
2. Site approval document (CGFE-OT) for specific setting.(located on the school website)

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 clinical educator evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL. All students must complete the on-line site feedback form and submit a downloaded copy of this form to their clinical educator at the time of final evaluation. This form is available at

http://medreports.medicine.mcgill.ca/pls/htmldb/f?p=115:1:322269499841212::::P1_SC HOOL:OTH

It is mandatory for students to complete the **Student Clinical Experience Booklet (a component of the student professional portfolio)** throughout the Program. Each clinical educator must sign this document following each clinical course. Students must bring their completed booklet at the latest one week post completion of the **final** clinical course (OCC1-602) 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 learning objectives for each clinical course as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are expected to post a minimum of two (2) messages on the Web-CT bulletin board related to their clinical practicum during each clinical course(describe the clinical setting, the OT role, case studies as described in the clinical seminar and clinical manual...). Failure to do so will result in a delay of mark assignment. The discussion board creates an on-line community of learners

and creates a forum for student discussion while students are geographically distant.

Students may be expected to complete a project/assignment during their clinical practicum (this will be determined in collaboration with the clinical educator). Students must be prepared to learn in different clinical teaching models such as a peer learning situation, multiple clinical educators with different clientele in the same center and/or inter-professional models.

Special Requirements for Course Completion and Program Continuation:

OCC1-501 Clinical Practicum 1 is a PASS or FAIL course. Students who fail OCC1-501 Clinical Practicum 1 may be granted permission to do a remedial clinical practicum 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 practicum Guidelines). If the repeated course or any subsequent clinical course 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 a clinical practicum may lead to delayed completion of the Program (see Clinical practicum Guidelines).

Supporting students in difficulty during Clinical Practicum:

a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCEs through scheduled mid-term phone calls to clinical educators. The calls allow 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 counselling and assistance in order to optimize chances for a successful learning experience. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counselling 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 and/or students 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 educator, the student and the ACCE from the university. This allows for effective communication between the parties and provides support for both the student and the clinical educator.

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

Dress Code: Professionalism with respect to dressing is encouraged throughout the clinical courses. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement. Appropriate attire includes closed-toe shoes, trousers/shirts that permit physical movement of clients and shirts of a professional nature (not tank tops). It is recognized that appearance is fundamental to the establishment of trust with clients and the professional team. Failure to do so may result in the student being dismissed until appropriate dress code is followed.

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. These arrangements are made between the clinical educator and the student understanding the requirements of the clinical site. In most situations students are exceeding the working hours considering their additional preparation. Students should contact the ACCE in case of prolonged absence. If the clinical educator is absent, he/she must arrange for the student's teaching/mentoring by another therapist. If the clinical educator is a sole/charge therapist, alternative arrangements are made between the ACCE and the clinical educator.

Right to Write in English or French: Every Student has a right to write essays, examinations and theses in English or in French except in courses where knowledge of a language is one of the objectives of the course. Students are expected to write in the language of the facility during their clinical practicum.

All students are reminded to determine their eligibility for licensure with OEQ, respecting Quebec's language laws during M1 of the program. It should be noted

that there may be a waiting list to write the professional French language exam with the Office de la langue française. Failure to register early may result in excessive delay in becoming a member of the provincial order and inability to practice O.T. in Quebec.

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 of Students with Disabilities at 398-6009 before you do this. Failure to do so will result in an inability to accommodate specific learning needs.

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. Failure to respect patient safety at all times can result in immediate failure and termination of the learning experience.

Pregnancy: Students should be advised that many sites are not able to accommodate pregnant students given the work conditions. In such cases, students are recommended to defer their clinical practicum course. Students must inform the ACCE in the event of pregnancy so that appropriate planning can take place and that the site's workplace policies can be respected.

Student Clinical Profile: Students need to complete clinical hours with different populations and settings in order to be considered "entry-level". Students must fulfill rotations in adult physical medicine, mental health and geriatrics in both institutional and community settings. Course assignment is based on site availability, student learning needs and language requirements. Individual interests are prioritized where possible. Students have 48 hours to discuss reasonable concerns once clinical course assignment is posted. Changes to assignments after that time will not be made. Students must be aware that last minute changes to practice area do occur from the site due to staffing issues and students must be prepared to adapt to these unforeseen changes.

FIELDWORK RESPONSIBILITIES IN TRADITIONAL AND COMMUNITY SERVICE DEVELOPMENT SETTINGS

A) Clinical Educator:

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 course.
3. To review with the student the plan set out for the fieldwork course, as well as to 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 or university. Students are expected to complete and revise their own learning objectives on the evaluation form as the course 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 or share supervision with a more experienced fieldwork educator.

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. Failure to respect client confidentiality will result in immediate failure.
2. To strive to reach a “competent” level in assessment, program planning, treatment, report writing and professionalism according to the Profile of OT Practice in Canada (2007).
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. Facilities offering specific rotations and clinical educators are subject to last minute change and students must accept these inevitable changes.
4. To contact the clinical educator a minimum of two weeks prior to the starting date of the clinical course by writing a letter of introduction to confirm time and place of arrival. Students are responsible for picking up their institution data form according to instructions in the confirmation email sent by Croce Riggi. (clinical education administrative assistant)
5. To email/fax the immediate clinical educator's contact information (name, phone, local and email) to the administrative coordinator for clinical education, Mrs. Croce Riggi (croce.filteau@mcgill.ca) during the first week of each clinical course.
6. To complete facility evaluation forms and provide facilities with feedback/evaluation on learning experience (this form is located on-line on our website and referenced in the red clinical manual).

C) Academic Coordinator of Clinical Education (ACCE):

1. To assist with 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 based on availability, interest and clinical profile needs.
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 practice education, 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/teaching to fieldwork educators, both onsite and offsite.
9. To review each fieldwork placement with the student as necessary, facilitate student in developing learning objectives for improved performance at the next clinical course.
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.

CLINICAL PRACTICUM SEMINARS

Credits: 0

Instructors:

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Prerequisites: None

Course Objective: To prepare students for their on-site clinical practicum and review clinical profile.

Course Structure: Prior to M1, Qualifying Year/U3 students will participate in 1-2 preparatory seminars, dates to be announced during term B (January). Students who participated in international placements and role-emerging placements may be invited to make brief presentations during an international fieldwork symposium and all students are invited to attend.

Student Learning Objectives:

1. To inform students regarding the policies and procedures related to Clinical Practicum
2. Understand application of feedback and evaluation
3. To review clinical profile and address outlined strengths and weaknesses in previous clinical placements promoting reflective practice

4. To review personal learning objectives
5. To be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA
6. To acquire strategies in improving his/her employability
7. To prepare for future mentoring/teaching role

Course Materials: Refer to course materials for OCC1-546 Strategies in OT Professional Practice and required texts for this course.

Attendance: Attendance during mandatory clinical practicum seminars is a prerequisite for each Clinical Practicum. Failure to do so will result in non-admission to the clinical practicum. An outline of the seminars is provided below.

Term	Date	Content	Preparatory Learning Activities
U3/QY Winter term	Seminar 1: (mandatory) 1 st week of January (2 hours)	Overview of policies and procedures of clinical education Requirements: CPR, immunization, mask fitting, criminal check Processes for international and out-of-province clinical courses	View Module 1 www.preceptor.ca
	Seminar 2: (mandatory) Early February (2 hours)	Competency based Fieldwork Evaluation (feedback and evaluation) Portfolio WebCT Being a McGill ambassador	View Module 2,3 and 7 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Summer term		Clinical Practicum 1 (Level 1) Clinical Practicum 2 (Level 2A)	
M1 Fall term	Seminar 3: (mandatory) September (3 hours)	Debriefing of summer clinical practica Learning objectives and the Evaluation tool (CBFE)	View Module 6 www.preceptor.ca TBA: Readings in Red clinical booklet

		Dealing with feedback and conflict	
M1 Winter term		Clinical Practicum 3 (Level 2B)	
M1 Winter term	Seminar 4: March (optional) (3 hours)	International Fieldwork Symposium	
	Seminar 5: April (mandatory) (2 hours)	Debriefing of clinical practicum 3	
	Seminar 6: May (mandatory) (1 hour)	Reflection/Transition into Practice: New roles	
	Seminar 7: June (optional) Seminar 8: (1 hour) (optional) (3 hours)	CAOT licensure OEQ Guidelines for Documentation workshop	
M2 Fall term		Clinical Practicum 4 (Level 3)	

TYPES OF CLINICAL PRACTICA

There are 2 types of Practice Education:

1. Traditional/Community Service Development Placements
 - A) Quebec Placements
 - B) Out-Of-Province Placements
 - C) International Placements
2. Role-Emerging Fieldwork Placements

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 cancellations.

A) QUEBEC PLACEMENTS:

Students will be placed in McGill Affiliated Facilities in the greater Montréal area/McGill RUIS 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 practice offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical practica beyond the McGill RUIS in the province of Quebec to the ACCE. Availability is dependent on other universities' clinical practica schedules and sites' ability to accept a McGill student within a non-McGill RUIS institution.

B) OUT-OF-PROVINCE PLACEMENTS:

Students who are interested in doing their clinical placement in another province may do so by following the application procedure as announced by email by the ACCE during the Fall term. 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 practica courses in the province of Quebec. There is an application fee for out-of-province placements (currently 150\$) which is paid by cheque only.

Students must sign an intent form confirming that they will accept the out-of-province offer upon application. Offered sites will only be refused in the event that the practice rotation does not match the student's profile. In the event that the National Placement Service cannot find a practice site for the student, the application fee is non-refundable.

Deadlines for Out-of-Province placements in M1 and M2

Approximate deadline to submit completed request form for a M1 placement in summer placement 2012	October- November 2011
Approximate deadline to submit completed request form for a M1 placement in Jan/Feb 2013	End of September 2012 (exact date to be confirmed/announced by email)
Approximate deadline to submit completed request form for a M2 placement in Sept/Oct 2013	January 2013

IMPORTANT: Under no circumstances, should students attempt to contact sites independently within Canada. Possible contact names should be given to the ACCE and AACCE. Non-compliance will result in the student's application being rejected without refund.

C) INTERNATIONAL PLACEMENTS

Policy:

Eligibility Criteria:

1. To be considered for a clinical course 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 have some contacts 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. Students are encouraged to contact the McGill Exchange Office located in the Brown Building for possible funding support. There is the possibility of partial funding support based on financial need provided that the student's clinical course is of 61 days duration. Applications are made directly to that office and it is suggested that the application supports the student in citing the entire degree program costs as students cannot work during the continuous Masters Professional program. This office will review eligibility on a case by case basis.
- 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 cancellations. 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.
- e. 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 first clinical seminar. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education by the announced deadline. An announcement will be sent to the class in January of QY/U3 announcing the application deadline. Please note that there is only one application opportunity in the Masters Professional Program.

Twelve months before the onset of the applicable fieldwork session, the student must request in writing, to the Academic Coordinator of Clinical Education, his/her wish to complete practice education outside of Canada.

The letter should state:

1. The country of desired destination, indicating an awareness of cultural, gender and social differences, and environment
2. Why the student would like to do an international placement in that country, what the student hopes to learn and what the student can contribute to the international agency/institution
3. The requested clinical course for completing this experience

International practice education is a privilege and subject to the approval of the ACCE/Occupational Therapy Faculty. The student shall obtain a letter of reference from a suitable referee (past mentor) or one faculty member to support the application to participate in out-of-country fieldwork. 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 international fieldwork.

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 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 clinical educator.
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 (please refer to international binder of past experiences and CD-rom in D4).
3. The School reserves the right to limit the total number of international placements organized per year subject to capacity.
4. Students may apply for a maximum of two international placements, overall, in the following combination:
 - one in the US* and one overseas;

*Please note that some restrictions may apply to US placements for 2012-2013. It is the student's responsibility to check with the sponsoring institution as to particular visa requirements and eligibility for a hands-on practicum.

5. A second international practicum may be undertaken only if the student has performed satisfactorily in the first international practicum.
6. The first opportunity for a student to do international fieldwork will be in the second summer clinical practicum in M1. The course can be scheduled during the available weeks following Clinical Practicum 1.
7. The international practicum 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 practicum and to reassign the student locally based on existing availability.

Responsibilities:

Student: The student will:

1. Commit to the practicum 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 practicum in which he/she wishes to complete his/her fieldwork. The following should be included in the letter:

Permission has been granted from McGill University - Occupational Therapy Program to investigate the possibility of completing fieldwork in that country.

Reasons for seeking fieldwork in that country.

Dates and length of placement.

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 application acceptance 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 (international student experience form) 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. All students participating in international fieldwork are expected to prepare a short presentation for the international symposium to document their learning.
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 practicum.

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 clinical educator(s) if deemed necessary

The above must be forwarded to:

Caroline Storr

Assistant Professor/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. 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. 3. Sign an affiliation 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 or illness of the occupational therapy clinical educator.
4. 4. Commit to practicum (specific dates to be determined and approved by both the ACCE and supervising Occupational Therapist) in writing.
5. 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 and complete the evaluation form.

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. Reserve the right to request an abbreviated resume for the Occupational Therapy Department and the potential clinical educator, 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
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. Liability certificate from McGill risk management office
 - d. School of Physical & Occupational Therapy Course Guide(s) containing curriculum and/or electronic documentation
 - e. Student performance/fieldwork objectives
 - f. Policies related to:
 - i. Marking guidelines
 - ii. Student Evaluations
5. Notify student to finalize travel and accommodation arrangements.
6. Provide resource material for clinical educator (when necessary) which will be delivered by the student.
7. Initiate contact with facility via email at mid-term in order to obtain feedback re: progress in placement,
8. Write letter of appreciation to facility during annual acknowledgement period.

INTERNATIONAL PLACEMENTS SCHEDULE

Winter term (qualifying year/BSc 3 option): announcement to students of deadline for applying for international practica and orientation and introduction to International Placements. This is announced in OCC1-546 Fall term and presented during the first clinical seminar (Winter term).

Requests after this period will not be considered

RESPONSIBILITIES OF STUDENT	SUGGESTED TARGET DATES
Request the international clinical course (or Item # 1)	12 months prior to clinical course. Students must respect deadline provided by the ACCE.
Accept responsibility for <u>all</u> items mentioned in #2 (or Item 2)	Immediately upon acceptance by ACCE
Find the facility and/or select from list of available sites and write a letter requesting a placement (or Item 3)	Immediately upon being granted approval 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 (practica in Quebec or outside Quebec) if the international placement is cancelled	ongoing
Agree to complete student evaluation of practica and ensure that CBFE is completed at Mid-Term and Final	end of practica

II ROLE-EMERGING FIELDWORK PRACTICA

Introduction: The 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: 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, primary care, etc.) 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 Practica:

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into new settings
- to produce a therapist more competent in sustainable program development
- to gain experience in identifying clients'/agency needs
- to become familiar with the socio-cultural environment of the client(s)/program
- 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:

Seven (7) or eight (8) weeks full-time placement (in clinical practicum II, III or IV). 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 clinical educator).

It is the students' responsibility to secure an interested facility and an off-site OT clinical educator. Students should arrange a meeting with the ACCE for a list of sites and clinical educators to assist their search. Students must meet with their site contact person and their off-site OT prior to starting the clinical experience to ensure that the placement objectives are clearly communicated to all parties.

Students are expected to be self-motivated and autonomous in this type of learning experience.

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 by implementing an environmental scan or needs analysis.
- determined how the clientele/agency needs will be met

Supervision: Each group of students will be supervised by an off-site clinical educator (member of the OEQ) for an average of one (1) one-half (½) day/week. Supervision can be remote, virtual or face to face depending on the individual project. The supervision will be based on a consultative model; the clinical educator will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site clinical educator will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite clinical educator 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 daily journal to assist with the reflection process as well as a planning tool for the clinical educatory meetings. The pairing of

students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site clinical educator. The students will be largely responsible for developing the content of their supervisory meetings depending on their own, individual or group learning needs.

Student Evaluation: The same evaluation tool (CBFE) and process will be followed as per traditional placements although a formal mid-term might not always be appropriate. 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 clinical educator 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 white 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)
- analyzing 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 clinical educator 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 (needs analysis/environmental scan) 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 problems and clinical reasoning
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 clinical educator.

References:

1. Bossers, A. et al. (1997). *Understanding the role-emerging fieldwork placement*. DJOT, April 1997, vol. 64, issue 1, pp. 70-81.
2. Report of the Curriculum Committee, Spring 1995. School of Physical & Occupational Therapy, McGill University.
3. 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.

Special note: In the unexpected circumstance that neither a traditional setting nor a role-emerging setting is available during the course dates, the clinical course for the student in question will be deferred, resulting in late graduation. This decision will be made by the ACCEs.

OCC1 502 CLINICAL PRACTICUM 2

Credits: 7

Instructors: Caroline Storr, BSc, MBA,
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Prerequisites: Successful completion of OCC1-501 Clinical Practicum 1 course.

CPR/First Aid: Students are responsible for certification and renewal of their CPR/First Aid certification. A minimum of a level C course including adult, children and infants, is required. It is the student's responsibility to contact one of the CPR/First Aid course providers (e.g. Red Cross, St-John's Ambulance, Bronze Medallion...), to register and pay the registration fees. Students are required to bring a proof of status to the first clinical seminar in January 2012(TBA).

Immunization and Mask-Fitting Instructions: Prior to starting their first clinical course, students must ensure that their immunization records are complete and that they have completed their mask fitting. Students are to contact Student Health Services for a mask fitting appointment or attend announced group appointments. All supporting documentation regarding immunization must be submitted to McGill Student Health Services. McGill Student Health Services maintains an active record that is sent to the faculty twice during an academic year.

McGill Student Health Services will provide students with cards that will contain information regarding mask fit and missing vaccines to complete their immunizations. Cards will be provided to new students during their orientation or during a nursing appointment. When the immunization is complete, the card will be

signed and stamped by a nurse from McGill Student Health Services. Students will also be provided with a copy of their record. It is, however, the student's responsibility to ensure that they receive a copy of these records from McGill Student Health Services and bring them to each clinical course.

Please consult this website for information on the specific immunization requirements: <http://www.mcgill.ca/studenthealth/immunize/>

PDSB: Principles for Moving Patients Safely (PDSB) is a pre-requisite for this practicum. All students must attend the mandatory PDSB course content in OCC1546 in term A and maintain competency in transfer and mobility techniques.

Name Tags: Nametags are organized by the clinical education team and are given to the students during the Nametag Ceremony at the end of the U3/QY Winter term, prior to Clinical Practicum I. Name tags are mandatory and must be worn at all times during the clinical practicum.

Clinical Practicum Seminars: All students must attend the mandatory clinical practicum seminars (TBA). This content builds on the knowledge developed in the Qualifying Year course OCC1-546 with which students are expected to be familiar. An outline of the clinical practicum seminars is provided in the subsequent document.

Computer and Web Access: Computer and web access are required for the mandatory WebCT component of the course.

Security Checks: Some sites (e.g.: Ste-Anne's Veterans Hospital, Summit School, Peter Hall, Centre de Réadaptation de l'Ouest de Montréal,...) require security checks. The security check should be completed as soon as possible as it will take 4 weeks to complete. The institution dataform and FS-PRO indicate which teaching sites require this.

IMPORTANT:

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

Schedule: The overall Program is made up of 58 credits of academic and clinical courses. There are 4 clinical practicum courses which cumulatively require over 1000 hours of clinical practice and have a value of 28 credits.

Course number	Course Title	Number of full-time weeks	Number of credits
OCC1-501	Clinical Practicum	7	7
OCC1-502	Clinical Practicum	7*	7
OCC1-503	Clinical Practicum	7*	7
OCC1-504	Clinical Practicum	8	7

*** Exception: Students undertaking international placements will have a course duration of 61 days if they intend to apply for financial aid.**

Course Description: In this second clinical practicum students will continue to develop competence in clinical reasoning, assessment and treatment of physical and psychiatric conditions in various health care environments. Students will be exposed to different OT interventions in traditional and role emerging areas of practice and develop understanding of inter-disciplinary client-centered care.

Course Structure: This is the second of four clinical practicum courses.

Practice education will be arranged with McGill affiliated facilities. At times, students may request a clinical practicum outside of the Montreal region (these regions may also include Canada and international locations including the US). The Occupational Therapy Program has developed specific guidelines pertaining to out-of-province and international placements. All students must follow these guidelines without exception.

Every attempt will be made by the university to place students within McGill's catchment territory. In the event that there is no availability, students will be placed in rural areas of Quebec and more remote McGill RUIS territory. All costs

related to local and distant locations are the students' responsibility and it is expected that students will plan accordingly. In some instances, partial funding is available and all attempts will be made to assist students. Once students have been assigned to their respective course locations, based on interest, clinical profile requirements and site availability, students are not permitted to request changes.

Both traditional, community service development and role-emerging fieldwork sites will be used. The latter will consist of facilities/agencies/programs, which do not employ an Occupational Therapist directly on site. Supervision/consultation will be provided by Occupational Therapists who work in various settings with the relevant expertise., The type of supervision will be commensurate with the student's level of training and previous fieldwork experience. Typically, the role-emerging experience is better suited for the level 2b and 3 student.

This first course is scheduled for 7 weeks full-time. In this practicum, learning objectives and expectations will be considered level 2a.

Instructional Methods: Clinical education will be provided by occupational therapists that work in various settings, depending on the rotation type of practicum offered. The type of teaching will be commensurate with the student's level of training and previous fieldwork experience. In conjunction with the on-site practicum learning, students will be expected to engage in peer-learning by using web-based technology tools and maintain a student professional portfolio.

Course Content: The exact nature of the interventions and the type of clientele seen during the clinical course will depend on the clinical setting where each student will be placed. Prior to the beginning of the course, students will be informed in which setting they will be doing their course and with which type of clientele. Details will be specified by the clinical educators at the beginning of the course. 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. Please note that the most up to date contact information is contained in the student data information sheet. Students are expected to abide by policies established at each institution and failure to do so can result in immediate failure and termination of the course. Students are expected work the hours as stated by the individual setting and additional preparation is expected.

Level 2 Learning Objectives: The student will be able to:

1. Demonstrate SDL in daily practice (using web-based learning resources, accessing classroom resources)
2. Be able to give and receive feedback to peers, supervisor and other team members
3. Demonstrate initiative, problem-solving and clinical reasoning in all aspects of clinical practice
4. Demonstrate competence in time management, setting priorities and arranging daily schedule with minimal supervision
5. 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
6. Critically assess patient change and modify care plan as appropriate
7. Demonstrate flexibility and adaptability with regards to client care
8. Be accountable for his/her patients
9. Refine clinical reasoning process by asking questions, finding answers and demonstrating competence in patient care
10. Identify and utilize all available learning resources (peers, other team members, WebCT, in-services) to achieve competence in placement and enhance learning
11. Develop personal learning objectives and include these in CBFE

Required Texts: The following 4 texts are required for all four Clinical Practicum courses:

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

Please note that it is essential that each OT student purchases this text during the start of the Winter term prior to the first clinical seminar (early January). This text is used for all 4 clinical courses throughout the rest of the program. Note that the

bookstore returns all un-bought books in mid-March so this text must be purchased before that time as it is not available later on. All students must submit a section of this text (blank evaluation form) as proof of purchase in accordance with copyright law in the second clinical seminar.

2. Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999.
This text is required for workshop participation and a reference for all future clinical practicum.
3. Student Clinical Experience Booklet.(provided in first clinical seminar)
4. Student Clinical Practicum Manual (provided in first clinical seminar)

Additional readings that sites may assign.

Suggested Readings:

1. Course materials from the previous semesters.
2. Site approval document (CGFE-OT) for specific setting.(located on the school website)

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 clinical educator evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL. All students must complete the on-line site feedback form and submit a downloaded copy of this form to their clinical educator at the time of final evaluation. This form is available at http://medreports.medicine.mcgill.ca/pls/htmldb/f?p=115:1:322269499841212:::P1_SC HOOL:OTH

It is mandatory for students to complete the **Student Clinical Experience Booklet (a component of the student professional portfolio)** throughout the Program. Each clinical educator must sign this document following each clinical course. Students must bring their completed booklet at the latest one week post completion of the **final** clinical course (OCC1-602) 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 learning objectives for each clinical course as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are expected to post a minimum of two (2) messages on the Web-CT bulletin board related to their clinical practicum during each clinical course (describe the clinical setting, the OT role, case studies as described in the clinical seminar and clinical manual...). Failure to do so will result in a delay of mark assignment. The discussion board creates an on-line community of learners and creates a forum for student discussion while students are geographical distant.

Students may be expected to complete a project/assignment during their clinical practicum (this will be determined in collaboration with the clinical educator). Students must be prepared to learn in different clinical teaching models such as a peer learning situation, multiple clinical educators with different clientele in the same center and/or inter-professional models.

Special Requirements for Course Completion and Program Continuation: OCC1-502 Clinical Practicum 2 is a PASS or FAIL course. Students who fail OCC1-502 Clinical Practicum 2 may be granted permission to do a remedial clinical practicum 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 practicum Guidelines). If the repeated course or any subsequent clinical course 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 a clinical practicum may lead to delayed completion of the Program (see Clinical practicum Guidelines).

Supporting students in difficulty during Clinical Practicum:

a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCEs through scheduled mid-term phone calls to clinical educators. The calls allow 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 counselling and assistance in order to optimize chances for a successful learning experience. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counselling 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.

a. Support for students in difficulty

In situations where students are presenting with difficulties, sites and/or students 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 educator, the student and the ACCE from the university. This allows for effective communication between the parties and provides support for both the student and the clinical educator.

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

Dress Code: Professionalism with respect to dressing is encouraged throughout the clinical courses. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement. Appropriate attire includes closed-toe shoes, trousers/shirts that permit physical movement of clients and shirts of a professional nature (not tank tops). It is recognized that appearance is fundamental to the establishment of trust with clients and the professional team. Failure to do so may result in the student being dismissed until appropriate dress code is followed.

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. These arrangements are made between the clinical educator and the student understanding the requirements of the clinical site. In most situations students are exceeding the working hours considering their additional preparation. Students should contact the ACCE in case of prolonged absence. If the clinical educator is absent, he/she must arrange for the student's teaching/mentoring by another therapist. If the clinical educator is a sole/charge therapist, alternative arrangements are made between the ACCE and the clinical educator.

Right to Write in English or French: Every Student has a right to write essays, examinations and theses in English or in French except in courses where knowledge of a language is one of the objectives of the course. Students are expected to write in the language of the facility during their clinical practicum.

All students are reminded to determine their eligibility for licensure with OEQ, respecting Quebec's language laws during M1 of the program. It should be noted that there may be a waiting list to write the professional French language exam with the Office de la langue française. Failure to register early may result in excessive delay in becoming a member of the provincial order and inability to practice O.T. in Quebec.

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 of Students with Disabilities at 398-6009 before you do this. Failure to do so will result in an inability to accommodate specific learning needs.

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. Failure to respect patient safety at all times can result in immediate failure and termination of the learning experience.

Pregnancy: Students should be advised that many sites are not able to accommodate pregnant students given the work conditions. In such cases, students are recommended to defer their clinical practicum course. Students must inform the ACCE in the event of pregnancy so that appropriate planning can take place and that the site's workplace policies can be respected.

Student Clinical Profile: Students need to complete clinical hours with different populations and settings in order to be considered "entry-level". Students must

fulfill rotations in adult physical medicine, mental health and geriatrics in both institutional and community settings. Course assignment is based on site availability, student learning needs and language requirements. Individual interests are prioritized where possible. Students have 48 hours to discuss reasonable concerns once clinical course assignment is posted. Changes to assignments after that time will not be made. Students must be aware that last minute changes to practice area do occur from the site due to staffing issues and students must be prepared to adapt to these unforeseen changes.

FIELDWORK RESPONSIBILITIES IN TRADITIONAL AND COMMUNITY SERVICE SETTINGS

A) Clinical Educator:

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 course.
3. To review with the student the plan set out for the fieldwork course, as well as to 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 or university. Students are expected to complete and revise their own learning objectives on the evaluation form as the course 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 or share supervision with a more experienced fieldwork educator.

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. Failure to respect client confidentiality will result in immediate failure.
2. To strive to reach a “competent” level in assessment, program planning, treatment, report writing and professionalism according to the Profile of OT Practice in Canada (2007).
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. Facilities offering specific rotations and clinical educators are subject to last minute change and students must accept these inevitable changes.
4. To contact the clinical educator a **minimum of two weeks** prior to the starting date of the clinical course by writing a letter of introduction to confirm time and place of arrival. Students are responsible for picking up their institution data form according to instructions in the confirmation email sent by Croce Riggi. (clinical education administrative assistant)
5. To email/fax the immediate clinical educator's contact information (name, phone, local and email) to the administrative coordinator for clinical education, Mrs. Croce Riggi (croce.filteau@mcgill.ca) during the **first week of each clinical course**.
6. To complete facility evaluation forms and provide facilities with feedback/evaluation on learning experience (this form is located on-line on our website and referenced in the red clinical manual).

C) Academic Coordinator of Clinical Education (ACCE):

1. To assist with 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 based on availability, interest and clinical profile needs.
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 practice education, 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/teaching to fieldwork educators, both onsite and offsite.
9. To review each fieldwork placement with the student as necessary, facilitate student in developing learning objectives for improved performance at the next clinical course.
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.

CLINICAL PRACTICUM SEMINARS

Credits: 0

Instructors:

Caroline Storr, BSc, MBA,
Assistant Professor/Academic Coordinator of Clinical Education (ACCE)
Davis house room 2
Telephone: 398-6561
E-mail: caroline.storr@mcgill.ca
Office hours: TBS

Susanne Mak, B. Sc. M.Sc
Assistant Academic Coordinator of Clinical Education (AACCE) and Faculty
Lecturer
Davis house room 4
Telephone: 398-2772
E-mail: susanne.mak@mcgill.ca
Office hours: TBS

Prerequisites: None

Course Objective: To prepare students for their on-site clinical practicum and review clinical profile.

Course Structure: Prior to M1, Qualifying Year/U3 students will participate in 1-2 preparatory seminars, dates to be announced during term B (January). Students who participated in international placements and role-emerging placements may be invited to make brief presentations during an international fieldwork symposium and all students are invited to attend.

Student Learning Objectives:

1. To inform students regarding the policies and procedures related to Clinical Practicum
2. Understand application of feedback and evaluation
3. To review clinical profile and address outlined strengths and weaknesses in previous clinical placements promoting reflective practice
4. To review personal learning objectives

5. To be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA
6. To acquire strategies in improving his/her employability
7. To prepare for future mentoring/teaching role

Course Materials: Refer to course materials for OCC1-546 Strategies in OT Professional Practice.

Attendance: Attendance during mandatory clinical practicum seminars is mandatory and is a prerequisite for Clinical Practicum. Failure to do so will result in non-admission to the clinical practicum. An outline of the seminars is provided below.

Term	Date	Content	Preparatory Learning Activities
U3/QY Winter term	Seminar 1: (mandatory) 1st week of January (2 hours)	Overview of policies and procedures of clinical education Requirements: CPR, immunization, mask fitting, criminal check Processes for international and out-of-province clinical courses	View Module 1 www.preceptor.ca
	Seminar 2: (mandatory) Early February (2 hours)	Competency based Fieldwork Evaluation (feedback and evaluation) Portfolio WebCT Being a McGill ambassador	View Module 2,3 and 7 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Summer term		Clinical Practicum 1 (Level 1) Clinical Practicum 2 (Level 2A)	
M1 Fall term	Seminar 3: (mandatory)	Debriefing of summer clinical practica	View Module 6 www.preceptor.ca

	September (3 hours)	Learning objectives and the Evaluation tool (CBFE) Dealing with feedback and conflict	TBA: Readings in Red clinical booklet
M1 Winter term		Clinical Practicum 3 (Level 2B)	
M1 Winter term	March (optional) (3 hours)	International Fieldwork Symposium	
	April (mandatory) (2 hours)	Debriefing of clinical practicum 3	
	May (mandatory) (1 hour)	Reflection/Transition into Practice: New roles	
	June (optional) (1 hour) (optional) (3 hours)	CAOT licensure OEQ Guidelines for Documentation workshop	
M2 Fall term		Clinical Practicum 4 (Level 3)	

TYPES OF CLINICAL PRACTICA

There are 2 types of Practice Education:

1. Traditional/Community Service Development Placements
 - A) Quebec Placements
 - B) Out-Of-Province Placements
 - C) International Placements
2. Role-Emerging Fieldwork Placements

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 cancellations.

A) QUEBEC PLACEMENTS:

Students will be placed in McGill Affiliated Facilities in the greater Montréal area/McGill RUIS 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 practice offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical practica beyond the McGill RUIS in the province of Quebec to the ACCE. Availability is dependent on other universities' clinical practica schedules and sites' ability to accept a McGill student within a non-McGill RUIS institution.

B) OUT-OF-PROVINCE PLACEMENTS:

Students who are interested in doing their clinical placement in another province may do so by following the application procedure as announced by email by the ACCE during the Fall term. 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

practica courses in the province of Quebec. There is an application fee for out-of-province placements (currently 150\$) which is paid by cheque only.

Students must sign an intent form confirming that they will accept the out-of-province offer upon application. Offered sites will only be refused in the event that the practice rotation does not match the student's profile. In the event that the National Placement Service cannot find a practice site for the student, the application fee is non-refundable.

Deadlines for Out-of-Province placements in M1 and M2

Approximate deadline to submit completed request form for a M1 placement in summer placement 2012	October- November 2011
Approximate deadline to submit completed request form for a M1 placement in Jan/Feb 2013	End of September 2012 (exact date to be confirmed/announced by email)
Approximate deadline to submit completed request form for a M2 placement in Sept/Oct 2013	January 2013

IMPORTANT: Under no circumstances, should students attempt to contact sites independently within Canada. Possible contact names should be given to the ACCE and AACCE. Non-compliance will result in the student's application being rejected without refund.

C) INTERNATIONAL PLACEMENTS

Policy:

Eligibility Criteria:

1. To be considered for a clinical course 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 have some contacts 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. Students are encouraged to contact the McGill Exchange Office located in the Brown Building for possible funding support. There is the possibility of partial funding support based on financial need provided that the student's clinical course is of 61 days duration. Applications are made directly to that office and it is suggested that the application supports the student in citing the entire degree program costs as students cannot work during the continuous Masters Professional program. This office will review eligibility on a case by case basis.
 - 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 cancellations. 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.

- e. 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 first clinical seminar. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education by the announced deadline. An announcement will be sent to the class in January of QY/U3 announcing the application deadline. Please note that there is only one application opportunity in the Masters Professional Program.

Twelve months before the onset of the applicable fieldwork session, the student must request in writing, to the Academic Coordinator of Clinical Education, his/her wish to complete practice education outside of Canada.

Exact date deadlines for international placement applications will be announced in January of the Winter Term of qualifying year/U3 BSc option.

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, what the student hopes to learn and what the student can contribute to the international agency/institution
3. The requested clinical course for completing this experience

International practice education is a privilege and subject to the approval of the ACCE/Occupational Therapy Faculty. The student shall obtain a letter of reference from a suitable referee (past mentor) or one faculty member to support the application to participate in out-of-country fieldwork. 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 international fieldwork.

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 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 clinical educator.
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 (please refer to international binder of past experiences and CD-rom in D4).
3. The School reserves the right to limit the total number of international placements organized per year subject to capacity.
4. Students may apply for a maximum of two international placements, overall, in the following combination:
 - one in the US* and one overseas;

*Please note that some restrictions may apply to US placements for 2012-2013. It is the student's responsibility to check with the sponsoring institution as to particular visa requirements and eligibility for a hands-on practicum.

5. A second international practicum may be undertaken only if the student has performed satisfactorily in the first international practicum.
6. The first opportunity for a student to do international fieldwork will be in the second summer clinical practicum in M1. The course can be scheduled during the available weeks following Clinical Practicum 1.
7. The international practicum 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 practicum and to reassign the student locally based on existing availability.

Responsibilities:

Student: The student will:

1. Commit to the practicum 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
3. 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.

4. 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 practicum 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.
5. 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)].
6. Be knowledgeable in the language of origin of the country he/she has selected.
7. 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 application acceptance from the ACCE.
8. 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.
9. Begin fieldwork.
10. Agree to provide and complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements (international student experience form) 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. All students participating in international fieldwork are expected to prepare a short presentation for the international symposium to document their learning.

11. 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 practicum.

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 clinical educator(s) if deemed necessary

The above must be forwarded to:

Caroline Storr

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 an affiliation 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 or illness of the occupational therapy clinical educator.
4. Commit to practicum (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 and complete the evaluation form.

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. Reserve the right to request an abbreviated resume for the Occupational Therapy Department and the potential clinical educator, 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
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. Liability certificate from McGill risk management office
 - d. School of Physical & Occupational Therapy Course Guide(s) containing curriculum and/or electronic documentation
 - e. Student performance/fieldwork objectives
 - f. Policies related to:
 - i. Marking guidelines
 - ii. Student Evaluations
5. Notify student to finalize travel and accommodation arrangements.
6. Provide resource material for clinical educator (when necessary) which will be delivered by the student.
7. Initiate contact with facility via email at mid-term in order to obtain feedback re: progress in placement,
8. Write letter of appreciation to facility during annual acknowledgement period.

INTERNATIONAL PLACEMENTS SCHEDULE

Winter term (qualifying year/BSc 3 option): announcement to students of deadline for applying for international practica and orientation and introduction to International Placements (hand out guidelines) This is announced in OCC1-546 Fall term) and presented during the first clinical seminar (Winter term).

Requests after this period will not be considered

RESPONSIBILITIES OF STUDENT	SUGGESTED TARGET DATES
Request the international clinical course (or Item # 1)	12 months prior to clinical course. Students must respect deadline provided by the ACCE.
Accept responsibility for <u>all</u> items mentioned in #2 (or Item 2)	Immediately upon acceptance by ACCE
Find the facility and/or select from list of available sites and write a letter requesting a placement (or Item 3)	Immediately upon being granted approval 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 (practica in Quebec or outside Quebec) if the international placement is cancelled	Ongoing
Agree to complete student evaluation of practica and ensure that CBFÉ is completed at Mid-Term and Final	end of practica

II ROLE-EMERGING FIELDWORK PRACTICA

Introduction: The 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: 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, primary care, etc.) 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 clienteles (e.g. psychiatry, intellectual impairment, substance abuse, Alzheimer's, etc.) are based in community agencies.

General Purpose of this Practica:

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into new settings
- to produce a therapist more competent in sustainable program development
- to gain experience in identifying clients'/agency needs
- to become familiar with the socio-cultural environment of the client(s)/program
- 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: Seven (7) or eight (8) weeks full-time placement (in clinical practicum II, III or IV). 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 clinical educator).

It is the students' responsibility to secure an interested facility and an off-site OT clinical educator. Students should arrange a meeting with the ACCE for a list of sites and clinical educators to assist their search. Students must meet with their site contact person and their off-site OT prior to starting the clinical experience to ensure that the placement objectives are clearly communicated to all parties.

Students are expected to be self-motivated and autonomous in this type of learning experience.

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 by implementing an environmental scan or needs analysis.
- determined how the clientele/agency needs will be met

Supervision: Each group of students will be supervised by an off-site clinical educator (member of the OEQ) for an average of one (1) one-half (½) day/week. Supervision can be remote, virtual or face to face depending on the individual project. The supervision will be based on a consultative model; the clinical educator will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site clinical educator will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite clinical educator 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 daily journal to assist with the reflection

process as well as a planning tool for the clinical educatory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site clinical educator. The students will be largely responsible for developing the content of their supervisory meetings depending on their own, individual or group learning needs.

Student Evaluation: The same evaluation tool (CBFE) and process will be followed as per traditional placements although a formal mid-term might not always be appropriate. 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 clinical educator 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 white 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)
- analyzing 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 clinical educator 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 (needs analysis/environmental scan) 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 problems and clinical reasoning
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 clinical educator.

References:

1. Bossers, A. et al. (1997). *Understanding the role-emerging fieldwork placement*. DJOT, April 1997, vol. 64, issue 1, pp. 70-81.
2. Report of the Curriculum Committee, Spring 1995. School of Physical & Occupational Therapy, McGill University.
3. 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.

Special note: In the unexpected circumstance that neither a traditional setting nor a role-emerging setting is available during the course dates, the clinical course for the student in question will be deferred, resulting in late graduation. This decision will be made by the ACCEs.

POTH 612 ADVANCED RESEARCH METHODS

Credits: 3

Recommended pre-requisite: An introductory course in research methods and a course in intermediate level statistics or equivalent.

Lecturers: Sara Ahmed, Liliane Asseraf-Pasin, Skye Barbic, Heather Lambert, Nancy Mayo, Barbara Mazer, Patricia McKinley, Anita Menon, Judith Soicher

Course Description: This individualized, multi-module course is geared to intermediate–advanced learning levels to help students design and implement research projects and analyze results according to the needs for their entry level Master’s project.

Expanded Course Description: This course is made up of several introductory lectures, followed by 4 modules targeting different aspects of research design and execution. The final module focuses on the group Master’s projects. The topics covered include: cross sectional surveys, systematic reviews and meta analysis, qualitative designs and methods, knowledge translation studies, quantitative data analysis, qualitative analysis, psychometric and clinical measurement studies. Topics may also include experimental / laboratory methods in rehabilitation and experimental measurement, depending on instructor expertise and the specific group projects being carried out. The final required module (module #4) will focus on protocol development and aspects of implementation of the Master’s project.

Course Structure: The design, data analysis and measurement modules will each be delivered in a 6-7 lecture block. There will be two 1.5-hour in-class sessions per week. Different modules may be offered each year.

Students will be assigned to the most appropriate modules for their Master’s project. The final module (module #4) will be taken by all students, and is specifically related to the design and implementation of the Master’s project.

Learning Outcomes: On completion of this course; the student will:

1. Write general and specific objectives for a study
2. Select an appropriate study design
3. Carry out the steps to conduct a literature review
4. Describe ethical issues related to the study design
5. Select appropriate outcomes for the study

6. Formulate a hypothesis, test a hypothesis and / or estimate a parameter
7. Describe biases relating to specific study designs and selected outcomes
8. Select appropriate statistical tests or interpretative methods of inquiry
9. Plan the required analyses
10. Write a research protocol

Course Content : Detailed content will be distributed at the beginning of each module. A brief synopsis of the content of each module is presented below.

Cross-sectional surveys: Asking survey questions; designing successful surveys; survey sampling; survey modes (self administered and mailed surveys; telephone and in person interviews); measuring survey reliability and validity; analysis of survey data.

Systematic Reviews and Meta Analysis: The systematic review process; strengths and limitations of the method; formulation of the review question; search for the literature evidence; quality assessment of studies; data extraction; meta analytic methods; report writing.

Qualitative designs and methods: Traditions and methodologies in qualitative research; sampling methods; designing data collection strategies; trustworthiness; documentation of qualitative research.

Knowledge Translation Studies: Evidence from the literature; clinical practice guidelines; a conceptual model; dissemination and implementation strategies; barriers and facilitators of change; effectiveness of change strategies.

Quantitative Data Analysis: Types of numerical data; identifying the measurement scale of underlying construct of the test or measure used; uses of statistics; matching the analysis to the measurement scale of the key variables; interpreting numerical data in clinical rehabilitation studies; presenting the results in a clear and meaningful manner; the art and science of casting tables.

Qualitative Analysis: Formulating qualitative interview questions; conducting a 20-minute interview; Analyzing data using the constant comparative method; developing a concept map based on findings; transcribing data and using N-Vivo software to code data; introduction to narrative analysis; exploring concepts of triangulation.

Measurement: Content development for patient-reported and therapist-observed outcomes; studies to estimate reliability; studies to estimate validity; approaches to

measuring responsiveness; interpreting scale scores; translation and cultural adaptation of scales.

Evolution of outcomes in health care and rehabilitation; rehabilitation outcomes; classification of outcomes for clinical studies; reviewing the measurement properties (reliability; validity and responsiveness) of instruments; meaningful change; selecting measures for research studies and program evaluation.

Required Module – Group Projects: Module 4 is compulsory for all students. In this module, the students will be expected to develop the first complete draft of their entry level Master’s project protocol along with accompanying consent forms and appendices where indicated. Students will work with members of their supervisory committee in conjunction with the course coordinator for POTH 624 –Master’s Project (Dr. P. McKinley) to complete this module.

Required Texts: No text is required for this course. Each instructor will provide students with a reading list containing articles and/or chapters available online. Readings from the recommended texts may also be assigned.

Recommended Texts:

1. Butler-Kisber, L. (2010). *Qualitative Inquiry: Thematic, Narrative and Arts-Informed Perspectives*, Sage Publications Ltd.
2. Portney, L.G. & Watkins, M.P. (2004). *Foundations of Clinical Research: Applications to Practice*. Appleton and Lange; Prentice Hall.

Student Evaluation: Evaluation of learning will be ongoing throughout the term following the completion of each module and will include both formative and summative evaluations. Each module will be equally weighted at 25%. Several evaluation methods will be used depending on the content of the module and number of students enrolled in the module. These comprise a thematic paper, a critical appraisal of a methodological paper, written in-class or take home exams, group or individual presentations, and peer or self-reflective evaluation.

Mark distribution: Specific evaluation breakdown will be provided on the first day of each module.

Plagiarism/Academic Integrity: McGill University values academic integrity. Therefore, all students must understand the meaning of consequences of cheating,

plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures (see www.mcgill.ca/integrity for more information).

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

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 618 APPLIED OCCUPATIONAL THERAPY PSYCHOSOCIAL THEORY

Credits: 5

Course Coordinators: M. Park, H. Zafran

Lecturers & Seminar Leaders: S. Rouleau, S. Everitt, Skye Barbic, Zachary Boychuck

Office: Hosmer House, room 200 and 201

Office Hours: By appointment

Telephone: Melissa Park: 514 398 4400 x 39670
Suzanne Rouleau: 514-340-8222 x 5154
Hiba Zafran: 514.398 4400 x 09641

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zachary.boychuck@mail.mcgill.ca
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suzanne.rouleau@mcgill.ca
hiba.zafran@mcgill.ca

Course Description: The focus of this course will be on the application of current psychosocial frames of reference (FOR) in psychosocial occupational therapy. Emphasis will be given to clinical reasoning and the use of specific/theory-based psychosocial assessments and individual and/or group interventions relevant to specific psychosocial theories and psychiatric clients or populations.

LECTURES DAY, TIME & LOCATION:	Tuesday, 9:35-11:25 am, Stewart Biology Building S3/3 Thursday, 14:05 -15:55 pm, McIntyre Medical Building 1034.
SEMINARS DAY, TIME & LOCATION:	The first seminar will take place on September 13th at 2:35-4:55 in H102 & H104 Students will then be assigned to a group, either on Tuesday, 2:35-4:55 pm or Thursday 9:05-11:35 am, starting September 20th for consecutive weeks until Nov 24th in rooms H104, H105 & H16.

Course Content: The Lecture content will be presented in four modules in following chronological order:

- I. Core Constructs
 - a. Clinical Reasoning (Procedural & Narrative)
 - b. Development –Play

- II. Individual-based theories and FOR
 - c. Sensory integration
 - d. Behavioural
 - e. Psychodynamic (object relations)
 - f. Cognitive-behavioural therapies

- III. Context-based theories and FOR
 - g. Psychosocial Rehabilitation
 - h. Resilience as a (potential) core construct

- IV. Real Life Practice: What to choose and when
 - i. Choosing FOR
 - j. Combining FOR
 - k. Applying FOR's across the lifespan: clinical and research approaches

The seminar content will be on group theory, development, and observation.

Course Structure: This course will consist of 7 hours per week of applied theory lectures that will include case-based Clinical Reasoning Workshops interspersed throughout the semester, as well as seminar sessions.

Seminars will provide students with learning experiences in:

1. The utilization of projective assessments relevant to the psychodynamic FOR.
2. The use of role play as a therapeutic activity within a psychodynamic FOR
3. The roles of leader and participant in a group therapy session.
4. Choosing and applying OT treatment techniques in a group format, relevant to different psychosocial theoretical frames of reference.
5. The application of group observation techniques, analysis and experimentation of group process and content.
6. The use of clinical reasoning in planning and underlying process in providing a group intervention.

Learning Outcomes: The course is designed to acquaint the student with (1) the use of current theoretical frames of reference used in occupational therapy for clients with psychosocial dysfunction, (2) implementation of these theories in the practice of occupational therapy, (3) using diverse forms of clinical reasoning for group design, goal setting and group process, (4) within the context of overarching occupational therapy conceptual frameworks. On completion of this course the student will be expected to:

1. Understand how clinical reasoning is used and combined with current definitions and conceptual models of psychosocial theories for practice.
2. Apply the Canadian Practice Process Framework (CPPF) with current theories for practice for specific clients and/or group of clients with psychosocial dysfunction.
 - a. Understand the terminology and concepts inherent in each of the frames of reference and models of practice.
 - b. Analyze occupational performance issues with the different frames of reference and models of practice.
 - c. Select and justify the assessments for a particular frame of reference and for specific clients.
 - d. Design individual and/or group treatment programs using the different frames of reference, therapeutic activities and relationships for clients with psychosocial dysfunction.
 - e. Include research evidence for the treatment of specific individuals and/or groups of clients with psychosocial dysfunction to ensure “best practice” and/or evidence-based clinical practice.
 - f. Understand and analyze group dynamics and the therapeutic use of a group in relation to specific psychosocial frames of reference.
3. Understand how to use and justify complementary clinical approaches with specific clienteles with psychosocial dysfunction using knowledge of the clinical reasoning process.

Therapeutic skills:

1. Practice both procedural and narrative clinical reasoning within CRW's, assignments & seminars.
2. Practice leadership skills in group interventions, taking into consideration both the clients and the specific psychosocial frame of reference.
3. Practice active listening and information processing skills in the learning context.
4. Practice concise and synthetic written skills.

Required Texts:

Park, M.; Rouleau, S. & Zafran, H. (2011). Course Pack- OCC1-618- Clinical Reasoning and Psychosocial Theories in Occupational Therapy. Available at the McGill University Bookstore.

Cole, M.B. (2005). Group Dynamics in Occupational Therapy ~ The theoretical basis and practice application of group intervention . 3rd ed. New Jersey: Slack Inc.

Bruce, M. & Borg, B. (2002). Psychosocial Frames of Reference. Core for Occupation-Based Practice. 3rd Ed. New Jersey : Slack Inc.

Cara, E. & MacRae, A. (2004). Psychosocial Occupational Therapy: A Clinical Practice, 2nd ed. Clifton Park, NY: Thompson Delmar Learning.

Dimock, H.G. & Kass, R. (2007). How to observe your group. 4th ed. North Concord, ON: Captus Press Inc.

Recommended Texts:

Kaplan, H.I., & Sadock, B.J. (latest edition), Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry, Baltimore: Lippincott, Williams & Wilkins.

American Psychiatric Association, (latest edition), Diagnostic and statistical manual of mental disorders. Washington, D.C.: American Psychiatric Association.

Hemphill-Pearson, B. (2008). Assessments in Occupational Therapy Mental Health: An Integrative Approach, 2nd ed. Thorofare: Slack.

Rules and Regulations

Handing in Assignments: All assignments must be submitted at the beginning of the identified lecture through Web CT assignments section. This course falls under the regulations concerning individual and group evaluation. Please refer to the section on marks in the Course Guide pages 14-15.

Consequences of not completing assignments as requested: Lateness will be penalized by the loss of 1 mark/day.

Special Requirements for Course Completion and Program Continuation: In order to pass the course, a grade of at least C+ (60%) for UIII and B- (65%) for QY's must be obtained as a total course mark. A supplemental is permitted in this course. Please refer to the section on marks in the Rules and Regulations for Student Evaluation and Promotion.

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 www.mcgill.ca/students/srr/honest/) for more information).

Attendance: Students are expected to attend every lecture and seminar. Students who have missed more than one seminar or small group sessions, without prior approval or a medical notice, will be deducted a 10% mark from their overall grade. This rule applies to labs and to all required workshops, seminars or professional activities within this course.

Right to submit in English or French written work that is to be graded: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded, except in courses in which acquiring proficiency in a language is one of the objectives.

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."

The following behaviours are expected of health care professionals

Professional Conduct and Dress Code: Professionalism and accountability are encouraged throughout the course of the semester. This includes the ongoing respectful nature of teacher-student as well as student-student interactions. This also applies to dressing. It is each student's responsibility to have appropriate attire during all class assignments and learning activities.

Technology in Class: Your respectful attentive presence is expected, therefore while you are permitted to use your laptop in class, it is understood that you will not be using your laptop or cell-phone for social purposes during class time (e.g. facebook, email, msn, sms). Your cell phone should be off during class time. Phone messages can be checked or calls made during the break or after class. Use of computers in class will be further discussed at the beginning of the semester.

Evaluation

Individual marks: 40%

Group marks: 60%

- Students must obtain 65% of the individual, group and total marks to pass.
- All assignments and final exam should reflect and/or make explicit underlying clinical reasoning.

Assignment	Type	% of Grade	Due Date
Psychodynamic FOR	Case Study & Presentation (group)	15%	October 18 th
Psychosocial Rehabilitation & CBT	Case Management (group)	15%	November 17 th
Group Intervention	Group Protocol (pair) Analysis of Group	Protocol 10% Analysis 20%	Protocol: Day of the seminar you are leading Analysis: December 1 st
Final Exam	Multiple Choice, Short answer, essay on course content and case studies	40% (individual)	TBA

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

OCC1 620 WORK AND ERGONOMICS

Credits: 2

Prerequisites: Successful completion of all QY courses including clinical affiliation requirements

Instructor: Sara Saunders PhD candidate
514-774-4486
sara.saunders@mail.mcgill.ca
Meeting with instructor by appointment only

Course Objective: To introduce students to the principles of vocational rehabilitation including job demands analysis, functional capacity evaluation, work hardening and return to work. This course will examine the environmental influences on work, the ergonomic principles and assessment, and the fitting of the workplace to the capabilities of the human worker. Finally the aspects of promotion of work safety and injury prevention will be covered.

Course Structure: With the use of different teaching methods (lectures, labs, field trips and assignments), the students will be introduced to the main components of vocational rehabilitation (job tasks analysis, functional capacity evaluation, work hardening, work modification, and return to work). Specific vocational rehabilitation concerns regarding psychosocial issues, traumatic head injuries and mental health are presented. Ergonomic principles are introduced.

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

1. Define and discuss ergonomic principles and their application to rehabilitation
2. Conduct an ergonomic evaluation of an office workstation and suggest recommendations for improvement.
3. Define, discuss and critically evaluate functional capacity evaluation protocols
4. Conduct a worksite job tasks analysis and evaluate the strengths and weaknesses of a work environment and the job tasks in a given job
5. Evaluate and elaborate upon intervention strategies to reduce occupational performance barriers limiting clients' ability to return to work
6. Develop safe and effective return to work rehabilitation programs

Course Outline: (Through WebCT and presented on first day of class)

Course Content:

- Introduction to Vocational rehabilitation
- Job Task Analysis
- Functional Capacity Evaluation
- Return to Work Interventions and Management
- Office Ergonomics
- Workstation Measurement
- Psychology of Activity Participation
- Prevocational Evaluation
- Ergonomic Principles for Injury Prevention
- Head Injuries
- Cumulative Trauma Disorders
- Mental Health

Course Materials:

Required Texts:

1. Radomski MV & Trombly Latham CA (2008) Occupational Therapy for Physical Dysfunction. 6th Edition, Lippincott, Williams and Wilkins: Baltimore.
2. Jacobs, K, Ed. (2008), Ergonomics for Therapists. 3rd edition. Elsevier: Toronto

Student Assignment and Evaluation:

Practical lab:	5%
Ergonomic Workstation Risks Analysis:	20%
Workplace Job Tasks Analysis Report:	35%
Return to Work Program:	40%

Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least B- (65%) must be obtained as a total course mark.

Plagiarism/Academic Integrity: McGill University values academic integrity. Therefore, all students must understand the meaning of consequences of cheating,

plagiarism and other academic offences under the Code of Student Conduct and Disciplinary Procedures (see www.mcgill.ca/integrity for more information).

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

Attendance: Students are expected to attend all lectures and actively participate in class discussions. 10% of the course mark will be removed at the instructors' discretion for lack of participation and/or attendance.

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 are to be submitted in hard copy at the end of class (3:30 pm) on the due date. Late or incomplete submission of assignments will be penalized per day, including weekends, as indicated in the marking scheme for each assignment.

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 617 OCCUPATIONAL SOLUTIONS 2

Credits: 6

Coordinators:	I. Gélinas, PhD	D. Anaby, PhD
	Office: D37	H302
	398-4514	398-4400 x 00394
	isabelle.gelinas@mcgill.ca	dana.anaby@mcgill.ca

Teaching Assistant:

Keiko Shikak Thomas
keiko.thomas@mail.mcgill.ca

Course Description: OT assessment and treatment of clients with disorders of the nervous system.

Course Structure: Several formats will be used including formal lectures, laboratory/practical sessions and tutorial/self-directed learning modules. Site visits will also be included.

Learning Outcomes: The student will be able to:

1. seek information pertinent to OT practice on different neurological conditions across the life span;
2. utilize a self-directed approach to apply and integrate new knowledge to clinical techniques and skills learned in class;
3. seek, appraise and apply evidence in the literature to clinical cases, assessments or interventions in neurorehabilitation;
4. recognize unique roles and arenas of occupational therapy practice for pediatric, adult and geriatric clients with neurological conditions in accordance with provincial /national regulatory standards;
5. select psychometrically sound assessment tools that are appropriate with respect to: construct of interest, age of the client and environmental context;
6. administer and analyze the results of selected assessments;

7. formulate a problem list from assessment results and develop treatment objectives (short term and long term goals) based on the problem list and client strengths and resources available;
8. understand and apply the different models/approaches of OT practice in neurorehabilitation and differentiate their use in the clinical setting;
9. develop treatment strategies based on assessment results, treatment goals and treatment approaches to promote competence in occupational performance domains across the lifespan;
10. progress and terminate interventions;
11. apply principles of program evaluation, clinical audit and outcome management to evaluate the effectiveness of services;
12. utilize a client/family-centered approach in the care of clients with neurological conditions of all ages;
13. promote health and well-being of all individuals (clients and communities);
14. understand and apply interdisciplinary models of service delivery;
15. demonstrate effective decision making using a problem-solving approach;
16. promote the coordination of services across settings (e.g. acute care to home, work/ school) and assist in the successful integration of clients into the community;
17. identify gaps in knowledge of occupational therapy practice and develop research questions.

Lecture Schedule: Lectures and practical sessions will focus on the integration of content learned in Occupational Solutions I to clinical cases across ages and settings, with a gradual increase in the complexity of the cases presented over the term. Two 3-hour sessions will take place per week. These will include formal lectures, practical sessions and clinical visits. Additional supervised activities will take place intermittently throughout the semester during open block. An interprofessional education workshop on the topic of Alzheimers will take place during the term.

Course Materials:

Required Texts:

1. J. Case-Smith et al, 5th ed. (2005). Occupational Therapy For Children.
2. M. Vining Radomski & C. A. Trombly Latham, 6th ed. (2008). Occupational Therapy For Physical Dysfunction.

Recommended Texts:

1. B. Zoltan, 4th ed. (2007). Vision, Perception, and Cognition: A Manual for the Evaluation and Treatment of the Neurologically Impaired Adult.
2. M. Neidstadt. (2000). Occupational Therapy Evaluation for Adults. A Pocket Guide. Philadelphia, Pa: Lippincott, Williams & Wilkins.
3. S. Mulligan. (2003). Occupational therapy evaluation for children: A pocket guide. Baltimore, Ma: Lippincott Williams & Wilkins.

Student Assignment and Evaluation

Assignments (4)	45%
Midterm Exam	20%
Final Exam	35%

Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least B- (65%) must be obtained as a total course mark.

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 www.mcgill.ca/students/srr/honest/ 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 actively participate in class discussions. 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 submit in English or French written work that is to be graded: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded, except in courses in which acquiring proficiency in a language is one of the **objectives**.

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.

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

OCC1 503 CLINICAL PRACTICUM 3

Credits: 7

Instructors: Caroline Storr, BSc, MBA,
Assistant Professor/Academic Coordinator of Clinical
Education (ACCE)
Office: Davis house room 2
Office hours: TBS
398-6561
caroline.storr@mcgill.ca

Susanne Mak, B. Sc. M.Sc
Assistant Academic Coordinator of Clinical Education
(AACCE) and Faculty Lecturer
Office: Davis house room 4
Office hours: TBS
398-2772
susanne.mak@mcgill.ca

Prerequisites: Successful completion of OCC1-502 Clinical Practicum 2 course.

CPR/First Aid: Students are responsible for certification and renewal of their CPR/First Aid certification. A minimum of a level C including adult, children and infants, is required. It is the student's responsibility to contact one of the CPR/First Aid course providers (e.g. Red Cross, St-John's Ambulance, Bronze Medallion...), to register and pay the registration fees. Students are required to bring a proof of status to the first clinical seminar in January 2012(TBA).

Immunization and Mask-Fitting Instructions: Prior to starting their first clinical course, students must ensure that their immunization records are complete and that they have completed their mask fitting. Students are to contact Student Health Services for a mask fitting appointment or attend announced group appointments. All supporting documentation regarding immunization must be submitted to McGill Student Health Services. McGill Student Health Services maintains an active record that is sent to the faculty twice during an academic year.

McGill Student Health Services will provide students with cards that will contain information regarding mask fit and missing vaccines to complete their immunizations. Cards will be provided to new students during their orientation or during a nursing appointment. When the immunization is complete, the card will be

signed and stamped by a nurse from McGill Student Health Services. Students will also be provided with a copy of their record. It is, however, the student's responsibility to ensure that they receive a copy of these records from McGill Student Health Services and bring them to each clinical course.

Please consult this website for information on the specific immunization requirements: <http://www.mcgill.ca/studenthealth/immunize/>

PDSB: Principles for Moving Patients Safely (PDSB) is a pre-requisite for this practicum. All students must attend the mandatory PDSB course content in OCC1546 in term A and maintain competency in transfer and mobility techniques.

Name Tags: Nametags are organized by the clinical education team and are given to the students during the Nametag Ceremony at the end of the U3/QY Winter term, prior to Clinical Practicum I. Name tags are mandatory and must be worn at all times during the clinical practicum.

Clinical Practicum Seminars: All students must attend the mandatory clinical practicum seminars (TBA). This content builds on the knowledge developed in the Qualifying Year course OCC1-546 with which students are expected to be familiar. An outline of the clinical practicum seminars is provided in the subsequent document.

Computer and Web Access: Computer and web access are required for the mandatory WebCT component of the course.

Security Checks: Some sites (e.g.: Ste-Anne's Veterans Hospital, Summit School, Peter Hall, Centre de Réadaptation de l'Ouest de Montréal,...) require security checks. The security check should be completed as soon as possible as it will take 4 weeks to complete. The institution dataform and FS-PRO indicate which teaching sites require this.

IMPORTANT:

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

Schedule: The overall Program is made up of 58 credits of academic and clinical courses. There are 4 clinical practicum courses which cumulatively require over 1000 hours of clinical practice and have a value of 28 credits.

Course number	Course Title	Number of full-time weeks	Number of credits
OCC1-501	Clinical Practicum	7	7
OCC1-502	Clinical Practicum	7*	7
OCC1-503	Clinical Practicum	7*	7
OCC1-504	Clinical Practicum	8	7

*** Exception: Students undertaking international placements will have a course duration of 61 days if they intend to apply for financial aid.**

Course Description: In this third clinical practicum students will be involved in complex patient scenarios as well as in education and research activities related to OT practice. Students will also be exposed to the different roles of health care practitioners in inter-disciplinary and specialized client-centered care. Students will be exposed to different OT interventions in traditional and role emerging areas of practice and develop understanding of inter-disciplinary client-centered care.

Course Structure: This is the third of four clinical practicum courses.

Practice education will be arranged with McGill affiliated facilities. At times, students may request a clinical practicum outside of the Montreal region (these regions may also include Canada and international locations including the US). The Occupational Therapy Program has developed specific guidelines pertaining to out-of-province and international placements. All students must follow these guidelines without exception.

Every attempt will be made by the university to place students within McGill's catchment territory. In the event that there is no availability, students will be placed in rural areas of Quebec and more remote McGill RUIS territory. All costs

related to local and distant locations are the students' responsibility and it is expected that students will plan accordingly. In some instances, partial funding is available and all attempts will be made to assist students. Once students have been assigned to their respective course locations, based on interest, clinical profile requirements and site availability, students are not permitted to request changes.

Both traditional, community service development and role-emerging fieldwork sites 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 with the relevant expertise., The type of supervision will be commensurate with the student's level of training and previous fieldwork experience. Typically, the role-emerging experience is better suited for the level 2b and 3 student.

This first course is scheduled for 7 weeks full-time. In this practicum, learning objectives and expectations will be considered level 2b.

Instructional Methods: Clinical education will be provided by occupational therapists that work in various settings, depending on the rotation type of practicum offered. The type of teaching will be commensurate with the student's level of training and previous fieldwork experience. In conjunction with the on-site practicum learning, students will be expected to engage in peer-learning by using web-based technology tools and maintain a student professional portfolio.

Course Content: The exact nature of the interventions and the type of clientele seen during the clinical course will depend on the clinical setting where each student will be placed. Prior to the beginning of the course, students will be informed in which setting they will be doing their course and with which type of clientele. Details will be specified by the clinical educators at the beginning of the course. 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. Please note that the most up to date contact information is contained in the student data information sheet. Students are expected to abide by policies established at each institution and failure to do so can result in immediate failure and termination of the course. Students are expected work the hours as stated by the individual setting and additional preparation is expected.

Level 2 Learning Objectives: The student will be able to:

1. Demonstrate SDL in daily practice (using web-based learning resources, accessing classroom resources)
2. Be able to give and receive feedback to peers, supervisor and other team members
3. Demonstrate initiative, problem-solving and clinical reasoning in all aspects of clinical practice
4. Demonstrate competence in time management, setting priorities and arranging daily schedule with minimal supervision
5. 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
6. Critically assess patient change and modify care plan as appropriate
7. Demonstrate flexibility and adaptability with regards to client care
8. Be accountable for his/her patients
9. Refine clinical reasoning process by asking questions, finding answers and demonstrating competence in patient care
10. Identify and utilize all available learning resources (peers, other team members, WebCT, in-services) to achieve competence in placement and enhance learning
11. Develop personal learning objectives and include these in CBFE

Required Texts: The following 4 texts are required for all four Clinical Practicum courses:

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

Please note that it is essential that each OT student purchases this text during the start of the Winter term prior to the first clinical seminar (early January). This text is used for all 4 clinical courses throughout the rest of the program. Note that the bookstore returns all un-bought books in mid-March so this text must be purchased before that time as it is not available later on. All students must submit a section of this text (blank evaluation form) as proof of purchase in accordance with copyright law during the second clinical seminar.

2. Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999.

This text is required for workshop participation and a reference for all future clinical practicum.

3. Student Clinical Experience Booklet.(provided in first clinical seminar)
4. Student Clinical Practicum Manual (provided in first clinical seminar)

Additional readings that sites may assign.

Suggested Readings:

1. Course materials from the previous semesters.
2. Site approval document (CGFE-OT) for specific setting.(located on the school website)

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 clinical educator evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL. All students must complete the on-line site feedback form and submit a downloaded copy of this form to their clinical educator at the time of final evaluation. This form is available at http://medreports.medicine.mcgill.ca/pls/htmldb/f?p=115:1:322269499841212::::P1_SCHOOL:OTH

It is mandatory for students to complete the **Student Clinical Experience Booklet (a component of the student professional portfolio)** throughout the Program. Each clinical educator must sign this document following each clinical course. Students must bring their completed booklet at the latest one week post completion of the **final** clinical course (OCC1-602) 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 learning objectives for each clinical course as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are expected to post a minimum of two (2) messages on the Web-CT bulletin board related to their clinical practicum during each clinical

course(describe the clinical setting, the OT role, case studies as described in the clinical seminar and clinical manual...). Failure to do so will result in a delay of mark assignment. The discussion board creates an on-line community of learners and creates a forum for student discussion while students are geographical distant.

Students may be expected to complete a project/assignment during their clinical practicum (this will be determined in collaboration with the clinical educator). Students must be prepared to learn in different clinical teaching models such as a peer learning situation, multiple clinical educators with different clientele in the same center and/or inter-professional models.

Special Requirements for Course Completion and Program Continuation:
OCC1-503 Clinical Practicum 3 is a PASS or FAIL course. Students who fail OCC1-503 Clinical Practicum 3 may be granted permission to do a remedial clinical practicum 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 practicum Guidelines). If the repeated course or any subsequent clinical course 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 a clinical practicum may lead to delayed completion of the Program (see Clinical practicum Guidelines).

Supporting students in difficulty during Clinical Practicum:

a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCEs through scheduled mid-term phone calls to clinical educators. The calls allow 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 counselling and assistance in order to optimize chances for a successful learning experience. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counselling 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 and/or students 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 educator, the student and the ACCE from the university. This allows for effective communication between the parties and provides support for both the student and the clinical educator.

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

Dress Code: Professionalism with respect to dressing is encouraged throughout the clinical courses. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement. Appropriate attire includes closed-toe shoes, trousers/shirts that permit physical movement of clients and shirts of a professional nature (not tank tops). It is recognized that appearance is fundamental to the establishment of trust with clients and the professional team. Failure to do so may result in the student being dismissed until appropriate dress code is followed.

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. These arrangements are made between the clinical educator and the student understanding the requirements of the clinical site. In most situations students are exceeding the working hours considering their additional preparation. Students should contact the ACCE in case of prolonged absence. If the clinical educator is absent, he/she must arrange for the student's teaching/mentoring by another therapist. If the clinical educator is a sole/charge therapist, alternative arrangements are made between the ACCE and the clinical educator.

Right to Write in English or French: Every Student has a right to write essays, examinations and theses in English or in French except in courses where knowledge of a language is one of the objectives of the course. Students are expected to write in the language of the facility during their clinical practicum.

All students are reminded to determine their eligibility for licensure with OEQ, respecting Quebec's language laws during M1 of the program. It should be noted that there may be a waiting list to write the professional French language exam with the Office de la langue française. Failure to register early may result in excessive delay in becoming a member of the provincial order and inability to practice O.T. in Quebec.

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 of Students with Disabilities at 398-6009 before you do this. Failure to do so will result in an inability to accommodate specific learning needs.

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. Failure to respect patient safety at all times can result in immediate failure and termination of the learning experience.

Pregnancy: Students should be advised that many sites are not able to accommodate pregnant students given the work conditions. In such cases, students are recommended to defer their clinical practicum course. Students must inform the ACCE in the event of pregnancy so that appropriate planning can take place and that the site's workplace policies can be respected.

Student Clinical Profile: Students need to complete clinical hours with different populations and settings in order to be considered "entry-level". Students must fulfill rotations in adult physical medicine, mental health and geriatrics in both institutional and community settings. Course assignment is based on site availability, student learning needs and language requirements. Individual interests are prioritized where possible. Students have 48 hours to discuss reasonable concerns once clinical course assignment is posted. Changes to assignments after that time will not be made. Students must be aware that last minute changes to practice area do occur from the site due to staffing issues and students must be prepared to adapt to these unforeseen changes.

FIELDWORK RESPONSIBILITIES IN TRADITIONAL AND COMMUNITY SERVICE SETTINGS

A) Clinical Educator:

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 course.
3. To review with the student the plan set out for the fieldwork course, as well as to 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 course 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 or share supervision with a more experienced fieldwork educator.

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. Failure to respect client confidentiality will result in immediate failure.
2. To strive to reach a "competent" level in assessment, program planning, treatment, report writing and professionalism according to the Profile of OT Practice in Canada (2007).
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. Facilities offering specific rotations and clinical educators are subject to last minute change and students must accept these inevitable changes.

4. To contact the clinical educator a minimum of two weeks prior to the starting date of the clinical course by writing a letter of introduction to confirm time and place of arrival. Students are responsible for picking up their institution data form according to instructions in the confirmation email sent by Croce Riggi. (clinical education administrative assistant)
5. To email/fax the immediate clinical educator's contact information (name, phone, local and email) to the administrative coordinator for clinical education, Mrs. Croce Riggi (croce.filteau@mcgill.ca) during the first week of each clinical course.
6. To complete facility evaluation forms and provide facilities with feedback/evaluation on learning experience (this form is located on-line on our website and referenced in the red clinical manual).

C) Academic Coordinator of Clinical Education (ACCE):

1. To assist with 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 based on availability, interest and clinical profile needs.
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 practice education, 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/teaching to fieldwork educators, both onsite and offsite.
9. To review each fieldwork placement with the student as necessary, facilitate student in developing learning objectives for improved performance at the next clinical course.
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.

CLINICAL PRACTICUM SEMINARS

Credits: 0

Instructors:

Caroline Storr, BSc, MBA,
Assistant Professor/Academic Coordinator of Clinical Education (ACCE)
Davis house room 2
Telephone: 398-6561
E-mail: caroline.storr@mcgill.ca
Office hours: TBS

Susanne Mak, B. Sc. M.Sc
Assistant Academic Coordinator of Clinical Education (AACCE) and Faculty
Lecturer
Davis house room 4
Telephone: 398-2772
E-mail: susanne.mak@mcgill.ca
Office hours: TBS

Prerequisites: None

Course Objective: To prepare students for their on-site clinical practicum and review clinical profile.

Course Structure: Prior to M1, Qualifying Year/U3 students will participate in 1-2 preparatory seminars, dates to be announced during term B (January). Students who participated in international placements and role-emerging placements may be invited to make brief presentations during an international fieldwork symposium and all students are invited to attend...

Student Learning Objectives:

1. To inform students regarding the policies and procedures related to Clinical Practicum
2. Understand application of feedback and evaluation
3. To review clinical profile and address outlined strengths and weaknesses in previous clinical placements promoting reflective practice
4. To review personal learning objectives

5. To be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA
6. To acquire strategies in improving his/her employability
7. To prepare for future mentoring/teaching role

Course Materials: Refer to course materials for OCC1-546 Strategies in OT Professional Practice.

Attendance: Attendance during all clinical practicum seminars is mandatory and is a prerequisite for Clinical Practicum. Failure to do so will result in non-admission to the clinical practicum. An outline of the seminars is provided below.

Term	Date	Content	Preparatory Learning Activities
U3/QY Winter term	Seminar 1: (mandatory) 1st week of January (2 hours)	Overview of policies and procedures of clinical education Requirements: CPR, immunization, mask fitting, criminal check Processes for international and out-of-province clinical courses	View Module 1 www.preceptor.ca
	Seminar 2: (mandatory) Early February (2 hours)	Competency based Fieldwork Evaluation (feedback and evaluation) Portfolio WebCT Being a McGill ambassador	View Module 2,3 and 7 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Summer term		Clinical Practicum 1 (Level 1) Clinical Practicum 2 (Level 2A)	

M1 Fall term	Seminar 3: (mandatory) September (3 hours)	Debriefing of summer clinical practica Learning objectives and the Evaluation tool (CBFE) Dealing with feedback and conflict	View Module 6 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Winter term		Clinical Practicum 3 (Level 2B)	
M1 Winter term	March (optional) (3 hours)	International Fieldwork Symposium	
	April (mandatory) (2 hours)	Debriefing of clinical practicum 3	
	May (mandatory) (1 hour)	Reflection/Transition into Practice: New roles	
	June (optional) (1 hour) (optional) (3 hours)	CAOT licensure OEQ Guidelines for Documentation workshop	
M2 Fall term		Clinical Practicum 4 (Level 3)	

TYPES OF CLINICAL PRACTICA

There are 2 types of Practice Education:

1. Traditional/Community Service Development Placements
 - A) Quebec Placements
 - B) Out-Of-Province Placements
 - C) International Placements
2. Role-Emerging Fieldwork Placements

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 cancellations.

A) QUEBEC PLACEMENTS:

Students will be placed in McGill Affiliated Facilities in the greater Montréal area/McGill RUIS 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 practice offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical practica beyond the McGill RUIS in the province of Quebec to the ACCE. Availability is dependent on other universities' clinical practica schedules and sites' ability to accept a McGill student within a non-McGill RUIS institution.

B) OUT-OF-PROVINCE PLACEMENTS:

Students who are interested in doing their clinical placement in another province may do so by following the application procedure as announced by email by the ACCE during the Fall term. This will include a mandatory seminar 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 practica courses in the province of Quebec. There is an application fee for out-of-province placements (currently 150\$) which is paid by cheque only.

Students must sign an intent form confirming that they will accept the out-of-province offer upon application. Offered sites will only be refused in the event that the practice rotation does not match the student's profile. In the event that the National Placement Service cannot find a practice site for the student, the application fee is non-refundable.

Deadlines for Out-of-Province placements in M1 and M2

Approximate deadline to submit completed request form for a M1 placement in summer placement 2012	October- November 2011
Approximate deadline to submit completed request form for a M1 placement in Jan/Feb 2013	End of September 2012 (exact date to be confirmed/announced by email)
Approximate deadline to submit completed request form for a M2 placement in Sept/Oct 2013	January 2013

IMPORTANT: Under no circumstances, should students attempt to contact sites independently within Canada. Possible contact names should be given to the ACCE and AACCE. Non-compliance will result in the student's application being rejected without refund.

C) INTERNATIONAL PLACEMENTS

Policy:

Eligibility Criteria:

1. To be considered for a clinical course 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 have some contacts 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. Students are encouraged to contact the McGill Exchange Office located in the Brown Building for possible funding support. There is the possibility of partial funding support based on financial need provided that the student's clinical course is of 61 days duration. Applications are made directly to that office and it is suggested that the application supports the student in citing the entire degree program costs as students cannot work during the continuous Masters Professional program. This office will review eligibility on a case by case basis.
 - 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 cancellations. 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.

- e. 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 first clinical seminar. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education by the announced deadline. An announcement will be sent to the class in January of QY/U3 announcing the application deadline. Please note that there is only one application opportunity in the Masters Professional Program.

Twelve months before the onset of the applicable fieldwork session, the student must request in writing, to the Academic Coordinator of Clinical Education, his/her wish to complete practice education outside of Canada.

Exact date deadlines for international placement applications will be announced in January of the Winter Term of qualifying year/U3 BSc option.

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, what the student hopes to learn and what the student can contribute to the international agency/institution
3. The requested clinical course for completing this experience

International practice education is a privilege and subject to the approval of the ACCE/Occupational Therapy Faculty. The student shall obtain a letter of reference from a suitable referee (past mentor) or one faculty member to support the application to participate in out-of-country fieldwork. 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 international fieldwork.

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 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 clinical educator.
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 (please refer to international binder of past experiences and CD-rom in D4).
3. The School reserves the right to limit the total number of international placements organized per year subject to capacity.
4. Students may apply for a maximum of two international placements, overall, in the following combination:
 - one in the US* and one overseas;

*Please note that some restrictions may apply to US placements for 2012-2013. It is the student's responsibility to check with the sponsoring institution as to particular visa requirements and eligibility for a hands-on practicum.

5. A second international practicum may be undertaken only if the student has performed satisfactorily in the first international practicum.
6. The first opportunity for a student to do international fieldwork will be in the second summer clinical practicum in M1. The course can be scheduled during the available weeks following Clinical Practicum 1.

7. The international practicum 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 practicum and to reassign the student locally based on existing availability.

Responsibilities:

Student: The student will:

1. Commit to the practicum 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 practicum 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 application acceptance 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 (international student experience form) 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 CBFs to the ACCE in order to receive a grade. All students participating in international fieldwork are expected to prepare a short presentation for the international symposium to document their learning.
 10. In the event of last minute cancellations, the student must advise the site in writing.
 11. 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 practicum.

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 clinical educator(s) if deemed necessary

The above must be forwarded to:

Caroline Storr

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 an affiliation 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 or illness of the occupational therapy clinical educator.
4. Commit to practicum (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 and complete the evaluation form.

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. Reserve the right to request an abbreviated resume for the Occupational Therapy Department and the potential clinical educator, 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
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. Liability certificate from McGill risk management office
 - d. School of Physical & Occupational Therapy Course Guide(s) containing curriculum and/or electronic documentation
 - e. Student performance/fieldwork objectives
 - f. Policies related to:
 - i. Marking guidelines
 - ii. Student Evaluations
5. Notify student to finalize travel and accommodation arrangements.
6. Provide resource material for clinical educator (when necessary) which will be delivered by the student.
7. Initiate contact with facility via email at mid-term in order to obtain feedback re: progress in placement.
8. Write letter of appreciation to facility during annual acknowledgement period.

INTERNATIONAL PLACEMENTS SCHEDULE

Winter term (qualifying year/BSc 3 option): reminder to students of deadline for applying for international practica and orientation and introduction to International Placements (hand out guidelines) This is announced in OCC1-546 Fall term) and the first clinical seminar (Winter term).

Requests after this period will not be considered

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

II ROLE-EMERGING FIELDWORK PRACTICA

Introduction: The 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: 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, primary care, etc.) 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 Practica:

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into new settings
- to produce a therapist more competent in sustainable program development
- to gain experience in identifying clients'/agency needs
- to become familiar with the socio-cultural environment of the client(s)/program
- 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: Seven (7) or eight (8) weeks full-time placement (in clinical practicum II, III or IV). 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 clinical educator).

It is the students' responsibility to secure an interested facility and an off-site OT clinical educator. Students should arrange a meeting with the ACCE for a list of sites and clinical educators to assist their search. Students must meet with their site contact person and their off-site OT prior to starting the clinical experience to ensure that the placement objectives are clearly communicated to all parties.

Students are expected to be self-motivated and autonomous in this type of learning experience.

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 by implementing an environmental scan or needs analysis.
- determined how the clientele/agency needs will be met

Supervision: Each group of students will be supervised by an off-site clinical educator (member of the OEQ) for an average of one (1) one-half ($\frac{1}{2}$) day/week. Supervision can be remote, virtual or face to face depending on the individual project. The supervision will be based on a consultative model; the clinical educator will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site clinical educator will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite clinical educator 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 daily journal to assist with the reflection

process as well as a planning tool for the clinical educatory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst themselves, prior to meeting with the off-site clinical educator. The students will be largely responsible for developing the content of their supervisory meetings depending on their own, individual or group learning needs.

Student Evaluation: The same evaluation tool (CBFE) and process will be followed as per traditional placements although a formal mid-term might not always be appropriate. 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 clinical educator 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 white 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)
- analyzing 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 clinical educator 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 (needs analysis/environmental scan) 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 problems and clinical reasoning
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 clinical educator.

References:

1. Bossers, A. et al. (1997). *Understanding the role-emerging fieldwork placement*. DJOT, April 1997, vol. 64, issue 1, pp. 70-81.
2. Report of the Curriculum Committee, Spring 1995. School of Physical & Occupational Therapy, McGill University.
3. 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.

Special note: In the unexpected circumstance that neither a traditional setting nor a role-emerging setting is available during the course dates, the clinical course for the student in question will be deferred, resulting in late graduation. This decision will be made by the ACCEs.

OCC1 622 COMMUNITY BASED OCCUPATIONAL THERAPY

Credits: 3

Prerequisites: Clinical Practicum 1 and 2 -OCC1 501 and OCC1 502

- i. PART I - Focus on Occupational Therapy in Community Mental Health

Prerequisite: OCC1-551 Psychosocial Practice in Occupational Therapy

- ii. PART II - Focus on Occupational Therapy in the International Community

i. PART I - Focus on Occupational Therapy in Community Mental Health

Coordinator: Hiba Zafran, PhD candidate
Office: By appointment in Hosmer House, room 201
hiba.zafran@mcgill.ca

Course Objective: To examine the structure and organization of community health services and more specifically, approaches to developing and appraising community mental health services. To identify the roles of occupational therapists in community mental health practice.

Course Structure: This course (Part I) consists of five (5) lectures 2 ½ hours in length, which include in-class learning activities. In addition there will be a class devoted to a field trip, and the final two lectures during which there will be clinical reasoning exercises and/or oral presentations by students. This part of the course will last seven (7) weeks following the Spring break of the Winter term. The field trip will be done by groups of 3 to 4 students, visiting a community resource, chosen by the students from a list of resources provided by the course coordinator. During the last two (2) lectures, students will present a summary of the characteristics of these various community resources to the class, including their evaluation of the services from a recovery-oriented and client-centred rehabilitation perspective.

Student Learning Objectives: By the end of this course, the student will be able to:

1. Identify various types of evidence and value-based community principles and apply them to occupational therapy practice in mental health within a case study analysis

2. Create a treatment plan incorporating community mental health practice principles, advocacy, social disability models and occupational therapy client-centered practice including an analysis of the various components based on existing evidence
3. Reflect on the recovery process and its impact on Occupational Therapy practice
4. Understand the challenges and some of the special issues associated with community mental health practice and apply some of them to a case study
5. Evaluate roles of Occupational Therapists in various community resources and as applicable to a particular resource presented in class
6. Be able to critically evaluate a community organization as a client, and synthesize recommendations for evidence-based recovery-oriented practice

Course Content:

- Community health practice
- Working with families
- Community mental health services
- Natural support networks
 - Vocational rehabilitation approaches
 - Residential rehabilitation programs
 - Clubhouses and support groups
- Special issues such as substance abuse, parenting, violence and sexuality
- Social models of disability and the effect of stigma on mental health rehabilitation
- Power relations and advocacy in client-centered practice
- Recovery process

Course Materials: All the readings (required and suggested) will be included in a course pack. Reference lists for every topic will also be included.

Student Assignment and Evaluation:

The final grade for part I of the course is 40% of the final mark

Details will be announced on the first day of class

Special Requirements for Course Completion and Program Continuation: Minimum grade of 65%. In any course which comprises both individual and group evaluation components, each student must achieve a passing grade in each of these components as well as in the overall course in order to receive a passing grade for

the course. If the total mark is a pass but one component is a failure, the course mark is withheld from the record. The student must undertake remedial work in that failed component and pass the additional evaluation. The original final course mark is then recorded. 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/students/srr/honest/ for more information).

L'université McGill attache une haute importance à l'honnêteté académique. Il incombe par conséquent à tous les étudiants de comprendre ce que l'on entend par tricherie, plagiat et autres infractions académiques, ainsi que les conséquences que peuvent avoir de telles actions, selon le Code de conduite de l'étudiant et des procédures disciplinaires (pour de plus amples renseignements, veuillez consulter le site www.mcgill.ca/students/srr/honest/).

Right to write in (English or in) French: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded.

Selon la charte des droits des étudiants de l'Université McGill, dans le cadre de ce cours, les étudiants ont le droit de soumettre tout travail écrit en français ou en anglais.

Dress Code: Professionalism with respect to dressing is encouraged throughout the course of the semester, and especially when visiting community resources and doing oral presentations. 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 and guest lecturers predominate. 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.

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.”

ii. PART II OCC1 622 OT in the International Community

Instructor: Heather Lambert, PhD (Coordinator)
Hosmer House Room 201 (By appointment, please)
(514) 398-440 x 09021
heather.lambert@mcgill.ca

Course Objective: To gain understanding of OT community-based practice with a variety of populations, with particular emphasis on OT community-based practice within in developing countries and the Quebec health care system.

Course Structure: Part II of this course consists of three (3) hours per week of lectures (3.0 hours x 1/week) for eight (8) weeks given in March and April of 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 rehabilitation frameworks
3. Explain health determinants and the influence of environmental factors on occupational performance and OT community-based practice.
4. Recognize the importance of partnership and sustainability for community-based rehabilitation projects.
5. Justify the importance of community-based OT services in the context of:
 - a. continuity of health care services in Canada
 - b. developing countries
6. Elaborate a project proposal for a potential OT community-based project in a developing country or in Canada.

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 for 60% of the total mark for OCC1-622 (Part 2) will be announced on the first day of class.

1. Project proposal (group): 60 marks (15 marks letter of intent, 35 marks class presentation, 10 marks memo of project update)

Special Requirements for Course Completion and Program Continuation: In order to pass the course, a grade of at least B- (65%) must be obtained as a total course mark.

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 www.mcgill.ca/students/srr/honest/ 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 submit in English or French written work that is to be graded: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded, except in courses in which acquiring proficiency in a language is one of the objectives.

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.

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

OCC1 623 ASSISTIVE TECHNOLOGY

Credits: 2

Instructor/coordinator:

Philippe Archambault, PhD, erg
Office: Davis 34B
398-7323
philippe.archambault@mcgill.ca

Access to the Instructor: Office hours by appointment. Please email or call ahead to make appointment.

Course Description: Application of high and low-technology assistive devices to enhance performance and individual human needs, including alternative computer access, powered mobility, augmentative communication, telecommunication and environmental control, social and professional issues regarding technology service delivery.

Course Structure: The course consists of lectures, presentations by guest clinicians, case studies, a computer-access lab as well as self-directed learning activities.

Course Objective: To examine the current knowledge and evidence about product design, development, accessibility and 'fit' of assistive technology in relation to the client's occupational needs and the environmental context.

Student Learning Outcomes At completion of this course, the student will be able to:

1. Recognize the functional uses of current high and low assistive technology devices, including computer access, computer mice, environmental controls, adapted keyboards, switches, and communication devices.
2. 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.
3. Apply this knowledge to determine suitability for clients across the lifespan, meeting occupational performance, accessibility, budgetary, and

environmental (physical, social, cultural, technical) needs, i.e. the best 'fit' between client, environment, activity and assistive technology.

4. Communicate knowledge of current assistive technology with respect to occupational performance needs, environmental and accessibility considerations, and long term planning objectives.
5. Identify the role of professional and commercial resources involved in the prescription and implementation of assistive technology in order to facilitate collaboration and appropriate referrals.
6. Recognize the importance of keeping up to date with the rapidly changing trends in assistive technology.

Course Content

- Augmentative communications
- Computer adaptation
- Environmental or EADL controls
- Specialized wheelchair controls
- Assistive technology in pediatrics, geriatrics and mental health

Course Materials

Required readings: A course pack including reading materials for each of the lectures will be available for purchase at the McGill bookstore. A copy is also available on reserve at Library.

Lecture notes and handouts from lecturers will be posted before each class on WebCT.

Additional readings:

Cook, A.M. & Polgar, J.M. (Eds.) (2008). *Cook & Hussey's assistive technologies : principles and practice*, 3rd ed. St. Louis, MO: Mosby (copy on reserve at Library).

Student Evaluation

Assignments on readings: 50%

Assignments consist in short reports based on clinical case histories and reading material. Five will need to be completed during the course. These are meant as preparation for the content provided in class, in order to promote class participation

and are due before the start of the corresponding lecture. The clinical cases will be discussed during the class.

Group project: 50%

This self-directed group project enables students to apply, analyze, and synthesize information about assistive technology to a specific case-based context, as they implement an independent research, evaluation, and documentation of devices and their uses. The written project will consist of a case report where students will justify their choice of specific assistive technology in the context of a treatment plan.

Project due date: End of April

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

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 portion of text.

Consequences of not completing assignments as requested: The written project will be graded with respect to specific criteria. All late submissions of the project will result in an immediate deduction of 4 marks, plus 1 mark per day (including weekends). Failure to submit a part of the project will result in '0' for that portion (eg. omission of chart).

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.

Course Content:

- An overview of assistive technology
- Electronic aids to daily living, Augmentative and alternative communications
- Computer access: accessibility options
- Computer access: specialized equipment

- Technology for pediatrics
- Specialized wheelchair controls
- Technology for elderly and mental health

Site visits Some of the lectures may take place at the Technical Aids Department of Centre de Réadaptation Constance Lethbridge and Centre de Réadaptation Marie-Enfant.

Readings for OCC1 623

Note that the reading material may be modified. All the reading material can be found in the course pack.

1. An overview of the field of assistive technologies

Cook AM, Hussey SM. *Assistive technologies: Principles and Practice 3rd edition*. Mosby, St-Louis Missouri, 2008; pp. 5-9

Cook AM, Hussey SM. *Assistive technologies: Principles and Practice 3rd edition*. Mosby, St-Louis Missouri, 2008; chapter 2, pp. 34-53

2. Environmental and EADL controls

Ribgy P, Ryan S, Joos S, Cooper B, Jutai JW, Steggles E. Impact of electronic aids to daily living of persons with cervical spinal cord injuries. *Assistive Technology 17*: 89-97; 2005.

Little R (2010). Electronic aids for daily living *Physical Medicine and Rehabilitation Clinics of North America*; 21: 33-42.

3. Computer technology

Cook AM, Hussey SM. *Assistive technologies: Principles and Practice 3rd edition*. Mosby, St-Louis Missouri, 2008; chapter 7, pp. 255-280.

4. Augmentative communications

Cook AM, Hussey SM. *Assistive technologies: Principles and Practice 3rd edition*. Mosby, St-Louis Missouri, 2008; chapter 11, pp. 283-327

5. Assistive technologies in pediatrics

Swinth Y. Assistive Technology: Low technology, computers, electronic aids for daily living and augmentative communication. In J Case-Smith (ed.) Occupational Therapy for Children, 5th edition. Elsevier-Mosby, St-Louis Missouri, 2005; pp 615-656.

6. Wheelchair controls

Kreutz D, Taylor SJ. Wheelchair mobility. In DA Olson & F DeRuyter (eds) Clinician's guide to assistive technology. Mosby, St-Louis, Missouri , 2002; pp. 311-330.

7. Technology in geriatrics and mental health

Cheek P, Nikpour L, Nowlin HD (2005) Aging well with smart technology. Nurs Adm Q 29:329-338.

Andersson G, Bergstrom J, Hollandare F, Carlbring P, Kaldø V, Ekselius L (2005) Internet-based self-help for depression: randomised controlled trial. British Journal of Psychiatry 187: 456-461.

OCC1 602 CLINICAL PRACTICUM 4

Credits: 7

Instructors: Caroline Storr, BSc, MBA,
Assistant Professor/Academic Coordinator of Clinical
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Office hours: TBS
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Susanne Mak, B. Sc. M.Sc
Assistant Academic Coordinator of Clinical Education
(AACCE) and Faculty Lecturer
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Prerequisites: Successful completion of OCC1-503 Clinical Practicum 3 course.

CPR/First Aid: Students are responsible for certification and renewal of their CPR/First Aid certification. A minimum of a level C course including adult, children and infants, is required. It is the student's responsibility to contact one of the CPR/First Aid course providers (e.g. Red Cross, St-John's Ambulance, Bronze Medallion...), to register and pay the registration fees. Students are required to bring a proof of status to the first clinical seminar in January 2012 (TBA)

Immunization and Mask-Fitting Instructions: Prior to starting their first clinical course, students must ensure that their immunization records are complete and that they have completed their mask fitting. Students are to contact Student Health Services for a mask fitting appointment or attend announced group appointments. All supporting documentation regarding immunization must be submitted to McGill Student Health Services. McGill Student Health Services maintains an active record that is sent to the faculty twice during an academic year.

McGill Student Health Services will provide students with cards that will contain information regarding mask fit and missing vaccines to complete their immunizations. Cards will be provided to new students during their orientation or during a nursing appointment. When the immunization is complete, the card will be

signed and stamped by a nurse from McGill Student Health Services. Students will also be provided with a copy of their record. It is, however, the student's responsibility to ensure that they receive a copy of these records from McGill Student Health Services and bring them to each clinical course.

Please consult this website for information on the specific immunization requirements: <http://www.mcgill.ca/studenthealth/immunize/>

PDSB: Principles for Moving Patients Safely (PDSB) is a pre-requisite for this practicum. All students must attend the mandatory PDSB course content in OCC1546 in term A and maintain competency in transfer and mobility techniques.

Name Tags: Nametags are organized by the clinical education team and are given to the students during the Nametag Ceremony at the end of the U3/QY Winter term, prior to Clinical Practicum I. Name tags are mandatory and must be worn at all times during the clinical practicum.

Clinical Practicum Seminars: All students must attend the clinical practicum seminars (TBA). This content builds on the knowledge developed in the Qualifying Year course OCC1-546 with which students are expected to be familiar. An outline of the clinical practicum seminars is provided in the subsequent document.

HIV/AIDS Interprofessional Seminar: All students must attend this compulsory interprofessional seminar on HIV/AIDS (Date: TBA). Following this seminar, all students must post a 1 page reflection journal entry (using the grid in the clinical manual) onto the WebCT discussion board. Failure to do so will result in an incomplete grade assignment for this course

Computer and Web Access: Computer and web access are required for the mandatory WebCT component of the course.

Security Checks: Some sites (e.g.: Ste-Anne's Veterans Hospital, Summit School, Peter Hall, Centre de Réadaptation de l'Ouest de Montréal,...) require security checks. The security check should be completed as soon as possible as it will take 4 weeks to complete. The institution data form and FS-PRO indicate which teaching sites require this.

IMPORTANT:

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

Schedule: The overall Program is made up of 58 credits of academic and clinical courses. There are 4 clinical practicum courses which cumulatively require over 1000 hours of clinical practice and have a value of 28 credits.

Course number	Course Title	Number of full-time weeks	Number of credits
OCC1-501	Clinical Practicum	7	7
OCC1-502	Clinical Practicum	7*	7
OCC1-503	Clinical Practicum	7*	7
OCC1-504	Clinical Practicum	8	7

*** Exception: Students undertaking international placements will have a course duration of 61 days if they intend to apply for financial aid.**

Course Description: In this final clinical practicum students will be involved in complex patient scenarios, education, and research activities related to OT practice. Students will be exposed to different roles of health care practitioners, inter-disciplinary and specialized client-centered care. Integration of academic and clinical experience expected to be at entry level to practice. Students will be exposed to different OT interventions in traditional and role emerging areas of practice and develop understanding of inter-disciplinary client-centered care.

Course Structure: This is the fourth of four clinical practicum courses

Practice education will be arranged with McGill affiliated facilities. At times, students may request a clinical practicum outside of the Montreal region (these regions may also include Canada and international locations including the US). The Occupational Therapy Program has developed specific guidelines pertaining to out-of-province and international placements. All students must follow these guidelines without exception.

Every attempt will be made by the university to place students within McGill's catchment territory. In the event that there is no availability, students will be placed in rural areas of Quebec and more remote McGill RUIS territory. All costs related to local and distant locations are the students' responsibility and it is expected that students will plan accordingly. In some instances, partial funding is available and all attempts will be made to assist students. Once students have been assigned to their respective course locations, based on interest, clinical profile requirements and site availability, students are not permitted to request changes.

Both traditional, community service development and role-emerging fieldwork sites 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 with the relevant expertise. The type of supervision will be commensurate with the student's level of training and previous fieldwork experience. Typically, the role-emerging experience is better suited for the level 2b and 3 student.

This first course is scheduled for 7 weeks full-time. In this practicum, learning objectives and expectations will be considered level 3..

Instructional Methods: Clinical education will be provided by occupational therapists that work in various settings, depending on the rotation type of practicum offered. The type of teaching will be commensurate with the student's level of training and previous fieldwork experience. In conjunction with the on-site practicum learning, students will be expected to engage in peer-learning by using web-based technology tools and maintain a student professional portfolio.

Course Content: The exact nature of the interventions and the type of clientele seen during the clinical course will depend on the clinical setting where each student will be placed. Prior to the beginning of the course, students will be informed in which setting they will be doing their course and with which type of clientele. Details will be specified by the clinical educators at the beginning of the course. 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. Please note that the most up to date contact information is contained in the student data information sheet. Students are expected to abide by policies established at each institution and failure to do so can result in immediate failure and termination of the placement. Students are expected to work the hours as stated by the individual setting and additional preparation is expected.

Level 3 Learning Objectives: The student will be able to:

1. Establish own learning objectives, self-evaluate their performance and include goals in CBFÉ.
2. Achieve entry-level professional competence in communication, initiative, problem-solving and professionalism
3. Be independent in work management skills
4. Demonstrate entry-level to practice clinical reasoning and critical thinking
5. Carry a workload which is close to that of entry-level practitioner
6. Be fully accountable for his/her patients and use clinical educator as a coach/mentor.
7. Demonstrate motivation to be involved in other areas of practice and role-emerging areas.
8. Be independent in representing patients in all aspect of health care interventions
9. Liaise with community agencies and be an advocate for his/her patients

Required Texts: The following 4 texts are required for all four Clinical Practicum courses:

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

Please note that it is essential that each OT student purchases this text during the start of the Winter term prior to the first clinical seminar (early January). This text is used for all 4 clinical courses throughout the rest of the program. Note that the bookstore returns all un-bought books in mid-March so this text must be purchased before that time as it is not available later on. All students must submit a section of this text (blank evaluation form) as proof of purchase in accordance with copyright law in the second clinical seminar.

2. Principles for Moving Patients Safely. Montreal: ASSTSAS, 1999.
This text is required for workshop participation and a reference for all future clinical practicum.
3. Student Clinical Experience Booklet.(provided in first clinical seminar)
4. Student Clinical Practicum Manual (provided in first clinical seminar)
5. Additional readings that sites may assign.

Suggested Readings:

1. Course materials from the previous semesters.
2. Site approval document (CGFE-OT) for specific setting.(located on the school website)

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 clinical educator evaluates students' performance, it is the ACCE who assigns the final grade of PASS or FAIL. All students must complete the on-line site feedback form and submit a downloaded copy of this form to their clinical educator at the time of final evaluation. This form is available at http://medreports.medicine.mcgill.ca/pls/htmldb/f?p=115:1:322269499841212::::P1_SCHOOL:OTH

It is mandatory for students to complete the Student Clinical Experience Booklet (a component of the student professional portfolio) throughout the Program. Each clinical educator must sign this document following each clinical course. Students must bring their completed booklet at the latest one week post completion of the final clinical course (OCC1-602) 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 learning objectives for each clinical course as well as clinical projects, letters of recommendation and case histories that may have been completed during their placements.

Students are expected to post a minimum of two (2) messages on the Web-CT bulletin board related to their clinical practicum during each clinical course(describe the clinical setting, the OT role, case studies as described in the clinical seminar and clinical manual...). Failure to do so will result in a delay of mark assignment. The discussion board creates an on-line community of learners and creates a forum for student discussion while students are geographical distant.

Students may be expected to complete a project/assignment during their clinical practicum (this will be determined in collaboration with the clinical educator). Students must be prepared to learn in different clinical teaching models such as a

peer learning situation, multiple clinical educators with different clientele in the same center and/or inter-professional models.

Special Requirements for Course Completion and Program Continuation:

OCC1-602 Clinical Practicum 4 is a PASS or FAIL course. Students who fail OCC1-602 Clinical Practicum 4 may be granted permission to do a remedial clinical practicum 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 practicum Guidelines). If the repeated course or any subsequent clinical course 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 a clinical practicum may lead to delayed completion of the Program (see Clinical practicum Guidelines).

Supporting students in difficulty during Clinical Practicum:

a. Mid-term feedback from sites

Student progress in clinical placements is monitored closely by the ACCEs through scheduled mid-term phone calls to clinical educators. The calls allow 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 counselling and assistance in order to optimize chances for a successful learning experience. All students are given the opportunity to discuss learning objectives as well as strengths and weaknesses individually with an ACCE. This individualized counselling 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 and/or students 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 educator, the student and the ACCE from the university. This allows

for effective communication between the parties and provides support for both the student and the clinical educator.

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

Dress Code: Professionalism with respect to dressing is encouraged throughout the clinical courses. It is the student's responsibility to understand and respect the specific dress code of the clinical site throughout the duration of the placement. Appropriate attire includes closed-toe shoes, trousers/shirts that permit physical movement of clients and shirts of a professional nature (not tank tops). It is recognized that appearance is fundamental to the establishment of trust with clients and the professional team. Failure to do so may result in the student being dismissed until appropriate dress code is followed.

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. These arrangements are made between the clinical educator and the student understanding the requirements of the clinical site. In most situations students are exceeding the working hours considering their additional preparation. Students should contact the ACCE in case of prolonged absence. If the clinical educator is absent, he/she must arrange for the student's teaching/mentoring by another therapist. If the clinical educator is a sole/charge therapist, alternative arrangements are made between the ACCE and the clinical educator.

Right to Write in English or French: Every Student has a right to write essays, examinations and theses in English or in French except in courses where knowledge of a language is one of the objectives of the course. Students are expected to write in the language of the facility during their clinical practicum.

All students are reminded to determine their eligibility for licensure with OEQ, respecting Quebec's language laws during M1 of the program. It should be noted that there may be a waiting list to write the professional French language exam with the Office de la langue française. Failure to register early may result in excessive delay in becoming a member of the provincial order and inability to practice O.T. in Quebec.

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 of Students with Disabilities at 398-6009 before you do this. Failure to do so will result in an inability to accommodate specific learning needs.

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. Failure to respect patient safety at all times can result in immediate failure and termination of the learning experience.

Pregnancy: Students should be advised that many sites are not able to accommodate pregnant students given the work conditions. In such cases, students are recommended to defer their clinical practicum course. Students must inform the ACCE in the event of pregnancy so that appropriate planning can take place and that the site's workplace policies can be respected.

Student Clinical Profile: Students need to complete clinical hours with different populations and settings in order to be considered "entry-level". Students must fulfill rotations in adult physical medicine, mental health and geriatrics in both institutional and community settings. Course assignment is based on site availability, student learning needs and language requirements. Individual interests are prioritized where possible. Students have 48 hours to discuss reasonable concerns once clinical course assignment is posted. Changes to assignments after that time will not be made. Students must be aware that last minute changes to practice area do occur from the site due to staffing issues and students must be prepared to adapt to these unforeseen changes.

FIELDWORK RESPONSIBILITIES IN TRADITIONAL AND COMMUNITY SERVICE SETTINGS

A) Clinical Educator:

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 course.

3. To review with the student the plan set out for the fieldwork course, as well as to 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 and university. Students are expected to complete and revise their own learning objectives on the evaluation form as the course 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 or share supervision with a more experienced fieldwork educator.

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. Failure to respect client confidentiality will result in immediate failure.
2. To strive to reach a "competent" level in assessment, program planning, treatment, report writing and professionalism according to the Profile of OT Practice in Canada (2007).
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. Facilities offering specific rotations and clinical educators are subject to last minute change and students must accept these inevitable changes.

4. To contact the clinical educator a minimum of two weeks prior to the starting date of the clinical course by writing a letter of introduction to confirm time and place of arrival. Students are responsible for picking up their institution data form according to instructions in the confirmation email sent by Croce Riggi. (clinical education administrative assistant)
5. To email/fax the immediate clinical educator's contact information (name, phone, local and email) to the administrative coordinator for clinical education, Mrs. Croce Riggi (croce.filteau@mcgill.ca) during the first week of each clinical course.
6. To complete facility evaluation forms and provide facilities with feedback/evaluation on learning experience (this form is located on-line and referenced in the red clinical manual).

C) Academic Coordinator of Clinical Education (ACCE):

1. To assist with 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 based on availability, interest and clinical profile needs.
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 practice education, 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/teaching to fieldwork educators, both onsite and offsite.

9. To review each fieldwork placement with the student as necessary, facilitate student in developing learning objectives for improved performance at the next clinical course.
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.

CLINICAL PRACTICUM SEMINARS

Credits: 0

Instructors:

Caroline Storr, BSc, MBA,

Assistant Professor/Academic Coordinator of Clinical Education (ACCE)

Davis house room 2

Telephone: 398-6561

E-mail: caroline.storr@mcgill.ca

Office hours: TBS

Susanne Mak, B. Sc. M.Sc

Assistant Academic Coordinator of Clinical Education (AACCE) and Faculty Lecturer

Davis house room 4

Telephone: 398-2772

E-mail: susanne.mak@mcgill.ca

Office hours: TBS

Prerequisites: None

Course Objective: To prepare students for their on-site clinical practicum and review clinical profile.

Course Structure: Prior to M1, Qualifying Year/U3 students will participate in 1-2 preparatory seminars, dates to be announced during term B. Students who participated in international placements and role-emerging placements may be invited to make brief presentations during an international fieldwork symposium and all students are invited to attend.

Student Learning Objectives:

1. To inform students regarding the policies and procedures related to Clinical Practicum
2. Understand application of feedback and evaluation
3. To review clinical profile and address outlined strengths and weaknesses in previous clinical placements promoting reflective practice
4. To review personal learning objectives
5. To be made aware of the procedures required for obtaining licensure in order to practice in Quebec/Canada/USA
6. To acquire strategies in improving his/her employability
7. To prepare for future mentoring/teaching role

Course Materials: Refer to course materials for OCC1-546 Strategies in OT Professional Practice.

Attendance: Attendance during all clinical practicum seminars is mandatory and is a prerequisite for Clinical Practicum. Failure to do so will result in non-admission to the clinical practicum. An outline of the seminars is provided below.

Term	Date	Content	Preparatory Learning Activities
U3/QY Winter term	Seminar 1: (mandatory) 1st week of January (2 hours)	Overview of policies and procedures of clinical education Requirements: CPR, immunization, mask fitting, criminal check Processes for international and out-of-province clinical courses	View Module 1 www.preceptor.ca
	Seminar 2: (mandatory) Early February (2 hours)	Competency based Fieldwork Evaluation (feedback and evaluation) Portfolio WebCT Being a McGill ambassador	View Module 2,3 and 7 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Summer term		Clinical Practicum 1 (Level 1) Clinical Practicum 2 (Level 2A)	

M1 Fall term	Seminar 3: (mandatory) September (3 hours)	Debriefing of summer clinical practica Learning objectives and the Evaluation tool (CBFE) Dealing with feedback and conflict	View Module 6 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Winter term		Clinical Practicum 3 (Level 2B)	
M1 Winter term	March (optional) (3 hours)	International Fieldwork Symposium	
	April (mandatory) (2 hours)	Debriefing of clinical practicum 3	
	May (mandatory) (1 hour)	Reflection/Transition into Practice: New roles	
	June (optional) (1 hour) (optional) (3 hours)	CAOT licensure OEQ Guidelines for Documentation workshop	
M2 Fall term		Clinical Practicum 4 (Level 3)	
Term	Date	Content	Preparatory Learning Activities
U3/QY Winter term	Seminar 1: (mandatory) 1 st week of January (2 hours)	Overview of policies and procedures of clinical education Requirements: CPR, immunization, mask fitting, criminal check Processes for international and out-of-province clinical courses	View Module 1 www.preceptor.ca
	Seminar 2: (mandatory) Early February	Competency based Fieldwork Evaluation (feedback and evaluation)	View Module 2,3 and 7 www.preceptor.ca

	(2 hours)	Portfolio WebCT Being a McGill ambassador	TBA: Readings in Red clinical booklet
M1 Summer term		Clinical Practicum 1 (Level 1) Clinical Practicum 2 (Level 2A)	
M1 Fall term	Seminar 3: (mandatory) September (3 hours)	Debriefing of summer clinical practica Learning objectives and the Evaluation tool (CBFE) Dealing with feedback and conflict	View Module 6 www.preceptor.ca TBA: Readings in Red clinical booklet
M1 Winter term		Clinical Practicum 3 (Level 2B)	
M1 Winter term	March (optional) (3 hours)	International Fieldwork Symposium	
	April (mandatory) (2 hours)	Debriefing of clinical practicum 3	
	May (mandatory) (1 hour)	Reflection/Transition into Practice: New roles	
	June (optional) (1 hour) (optional) (3 hours)	CAOT licensure OEQ Guidelines for Documentation workshop	
M2 Fall term		Clinical Practicum 4 (Level 3)	

TYPES OF CLINICAL PRACTICA

There are 2 types of Practice Education:

1. Traditional/Community Service Development Placements
 - A) Quebec Placements
 - B) Out-Of-Province Placements
 - C) International Placements
2. Role-Emerging Fieldwork Placements

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 cancellations.

A) QUEBEC PLACEMENTS:

Students will be placed in McGill Affiliated Facilities in the greater Montréal area/McGill RUIS 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 practice offers. Students must be able to communicate in both official languages (French and English). Requests can be made for clinical practica beyond the McGill RUIS in the province of Quebec to the ACCE. Availability is dependent on other universities' clinical practica schedules and sites' ability to accept a McGill student within a non-McGill RUIS institution.

B) OUT-OF-PROVINCE PLACEMENTS:

Students who are interested in doing their clinical placement in another province may do so by following the application procedure as announced by email by the ACCE during the Fall term. This will include a mandatory seminar 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 practica courses in the province of Quebec. There is an application fee for out-of-province placements (currently 150\$) which is paid by cheque only.

Students must sign an intent form confirming that they will accept the out-of-province offer upon application. Offered sites will only be refused in the event that the practice rotation does not match the student's profile. In the event that the National Placement Service cannot find a practice site for the student, the application fee is non-refundable.

Deadlines for Out-of-Province placements in M1 and M2

Approximate deadline to submit completed request form for a M1 placement in summer placement 2012	October- November 2011
Approximate deadline to submit completed request form for a M1 placement in Jan/Feb 2013	End of September 2012 (exact date to be confirmed/announced by email)
Approximate deadline to submit completed request form for a M2 placement in Sept/Oct 2013	January 2013

IMPORTANT: Under no circumstances, should students attempt to contact sites independently within Canada. Possible contact names should be given to the ACCE and AACCE. Non-compliance will result in the student's application being rejected without refund.

C) INTERNATIONAL PLACEMENTS

Policy:

Eligibility Criteria:

1. To be considered for a clinical course 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 have some contacts 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. Students are encouraged to contact the McGill Exchange Office located in the Brown Building for possible funding support. There is the possibility of partial funding support based on financial need provided that the student's clinical course is of 61 days duration. Applications are made directly to that office and it is suggested that the application supports the student in citing the entire degree program costs as students cannot work during the continuous Masters Professional program. This office will review eligibility on a case by case basis.

- 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 cancellations. 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.
- e. 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 first clinical seminar. If a student is considering this option, he/she must initiate the request for an international placement with the Academic Coordinator of Clinical Education by the announced deadline. An announcement will be sent to the class in January of QY/U3 announcing the application deadline. Please note that there is only one application opportunity in the Masters Professional Program.

Twelve months before the onset of the applicable fieldwork session, the student must request in writing, to the Academic Coordinator of Clinical Education, his/her wish to complete practice education outside of Canada.

Exact date deadlines for international placement applications will be announced in January of the Winter Term of qualifying year/U3 BSc option.

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, what the student hopes to learn and what the student can contribute to the international agency/institution

3. The requested clinical course for completing this experience

International practice education is a privilege and subject to the approval of the ACCE/Occupational Therapy Faculty. The student shall obtain a letter of reference from a suitable referee (past mentor) or one faculty member to support the application to participate in out-of-country fieldwork. 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 international fieldwork.

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 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 clinical educator.
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 (please refer to international binder of past experiences and CD-rom in D4).
3. The School reserves the right to limit the total number of international placements organized per year subject to capacity.
4. Students may apply for a maximum of two international placements, overall, in the following combination:
 - one in the US* and one overseas;

*Please note that some restrictions may apply to US placements for 2012-2013. It is the student's responsibility to check with the sponsoring

institution as to particular visa requirements and eligibility for a hands-on practicum.

5. A second international practicum may be undertaken only if the student has performed satisfactorily in the first international practicum.
6. The first opportunity for a student to do international fieldwork will be in the second summer clinical practicum in M1. The course can be scheduled during the available weeks following Clinical Practicum 1.
7. The international practicum 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 practicum and to reassign the student locally based on existing availability.

Responsibilities:

Student: The student will:

1. Commit to the practicum 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 practicum 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.
1. 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)].
2. Be knowledgeable in the language of origin of the country he/she has selected.
3. 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 application acceptance from the ACCE.
4. 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.
5. Begin fieldwork.
6. Agree to provide and complete the Student Evaluation of Placement Form, as well as any addendum specific to international placements (international student experience form) 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 CBFs to the ACCE in order

to receive a grade. All students participating in international fieldwork are expected to prepare a short presentation for the international symposium to document their learning.

7. In the event of last minute cancellations, the student must advise the site in writing.
 - a. 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 practicum.

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 clinical educator(s) if deemed necessary

The above must be forwarded to:

Caroline Storr

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 an affiliation 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 or illness of the occupational therapy clinical educator.

4. Commit to practicum (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 and complete the evaluation form.

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. Reserve the right to request an abbreviated resume for the Occupational Therapy Department and the potential clinical educator, 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
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. liability certificate from McGill risk management office
 - d. School of Physical & Occupational Therapy Course Guide(s) containing curriculum and/or electronic documentation
 - e. student performance/fieldwork objectives
 - f. policies related to:
 - i. Marking guidelines
 - ii. Student Evaluations
5. Notify student to finalize travel and accommodation arrangements.
6. Provide resource material for clinical educator (when necessary) which will be delivered by the student.
7. Initiate contact with facility via email at mid-term in order to obtain feedback re: progress in placement,

8. Write letter of appreciation to facility during annual acknowledgement period.

INTERNATIONAL PLACEMENTS SCHEDULE

Winter term (qualifying year/BSc 3 option): reminder to students of deadline for applying for international practica and orientation and introduction to International Placements (hand out guidelines) This is announced in OCC1-546 Fall term) and the first clinical seminar (Winter term).

Requests after this period will not be considered

RESPONSIBILITIES OF STUDENT	SUGGESTED TARGET DATES
Request the international clinical course (or Item # 1)	12 months prior to clinical course. Students must respect deadline provided by the ACCE.
Accept responsibility for <u>all</u> items mentioned in #2 (or Item 2)	Immediately upon acceptance by ACCE
Find the facility and/or select from list of available sites and write a letter requesting a placement (or Item 3)	Immediately upon being granted approval 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 (practica in Quebec or outside Quebec) if the international placement is cancelled	ongoing
Agree to complete student evaluation of practica and ensure that CBFÉ is completed at Mid-Term and Final	end of practica

II ROLE-EMERGING FIELDWORK PRACTICA

Introduction: The 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: 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, primary care, etc.) 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 Practica:

- to allow students to learn new roles in community programs/services
- to produce a therapist more confident to move into new settings
- to produce a therapist more competent in sustainable program development
- to gain experience in identifying clients'/agency needs
- to become familiar with the socio-cultural environment of the client(s)/program
- 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: Seven (7) or eight (8) weeks full-time placement (in clinical practicum II, III or IV). 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 clinical educator).

It is the students' responsibility to secure an interested facility and an off-site OT clinical educator. Students should arrange a meeting with the ACCE for a list of sites and clinical educators to assist their search. Students must meet with their site contact person and their off-site OT prior to starting the clinical experience to ensure that the placement objectives are clearly communicated to all parties.

Students are expected to be self-motivated and autonomous in this type of learning experience.

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 by implementing an environmental scan or needs analysis.
- determined how the clientele/agency needs will be met

Supervision: Each group of students will be supervised by an off-site clinical educator (member of the OEQ) for an average of one (1) one-half ($\frac{1}{2}$) day/week. Supervision can be remote, virtual or face to face depending on the individual project. The supervision will be based on a consultative model; the clinical educator will provide direction/guidance as needed, as well as discuss Occupational Therapy theories and concepts related to the particular placement. The off-site clinical educator will also assist the student in affirming his/her role within the agency/program. Lastly, the offsite clinical educator 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 daily journal to assist with the reflection process as well as a planning tool for the clinical educatory meetings. The pairing of students will offer students the opportunity to discuss and refine ideas amongst

themselves, prior to meeting with the off-site clinical educator. The students will be largely responsible for developing the content of their supervisory meetings depending on their own, individual or group learning needs.

Student Evaluation: The same evaluation tool (CBFE) and process will be followed as per traditional placements although a formal mid-term might not always be appropriate. 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 clinical educator 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 white 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)
- analyzing 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 clinical educator 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 (needs analysis/environmental scan) 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 problems and clinical reasoning
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 clinical educator.

References:

1. Bossers, A. et al. (1997). *Understanding the role-emerging fieldwork placement*. DJOT, April 1997, vol. 64, issue 1, pp. 70-81.
2. Report of the Curriculum Committee, Spring 1995. School of Physical & Occupational Therapy, McGill University.
3. 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.

Special note: In the unexpected circumstance that neither a traditional setting nor a role-emerging setting is available during the course dates, the clinical course for the student in question will be deferred, resulting in late graduation. This decision will be made by the ACCEs.

POTH 624 ENTRY LEVEL MASTER'S PROJECT

Credits: 6

Coordinators: Patricia McKinley PhD & Barbara Mazer PhD

Team Projects (4-5 students per project) will be supervised by a Faculty Supervisor and a Clinical Supervisor. Teams will work on their projects part-time throughout the school year (September- April) and then full-time over the summer months (May-August).

Time Frame: Fall M1– Summer M2 (Final grade will be submitted in Fall M2).

Structure:

General course requirements: Seminars or meetings will be given by the course coordinators throughout the calendar year September – August. The content of these seminars, according to need, may include the following:

- U3/QY April: information session meeting for project execution.
- M1 September: an orientation to the course, including guidelines for submission to a Research Ethics Committee, project development and requirements for obtaining a passing grade.
- M1 Fall within POTH 612: a 3 wk 3 hr/week block on development of a protocol for the project, will specifically target methodology related to protocol development.
- M1 Winter midterm: trouble shooting seminar and progress report, completing submission for ethics and scientific committees where necessary.
- M2 July: meeting for organizing project completion and power point presentations to supervisors and clinicians.

Specific course requirements: Each team will be required to meet with the Supervisor(s) as follows for a minimum of 6-8 meetings, 1-2 hours per meeting:

- Development of an action plan and student letter of agreement (September M1).
- Project progress report (December, M1).
- Project progress report (March-April, M1).

- Team meetings during data collection period as necessary, approximately once per month (May- mid-July).
- Final Paper due (end of August M2).
- Individual discussion (end of August, M2).
- Oral presentation (last week of August M2).

Purpose and Objective: The purpose of this Masters project is to conduct a scholarly piece of work that yields information related to rehabilitation that can be presented at a conference and/or is publishable. The specific goal for the student is to develop research knowledge and skills that are clinically relevant.

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

1. Design a research question that is pertinent to rehabilitation or the development of a clinical program.
2. Conceptualize a project that is pertinent to rehabilitation.
3. Conduct a research study that yields information related to rehabilitation and can be presented at national or international conferences and/or is suitable for publication in a clinically related journal.

Examples of Project Categories:

1. **Survey:** Plan and conduct a survey of students, patients, informal caregivers, health professionals and others on a topic related to rehabilitation.
2. **Qualitative Study:** a proposal that would include rationale, literature review and methods for qualitative research of a question relevant to rehabilitation that may include collection and/or analysis of data in a limited scope (preliminary focus groups etc).
3. **Clinical Practice Guidelines (CPG)** Take existing clinical guidelines or a critical care map for a specific condition and review and update supporting evidence in a formal written recommendation for practice that includes a full and documented rationale.
4. **Program Evaluation:** In collaboration with a clinical department, plan an evaluation of a specific program that might include development of a survey,

analysis of pre-existing data sets, development of data sets, review of the literature, case studies or preliminary data.

5. **Systematic Review:** Systematically examine the research related to a specific clinical question using a defined protocol and criteria for evaluation, review the evidence on a topic and prepare your findings for publication and presentation.
6. **Knowledge Translation:** Develop a website or CD module related to rehabilitation for use by patients, caregivers, teachers or health professionals. Develop a teaching aid for patients, caregivers, or health professionals.
7. **Measurement Development:** Develop a proposal for a research project that includes rationale, literature review and methodology to evaluate the psychometric properties of a measure or tool used in the practice of physical or occupational therapy. May include a small pilot study requiring a limited amount of data collection and/or data analysis.
8. **Quantitative Study:** Development and implementation of research methodology and collection and analysis of data to answer a specific research question.

Required Text: None

Evaluation: A written and oral component will be expected with the written component worth 70% and the oral component worth 30%.

Written component: The write-up of the project should be in the form of an article or report and should be approximately 20-30 pages plus appendices (see page 9 for the breakdown of marks). In addition, each student will have to complete a written independent portion of the project - the specific nature of this component will be decided by each team. It may be that each student writes an independent Discussion, each student can answer a specific question related to the project, etc. Each one will be graded separately and will be worth 20% of the final written grade. **Each student is required to successfully pass this individual component in order to pass the course.**

Oral component: Each group will be required to present their project at the clinical site associated with their project. This will be a formal 40-45 minute Powerpoint presentation for the Faculty Supervisor, the Clinical Supervisor as well as other

interested clinicians at the site where the project was initiated. This 40-45 minute presentation will be graded (see page 10 for the marking grid). In addition, all groups will present their project for the McGill faculty and students – this will be a short 7 minute presentation at the end of August.

Both the written and oral presentations must be completed and submitted before the end of August to ensure that all work is completed prior to beginning the M2 stage. The grades though, will be credited in the Fall term of M2. The total grade will be available early in the term, so that if a student falls below a passing mark (65%), he/she will have an opportunity to rewrite their independent part before the end of the term. The final mark will be submitted as a Pass or Fail.

To successfully pass the course, the final project must include at least 10 of the 33 components in the evaluation grid (see page 6) and the final total grade must be higher than 65%. As well, the following elements are required:

- Attendance and participation at group meeting.
- Summary reports of the group meetings.
- Attendance at seminar meetings for POTH 624.

Project Selection Process: There will be a list of projects available for selection by each student by the end of June, M1. Each student will sign up for projects in order of preference (1st, 2nd, 3rd and 4th). Before the start of the fall semester, the project teams will be announced.

Note Students must select a project that is identified as being within their discipline (PT or OT) or interdisciplinary. Faculty and Clinicians will identify how many OT and PT students are required for each project.

The projects will be selected from a list of research topics put forth by clinicians and faculty each year, and the final selection will be determined by the breadth and diversity of the projects as well as the balance for Occupational and Physical Therapy students. This list of projects will be developed during clinical workshops and meetings held for clinicians during the winter term.

The Advisory Committee: Students will develop their group projects under the direction of their Project Advisory Committee and the coordinator of the POTH 624 course. The committee will be made up of a Supervisor from the Faculty of Physical and Occupational Therapy, and a clinical expert/consultant.

Specific Duties:

Faculty Supervisor: The Faculty Supervisor provides advice and assistance in the refinement of the research question (with the Clinical Supervisor) that will be developed by the student group into a research project. The Supervisor is responsible for the following:

- Ensuring necessary procedures with respect to permission, Research Ethics, institutional and academic requirements are met.
- Reading and commenting on progressive documents of the project.
- Assisting with arrangements for the Research Committee meetings.
- Attending the Research Committee meetings and the final research day presentation.
- Assisting with grading of the project.
- Liaising with any outside consultants or agencies required for completion of the project.

Note where the primary Faculty Supervisor is a faculty research associate or a faculty lecturer, the expert Faculty professor appointed to the project will only be responsible for:

- Providing expertise in the research domain.
- Attending 4 research committee meetings and the final research day presentation.
- Reading and commenting on final protocol.
- Assisting with grading of the project.

Clinical Supervisor: A health care professional (Physical Therapist, Occupational Therapist, Physician, etc) in rehabilitation or other area of service delivery, may be appointed as a clinical expert/consultant to assist in the development and completion of the project. The Clinical Supervisor will serve as a supervisor and will contribute to the evaluation of the completed project. This role will include reading and commenting on progressive documents of the project, attending the appropriate research meetings and the final research day presentation.

Timeline:

August- September M1

- Project organization.
- POTH 612 and selection of methodology blocks.
- Meeting 1 with Advisory Committee.

September M1-April M1

- Initial work on research projects (e.g. literature review, etc).
- November-December M1
- Meeting 2 with Advisory Committee.
- Organize paper work for scientific review and ethics (where necessary).
- Final marks for POTH 612.

January or February

- Meeting or contact with supervisor to evaluate progress and target goals for winter semester and finish Ethics forms if necessary.

March-April

- Meeting with Advisory Committee to finalize plan for data collection.
- Progress report sent to POTH 624 coordinators.
- Present project to Ethics where necessary and make corrections as required.

May – June M2

- Conduct the project/ Data collection.

July

- Meeting with Advisory Committee to present and discuss results.

August

- Completing the write-up of the project including the individual discussions.
- Creating the Powerpoint presentation/Poster presentation.
- Evaluation of projects- oral presentation and written report.

Guidelines for Time Commitment for Working on the Project and For

Summer Vacation: All students must plan to be available to work on their project approximately 35-40 hours per week with at least 25 hours available during weekday daytime hours (Monday-Friday 8-5) in order to work together with their team supervisors, and to complete the tasks that must be done during the work day (meeting with staff, doing data collection, etc). Groups are responsible for ensuring that they have sufficient common available time to schedule meetings, work collaboratively and conduct the data analysis.

Each student is entitled to take 2 weeks of vacation over the 4 months of summer (May-August). The timing of this vacation must be approved by the Faculty Supervisor, as well as the other students in the group to ensure that their absence will not affect the progress of the project.

LEARNING OBJECTIVES / EVALUATION CRITERIA

The Professional Masters projects must meet a minimum of **10** of the **33** learning objectives listed. No objectives are “compulsory”, allowing for a broad range of projects that can meet the criteria.

As a group, select the objectives that will be covered by the group project.

INTRODUCTION / BACKGROUND	
Formulate a research question / program objective	
Conduct a literature search	
Critically review the literature (the breadth and depth should be appropriate to the type of project)	
Develop background information supporting the research question / program	
Present/ apply a theoretical model of the relationships under study	
Conduct a systematic literature review	
METHODOLOGY/ DATA COLLECTION	
Choose measures to answer the question / evaluate clinical program	
Develop a measure	
Develop or refine a questionnaire	
Test the measurement properties of a measure or questionnaire	
Write a consent form/prepare documents for ethics committee	
Develop clinical program plan	
Develop promotional or educational material for clinical program	
Implement clinical program	
Evaluate clinical program	
Recruit subjects into a research study	

Collect data from subjects through interviews / physical tests / focus groups	
Manage and co-ordinate study	
Choose a design to answer the question	
Create a computerized method of managing the data (database design)	
Enter data into a computerized data base	
Verify accuracy and completeness of data	
RESULTS AND ANALYSIS	
Manipulate data to create new variables	
Calculate descriptive statistics	
Perform basic inferential statistics (e.g. linear regression or logistic regression, analysis of variance, t-tests, Chi-square tests, etc.)	
Use complex statistical models (e.g. hierarchical linear models, Poisson models, ordinal regression, categorical regression, survival analysis, Cox proportional models, Markov models etc.)	
Perform basic qualitative analyses (e.g. categorizing and contextualizing, reflexivity, transparency, constant comparison, etc.)	
Perform complex qualitative analyses (e.g. ethnography, poetry, art-based analyses, etc.)	
PRESENTATION OF RESULTS AND CONCLUSION	
Interpret results from statistical or qualitative analyses / systematic literature review	
Create tables to present results	
Create graphs of results	
Create powerpoint presentation for conference or clinical rounds	
Write article for journal publication	

Faculty Supervisor Signature_____

Date_____

Clinical Supervisor Signature_____

Date_____

Student Signature _____

Date_____

Student Signature _____

Date_____

Student Signature _____

Date_____

Student Signature _____

Date_____

Student Signature _____

Date_____

Developed by Nancy E. Mayo, PhD November 7, 2003.

Modified with permission by Graduate Faculty Committee with contributions by Dr. L. Butler-Kisbert and Michèle Hébert October 2005.

Progress Tracking Form

PROJECT TITLE: _____

STUDENTS: _____

FACULTY SUPERVISOR: _____

CLINICAL SUPERVISOR: _____

LEARNING OBJECTIVE (page 6-7)	PERSON(S) RESPONSIBLE	EXPECTED DATE OF COMPLETION	DATE COMPLETED	SUPERVISOR SIGNATURE	STUDENT SIGNATURE
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

McGill University

School of Physical and Occupational Therapy

PROFESSIONAL MASTERS PROJECT EVALUATION

Written Presentation (70%) ***

- Introduction (research question, rationale) /5
- Background and literature review /15
- Methodology /10
- Results /15
- Discussion (individual discussion written by each team member) /20***
- General presentation (quality of language, organization of text) /5

TOTAL: /70

NB.

***Weighting may be changed depending on type of study except for **discussion/or other independent aspect** which is **FIXED at 20%**.

Oral Presentation – (30%)

Visual presentation

- Appropriateness of material (tables, figures, etc.) /4
- Quality of language /3
- Organisation of information and overall appearance /3

Oral presentation

- Selection of important components of project /5
- Demonstration of knowledge /5
- Clarity of presentation /5
- Capacity to answer questions /5

TOTAL: /30

POTH 624

POSTER OR ORAL EVALUATION

Presentation Title: _____

Presenter(s): _____

Evaluator: _____ Date: _____

Grade (/30) _____

Visual Presentation:

Appropriateness Of Materials	
<p>The tables and figures chosen for the presentation were related to the key points of the project.</p> <p>Excellent [] Good [] Adequate [] Inadequate []</p>	<p>Comments:</p>

Quality of Language	
<p>The terminology used was appropriate for the project and the terms were explained clearly. The grammar was correct and the punctuation appropriate.</p> <p>Excellent [] Good [] Adequate [] Inadequate []</p>	<p>Comments:</p>

Organization and Overall Appearance	
<p>There was an appropriate amount of information on the slides, and the text was readable. The organization was easy to follow and made sense.</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	<p>Comments:</p>

Oral Presentation:

Selection of Important Components of Project	
<p>The chosen elements best represent the overall goals and outcomes of the project.</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	<p>Comments:</p>

Demonstration of Knowledge	
<p>The scholarly/scientific rigor including: hypotheses, relevant literature, design, strategies for analysis, critical appraisal, discussion and conclusion was:</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	<p>Comments:</p>

Clarity of Presentation	
<p>The oral or poster presentation: organization, appropriate use of professional language, logical flow, correct grammar and spelling, good pace, was:</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	<p>Comments:</p>

Response to Questions	
<p>Responses to audience/evaluator questions: clarity, relevance and appropriateness of explanations; ability to defend work; knowledge of strengths and limitations of study, were:</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	<p>Comments:</p>

POTH 624

WRITTEN EVALUATION GRID

Instructions to Evaluators:

Consider the six domains of evaluation. Categories and their relative weight may be adapted as appropriate to the specific project. Comments/feedback may be added to supplement the ratings.

Project Title: _____

Students' names: _____

Evaluators: _____ Date: _____

Grade (/70) _____

Research Question and Project Rationale: Weight (%) _____ Grade: _____ _____	
The topic was appropriately introduced and the question clearly stated; the rationale was provided to support the research question. Excellent [] Good [] Adequate [] Inadequate []	Comments:

Background and Literature Review: Weight (%) _____ Grade: _____ _____	
The breadth, depth and critical appraisal of the review of the literature were appropriate.	Comments:

Excellent []	
Good []	
Adequate []	
Inadequate []	

Methodology:	Weight (%) _____	Grade: _____
<ul style="list-style-type: none"> • Design, methods and statistical or qualitative analysis were appropriate for the study and appropriately executed; • For systematic reviews; search strategies and inclusion criteria were appropriate; • If education or intervention program; design and evaluation of effectiveness were appropriately outlined/conducted. <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	Comments:	

Results:	Weight (%) _____	Grade: _____
<p>Results were presented in an organized and cogent manner. Appropriate tables and figures were included. Statistical analyses were appropriately reported and illustrated.</p> <p>Excellent []</p> <p>Good []</p> <p>Adequate []</p> <p>Inadequate []</p>	Comments:	

Discussion / Individual Component: Weight _____ Grade: _____	
<p>Student discussed findings, conclusions, interpretation, significance and/or future directions of the project by placing them into the context of existing literature, and outlining the significance for clinical practice and for future studies.</p> <p>The student showed innovative and independent thought and demonstrated mastery of the project.</p> <p>Excellent [] Good [] Adequate [] Inadequate []</p>	<p>Comments:</p>

General Presentation: Weight (%) _____ Grade: _____	
<p>The quality of the language demonstrated good grammar, appropriate use of professional language; text was well organized and the ideas flowed in a logical manner; figures, graphs and tables were easy to understand and legends were clear; manuscript was free of typographical errors.</p> <p>Excellent [] Good [] Adequate [] Inadequate []</p>	<p>Comments:</p>

General Comments:

Date: _____ Evaluator's signature _____

Guidelines for Written Presentation

TITLE PAGE-STANDARD FORMAT

{Title of Project Report}

By

{Students' names}

A project submitted to the School of Physical and Occupational Therapy in conformity
with the requirements for the degree of Master of Science in Physical or Occupational
Therapy

McGill University

Montréal, Québec Canada

{Month of final submission, year}

TABLE OF CONTENTS – STANDARD FORMAT

(can be modified as appropriate)

Table of Contents

Abstract (maximum 250 words or as specified by the journal selected for submission)

Acknowledgements (if desired)

List of Tables

List of Figures

1. Introduction / background information, purpose
 - 1.1 (Subsections as needed)
 - 1.2
2. Methods
 - 2.1 Design
 - 2.2 Subjects
 - 2.3 Equipment
 - 2.4 Outcome Measures
 - 2.5 Procedures
 - 2.6 Data Management/ Analysis
3. Results
 - 3.1 (subsections as needed)
 - 3.2
4. Discussion
 - 4.1 (subsections as needed)
5. Summary and Conclusions
6. References
7. Appendices

If your project required Ethics Approval and used a consent form, the consent form should be included in the Appendices.

McGill University
School of Physical and Occupational Therapy
PROFESSIONAL MASTERS RESEARCH ADVISORY COMMITTEE

Guidelines

Each team of students will be supervised by an Advisory Committee formed by:

- Faculty Supervisor (School of P&OT tenure-track or tenure professors)
- Clinical Supervisor

The responsibilities of the Advisory Committee are:

1. Provide advice to the team on different aspects of the research project
2. Meet with the students to assess progress on the project and complete progress report
3. Participate in the evaluation process

Note Membership of an Advisory Committee does not automatically imply an entitlement to authorship on any publication based on the team's research. The School's and Faculty of Medicine's Guidelines on Authorship must be followed.

Advisory Committee

Faculty Supervisor

Name: _____ E-mail: _____

Telephone: _____ FAX: _____

Clinical Supervisor

Name: _____ E-mail: _____

Telephone: _____ FAX: _____

Affiliation: _____

Students

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

McGill University
School of Physical and Occupational Therapy
PROFESSIONAL MASTERS RESEARCH ADVISORY COMMITTEE

SUPERVISOR
LETTER OF AGREEMENT

I, _____ have agreed to be the

Faculty Supervisor or Clinical Supervisor

for the supervision of the research project to be executed by the team formed by:

Student name: _____ Student name: _____

Student name: _____ Student name: _____

Student name: _____ Student name: _____

My responsibilities include:

1. Provide advice to the team on different aspects of the research project.
2. Meet with the students to assess progress on the project and complete progress report.
3. Participate in the evaluation process.

In addition, I will provide:

- Laboratory space and access to equipment
- Work space (i.e., desk, computer, etc.)
- Access to subjects/clients as required
- Consultation as needed
- Pertinent reading material

Please specify:

M1 Fall # meetings: _____ or total # hours: _____

M1 Winter # meetings: _____ or total # hours: _____

M2 Spring/Summer # meetings: _____ or total # hours: _____

M2 Fall # meetings: _____ or total # hours: _____

Other (please specify): _____

It is my understanding that the team of students will:

A. Submit work to me for approval in the form of:

- Research proposal
- Data reduction
- Data analysis
- Draft of paper
- Material for oral presentation
- Other (please specify): _____

B. Acknowledge my contribution to their work in accordance with McGill Ethics Guidelines by:

- Acknowledging my contribution in oral and written presentations emanating from the project
- Including me as an author on relevant oral and written publication emanating from the project
- Other (please specify): _____

Signatures

Member of Advisory Committee: _____ Date: _____

Student representative for the team:

Name: _____ Signature: _____ Date: _____

McGill University

School of Physical and Occupational Therapy

PROFESSIONAL MASTERS RESEARCH ADVISORY COMMITTEE

STUDENT

LETTER OF AGREEMENT

I, _____ have agreed to be part of the project team entitled:

Which includes other team members as follows:

In addition to the general course requirements which include attending group meetings with the Supervisory Committee, contributing to interim reports, and writing an independent discussion for the paper,

I agree that my duties and responsibilities include the following:

Student signature: _____ Date: _____

D. Professional Complementary Courses

The following courses are professional complementary courses offered to Occupational Therapy students. With permission of the instructor, professional complementary courses listed for Physical Therapy students or Rehabilitation Science students may be taken by Occupational Therapy students, if numbers permit.

PROFESSIONAL COMPLEMENTARY COURSES

POTH 627	Advanced Topics of Dysphagia
POTH 633	Function and Activity in Arthritis
POTH 635	Enabling Upper Extremity Function
POTH 638	Promoting Wellness of Seniors
POTH 640	Role-Emerging Management

POTH 627 ADVANCED TOPICS IN DYSPHAGIA

Credits:	3
Pre-requisites:	OCC1 547 Occupational Solutions 1 & OCC1 617 Occupational Solutions 2
Instructor:	Heather Lambert, PhD., OT Office hours: By appointment Office: H201 Tel: 514-398-4400 ext 09021 Email: heather.lambert@mcgill.ca

Course Description: This professional complementary course will provide occupational therapy students with advanced knowledge and application of therapeutic skills in the area of dysphagia and feeding. Through case studies, self-directed learning, site visits, lectures and practical sessions, this course will teach students the various aspects of managing feeding and swallowing disorders in a variety of populations and settings within an interprofessional team context.

Course Structure: 2, 3-hour sessions per week.

Learning Objectives: At the end of the course, the student will be able to:

1. Identify the cause of dysphagia and/or feeding difficulties associated with a variety of conditions across the lifespan.
2. Select the best assessment method for the patient with dysphagia and /or feeding problems and interpret the results.
3. Design an effective treatment plan for the patient with dysphagia and /or feeding problems in relation to theoretical frameworks.
4. Effectively apply the treatment in a simulated and/or real setting.
5. Understand the role of the OT and implications of intervention in dysphagia and feeding, particularly within the Quebec context.
6. Understand the ethical implications of treatment choices and therapists' actions.
7. Develop the role of the OT within an interprofessional team context.
8. Compare and contrast effective assessments and treatment interventions with a variety of dysphagic patients.
9. Compare and contrast effective assessments and treatment interventions with a variety of patients with feeding difficulties.

Course Content:

- A. Neurogenic dysphagia
- B. Dysphagia in oncology
- C. Pediatric dysphagia
- D. Other difficulties related to swallowing
- E. Feeding problems
- F. Ethical issues
- G. Professional issues and interprofessional practice

Evaluation: Details of assessment methods and grading will be given on the first day of class. Grades are based on a combination of individual and group work, participation, oral and written assignments.

Required Textbook:

Groher, M.E. and Crary, M.A. (2010) *Dysphagia: Clinical Management in Adults and Children*. Maryland Heights, MO: Mosby Elsevier.

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

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

Skills Building Attendance Mark: Attendance at all seminars and clinical reasoning workshops is mandatory. A student cannot miss more than 10% of the seminars (i.e. more than 1 per term) without an acceptable written excuse. If he or she misses more than the permitted number of sessions, 10% of the total course mark will be removed.

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

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

Disability: If you have a disability you may register with the Office for Students with Disabilities at 398-6009. You are also welcome to contact the instructor to arrange a time to discuss your situation.

POTH 633 FUNCTION AND ACTIVITY IN ARTHRITIS

Credits: 3

Instructors: Ada Pagnotta
adapagnotta@hotmail.com
apagnott_hjr@ssss.gouv.qc.ca

Susan Sofer
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Class Location: Jewish Rehabilitation Hospital
3205 place Alton Goldbloom
Chomedey, Laval

Report to front entrance for the first class

Class Schedule: 8:30 to 12:00, 1 hour lunch, 13:00 to 16:00
6 consecutive Sundays except for one Sunday during the break

Office Hours: Available by appointment only
Monday to Friday from 8:30 to 12:00
Jewish Rehabilitation Hospital
(450) 688-9550 ext. 221

Course Starts: Sunday, **March 4, 2012**

Course Ends: **Sunday, April 22, 2012**

Pre-requisite: Basic knowledge of the rheumatic diseases and clinical experience in the treatment of physical disabilities.

Course Material

Required Manual: *The Rheumatic Disease Assessment Battery*. Ada Pagnotta and Susan Sofer, Jewish Rehabilitation Hospital Foundation. Cost: \$35.00

Recommended Text: *Rheumatic Disease in the Adult and Child: Occupational Therapy and Rehabilitation*. Jeanne Melvin, edition 3, F.A. Davis Company.

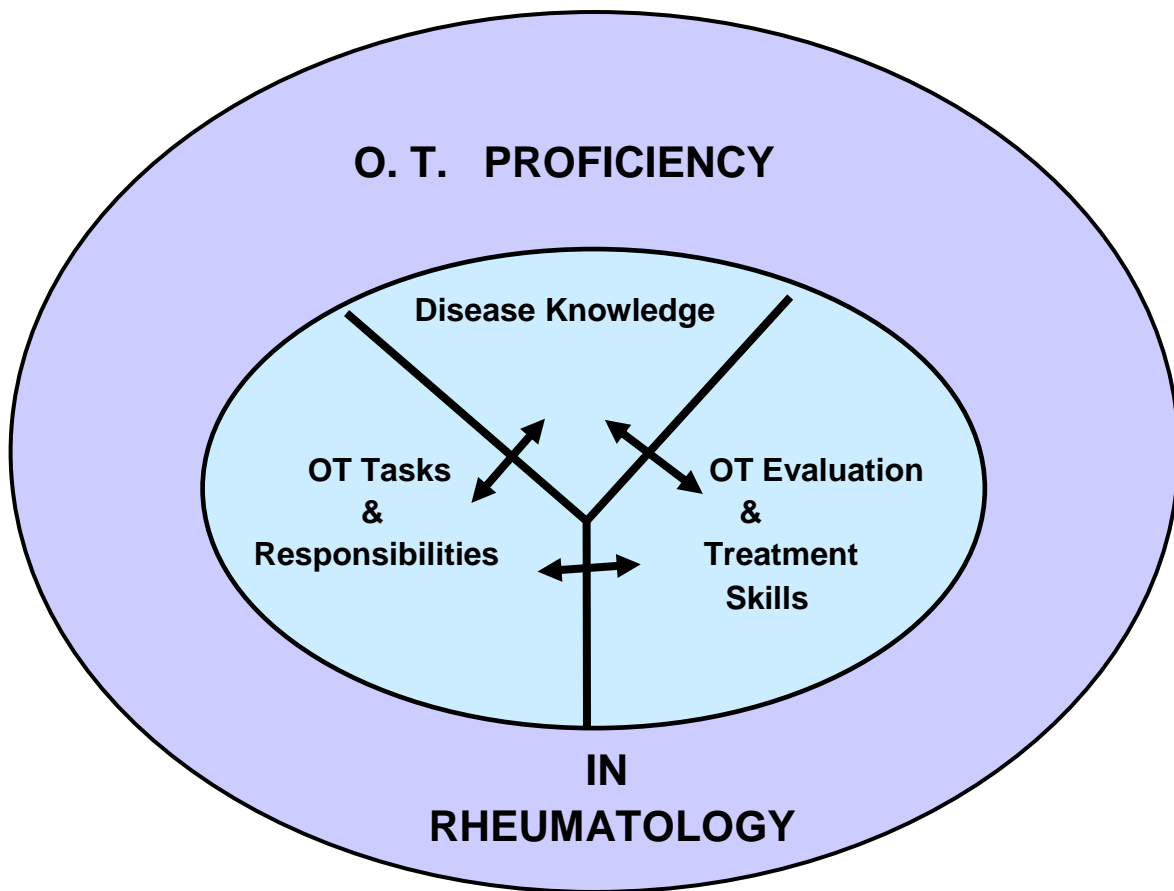
Suggested Readings: Several journal articles, pamphlets and prepared handouts are provided for additional reading and for deeper comprehension of the material covered in class but for which the student is not responsible for the final exam.

***Access to the Internet** is necessary for part of assignment 1.

Course Description: This course is designed for 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.

Concept Map:



Course Plan:

Learning Outcomes: 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 administrating 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-centered O.T. **treatment**.

Course Content: Content of the course will include coverage of:

1. Major rheumatic diseases such as:

◆ Polyarthritis:

- Rheumatoid Arthritis
- Juvenile Arthritis
- Ankylosing Spondylitis
- Psoriatic Arthritis
- Reiter's Syndrome

◆ Connective Tissue Disorders:

- Systemic Lupus Erythematosus
- Scleroderma
- Polymyositis and Dermatomyositis

◆ Degenerative Joint Diseases

◆ Other:

- Fibromyalgia
- Osteoporosis
- Lyme's Disease

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

Instructional Method: 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.

Assignments and Evaluation

Grading breakdown: TBA

Class Rules: Missing class is not tolerated barring a few exceptions (*i.e.*, sickness with medical note or a family tragedy).

The professors reserve the right to disqualify from the course any student who does not attend class without substantiated and valid reason(s).

If a student will be absent from a class (for reason's identified above), the instructor giving the class must be notified and the marks of the missed quiz will be redistributed.

Assignments must be handed in for due dates, no late submissions accepted.

A missed final exam will be recoupable 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.

POTH 635 ENABLING UPPER EXTREMITY FUNCTION

Credits: 3

Instructor: Marie-Eve Bolduc, erg, M.Sc.

Prerequisites: OCC1-545 Therapeutic Strategies in OT1 & OCC1-549 Therapeutic Strategies in OT2

Access to instructor:

Office: Hosmer 303B

Office hours: by appointment

Telephone: 514-398-1021

E-mail: marie-eve.bolduc@mcgill.ca

Brief Description: This course will enable students to explore and apply fundamental therapeutic skills for competent practice in occupational therapy in upper extremity rehabilitation following injury.

Course Description: This professional complementary course will provide occupational therapy students with advanced knowledge and application of therapeutic skills in upper extremity rehabilitation. Students will define and identify their roles as occupational therapists in enabling occupation and function following upper extremity injury and further develop their verbal and written communication skills. Students will acquire knowledge about traumatically acquired and degenerative conditions, post-surgery protocols, upper extremity assessments, and treatment. They will build on their competencies in evidence-based clinical reasoning and critical thinking based on clinical and recovery profiles.

Course structure: This course includes 6 hours of in-class time per week for 9 weeks, comprising three-hour lectures and three-hour seminars.

Learning objectives: On completion of this course, the students will be able to:

1. Describe basic hand anatomy and physiology;
2. Describe various upper extremity conditions and injuries and their associated complications;
3. Identify health conditions and/or situations that can have an impact on effective healing;
4. Select, administer and analyze the results of various upper extremity assessments;

5. Recognize different rehabilitation interventions and compare and contrast them;
6. Design an upper extremity evidence-based occupational therapy treatment program optimizing occupation and engagement.
7. Communicate findings through professional occupational therapy reports (oral and written)
8. Justify the occupational therapy role in enabling occupation and function in upper extremity rehabilitation.

Course Content: The focus of the course will be on the occupational therapy assessment and treatment of traumatically acquired and degenerative conditions and post-surgery protocols. This process integrates client-centered practices with the clinical reasoning skills required for competent practice. Lecture and seminar themes for clinical thinking and professionalism to optimize occupational performance following upper extremity injury are outlined in the course schedule.

Course Materials:

- ❖ No text is required for this course.
- ❖ Suggested and required readings, handouts and lecture notes will be posted on WebCT.

Assignments and Evaluation: A more detailed description of each of the assignments and evaluation methods will be provided in the course schedule. Additional information will also be provided during the course of the semester.

EVALUATION METHOD/ASSIGNMENT	VALUE
Student's participation in class	10%
Case presentations	10%
Final clinical intervention project report	40%
Final exam	40%

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

Online Course Evaluations: Students are strongly encouraged to complete the online course evaluations at the end of the term. The feedback and suggestions from student responses are highly valued and helpful in ensuring that appropriate course revisions are implemented to best facilitate student learning.

Plagiarism/Academic Integrity statement: 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 www.mcgill.ca/students/srr/honest/) for more information).

Consequences of not completing assignments as requested: Any delays in submitting assignments or requests for extensions must be accompanied by a medical certificate. Late submissions will be penalized 5% per day, including weekends.

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. When working with clients or simulated patients, student must be dressed professionally.

Attendance: Attendance at all classes is expected.

Disability: If you have a disability you may register with the Office for Students with Disabilities at 398-6009. You are also welcome to contact the instructor to arrange a time to discuss your situation.

Right to submit in English or French written work that is to be graded: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded. However alternating between French and English within an assignment is not acceptable.

POTH 638 PROMOTING WELLNESS OF SENIORS

Credits: 3

Instructors: Isabelle Gélinas, PhD (Co-coordinator)
Patricia Belchior, PhD (Co-coordinator)

Course Objective: This is a professional elective course for Master's year one Occupational Therapy students. It is designed to address the complexity of the Occupational Therapy interventions with the older 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 and evidence-based approach to the evaluation and treatment of the older adult in different clinical scenarios. The course will be in a lecture/seminar. The instructors will use lectures, readings, discussions, presentations, critiques, field trips.

Course Structure: Three hours per week. All classes will include a lecture component, case-based instruction and applied portion where students will work on problem solving and clinical reasoning activities for a variety of geriatric clinical vignettes.

Learning Outcomes:

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 processes to the multidisciplinary team.
3. Explain the unique role of O.T. 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: Course pack for POTH 638
- ❖ All readings included in this course syllabus are mandatory unless otherwise indicated 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
- Recommended textbook: Functional performance in older adults (3rd Ed.). Bette R. Bonder & VANina Dal Bello-Haas. Publishers: F.A. Davis, 2009.

Student Assignment and Evaluation: The following assignments will be used to evaluate learning. A detailed description of these will be provided on WebCT and further explained in class.

- In class participation: 5%
- In class assignments: 30%
- Site visit: 20%
- Project: 45% (5% for outline, 40% for paper)

Participation will be evaluated by the instructor 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. All assignments must be produced with word processor, follow APA guidelines and not surpass the length determined by the instructors.

***Any requests for extensions or delays in submitting assignments must be accompanied by a medical certificate.

Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least B- (65%) must be obtained as a total course mark.

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

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

Attendance: 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."

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."

In the event of extraordinary circumstances beyond the University's control, the content and/or evaluation scheme in this course is subject to change.

POTH 640 ROLE-EMERGING MANAGEMENT

Credits: 3

Lecturers: C. Storr
Office: D2
Tel: 398-6561
caroline.storr@mcgill.ca

Pre-requisites: Satisfactory completion of M1Fall courses and OCC1501, OCC1502 and OCC1503.

Access to the Instructor: Office hours by appointment. Please email or call ahead to make appointment.

Course Description: This course is designed to incorporate business administration and management principles as it pertains to the health field to support entrepreneurial, professional practice both in the public and the private sector. It incorporates an understanding of organizational and change theory, human and fiscal resource planning, team building 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 balancing cost-effective, innovative services delivered according to ethical and legal guidelines providing optimal client outcomes within the changing healthcare landscape.

The goal of this course therefore is to address practice manager competencies appropriate for the changing roles that the occupational or physical therapy graduate will have in the years to come in order to support career planning and growth. The goal of this advanced elective is to support the development of existing and/or new programs within public institutions, services in the private sector and/or new emerging areas of practice for the rehabilitation therapist. Leadership and communication will be applied through a collaborative business plan project.

Course Structure: This elective course completes a 3-course professional sequence that offers students the foundational knowledge and skills for developing, leading and managing rehabilitation services in public, private and/or role-emerging areas of OT/PT practice. The course will be taught for 4-6 hours weekly throughout M1 term B and will consist of seminars, clinical reasoning workshops and site visits to private clinics. Group discussions will be based on selected readings, concepts and specific topics related to the group business plan projects.

Learning Outcomes: Building on knowledge of organizational theory, management, health care systems and human resource issues as taught in OCC1546/PHTH570 the student will be able to:

1. Evaluate and reflect on his/her own personal entrepreneurial traits and risk tolerance.
2. Understand the ethical responsibilities of a small business owner.
3. Evaluate system opportunities by performing a needs analysis for strategic program development.
4. Evaluate and analyze the components required to facilitate organizational growth and change.
5. Understand and differentiate the legal structures applicable to small businesses.
6. Plan, coordinate and assure quality program development including customer satisfaction.
7. Identify, discuss and apply sound human resource management principles including performance appraisal, mentoring and team motivation.
8. Develop a strategic marketing plan.
9. Plan and monitor the effective use of financial resources including identifying various funding sources through application and understanding of basic financial tools and concepts.
10. Create and present a credible business plan proposal

Course Schedule:

Date	Topic	Guest Lecturers
1. (13:00-15:00)	Entrepreneurship: Is it for me? (case)	C. Storr
2.(13:00-16:00)	Marketing management (case)	C. Storr
3.(13:00-16:00)	Opening your own practice: Requirements, risk and new trends	S. Benamron/C. Storr
4. (13:00-16:00)	Survival Finance Basics/ Business models for client satisfaction/Total quality improvement (case)	M. Ford/ Max Di Paulo/ C. Storr
5. (13:00-16:00)	Clinic visit	TBA
6. (13:00-16:00)	Clinic visit	TBA
7. (13:00-16:00)	Clinic visit	TBA
8. (13:00-16:00)	Clinic visit	TBA
9. (13:00-15:00)	Clinic presentations/discussions	C. Storr
10. (13:00-15:00)	Developing an Effective Business plan	C. Storr
11. (13:00-15:00)	Human resource management (case)	C. Storr
12. (13:00-16:00)	Questions on business plans: Open tutorial	C. Storr
13. (13:00-15:00)	Advertising and culturally-customized marketing pamphlets presentations	C. Storr
14. (13:00-15:00)	Human Systems Organization	Ronna Schwarz
15. (13:00-15:00)	Business plan presentations	C. Storr
16. (13:00-15:00)	Business plan presentations	C. Storr

Required Texts:

Richmond, T., and Powers, D. (2004). Business Fundamentals for the Rehabilitation Professional. Thorofare NJ: Slack Inc.

Assigned Readings (TBA)

Evaluation:

Written cultural pamphlet	20%
Class Cases Participation/notes	20%
Individual Critique of Class business plans	10%
Clinic projects	25%
Group Oral business plan presentation	25%

Special Requirements for Course Completion and Program Continuation:

In order to pass the course, a grade of at least B- (65%) must be obtained as a total course mark. This course falls under the regulations concerning individual and group evaluation. Please refer to the section on marks in the Rules and Regulations for Student Evaluation and Promotion.

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 www.mcgill.ca/students/srr/honest/ for more information).

Dress Code: Professionalism with respect to dressing is encouraged throughout the professional program. It is each student's responsibility to have appropriate, professional attire during lectures, presentations and site visits.

Attendance: Students are expected to attend every lecture. Attendance is compulsory for all group presentations and will be marked accordingly.

Right to submit in English or French written work that is to be graded: In accord with McGill University's Charter of Students' Rights, students in this course have the right to submit in English or in French any written work that is to be graded, except in courses in which acquiring proficiency in a language is one of the objectives. 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.

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.